



Phone: (800) 359 - 1450

Vital Care Home Infusion Fax: 877.426.0093

Local Phone: 828.728.3561

Health Options DME Fax: 828.726.0436

Serving North Carolina Since 1959

A staff of more than 60 caring professionals including:

- 8 Pharmacists
8 Pharmacy Technicians
Respiratory Therapists
Nurses and Nurse Aides
Cert. Diabetic Shoe Fitters
Cert. Mastectomy Fitters

ACHC Accredited

Health Options Vital Care Home Infusion

- Antibiotics
Pain Management
Total Parenteral Nutrition
Enteral Feeding
Infusion Pumps
And other Home IV and Nutritional Services

Health Options Medical Equipment & Supplies

- Home Oxygen
Respiratory Therapy Services
Diabetic Supplies
Wound Care Supplies
Incontinence Supplies
Phototherapy
Scooters
Wheelchairs
Lift Chairs
Walkers and Canes
And other equipment & supplies

Professional Compounding Lab

Health Options Long Term Care Institutional Pharmacy

Hometown Drug Stores Hudson Discount Drug College Discount Drug

Locations in Hudson, NC and Rutherford College, NC

New Study Suggests COPD Not Receiving Standard Care - Could Reduce Mortality by up to 40% -

A study published in the December issue of Chest found that COPD patients received only 58% of recommended care for chronic disease management. Researchers followed 429 patients in twelve U.S. communities. They used telephone interviews and reviewed two-years of prior medical records. They studied 4,058 care events. Mularski et al noted a dramatic underutilization of home oxygen. Only 32% of patients with baseline hypoxia received home oxygen prescriptions. Combining calculations of the number of hypoxic Americans and the observations of reduced mortality from home oxygen found in the Nocturnal Oxygen Therapy Trial, Mularski et al estimated that 27,000 to 57,000 deaths could be prevented each year simply by following the recommendations for prescribing home oxygen.



Hudson provides the most modern continuous, ambulatory oxygen

This unit weighs only 3.5 lbs and lasts 10 hours.

Two major studies have demonstrated home oxygen's beneficial effect on mortality: the British Medical Research Council Study2 and the Nocturnal Oxygen Treatment Trial (NOTT).3 The NOTT trial found continuous, ambulatory oxygen therapy to be superior to nocturnal oxygen therapy alone in decreasing mortality. Among their nocturnal oxygen group, mortality for hypoxic COPD patients dropped to 20.6%, but in the continuous, ambulatory oxygen group, mortality dropped to 11.9%. Another investigation found that patients treated with CPAP and long term oxygen therapy saw significantly fewer COPD related hospital admissions and realized shorter lengths of stay.4

Medicare and insurance pay for home oxygen systems. Simple oximetry can qualify your patient for home oxygen. Hudson will make pulse oximeters and overnight pulse oximeters available to your office when you have a patient you want to test. The main criteria for Medicare payment are as follows:

Qualifying Arterial Oxygen Saturation Values

- Continuous Oxygen Therapy
Supplemental & Nocturnal Oxygen
• Resting 88% or below
• Resting 89% with certain comorbidities: CHF, cor pulmonale, erythrocythemia with a hematocrit greater than 56%.
• Resting 89%
• After exercise, 88% or below qualifies oxygen for use during exercise
• During sleep, 88% or a drop of 5% or more qualifies for nocturnal oxygen



Because Patient Education Matters

The success of home health strategies depends greatly on patient understanding and adherence to the plan of care. Send your DME referrals to Hudson, because they take patient education seriously. At a typical home oxygen set-up, a Hudson staff member stays 30 minutes or more. A typical CPAP set-up takes one hour or more. Hudson Discount Drug helps ensure that your patient understands safety instructions and your plan of care.

Please tell your patients about Hudson Discount Drug & Health Options

References:

1. **Mularski R, Asch S, Shrank, et al. "The quality of obstructive lung disease care for adults in the United States as measured by adherence to recommended processes." Chest. 2006 Dec; 130(6): 1844-50.**
2. **"Long term domiciliary oxygen therapy in chronic hypoxic cor pulmonale complicating chronic bronchitis and emphysema." Report of the Medical Research Council Working Party. Lancet. 1981; 1:681-6.**
3. **"Continuous or nocturnal oxygen therapy in hypoxemic chronic obstructive lung disease: a clinical trial." Nocturnal Oxygen Therapy Trial Group. Ann Intern Med. 1980; 93: 391-398.**
4. **Clini E, Vitacca M, Foglio K, Simoni P, Ambrosino N. Long-term home care programmes may reduce hospital admissions in COPD with chronic hypercapnia. Eur Respir J 1996;9:1605-10.**