

ARE PATIENTS WITH CLUSTER HEADACHE PRESCRIBED SHORT-BURST HOME OXYGEN ADEQUATELY ASSESSED AND MONITORED?

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KEY MESSAGE • Significant gaps in oxygen governance and frequent patient safety risks were identified.

BACKGROUND

Cluster headache is a rare but highly disabling primary headache disorder affecting approximately 0.1% of the population. High-flow oxygen at 12-15 L/min via a non-rebreather mask is recommended as first-line treatment for acute attacks.

AIMS

To compare local practice with recognised home oxygen governance standards (London Respiratory Network guidance) and identify gaps in assessment, monitoring, prescribing and patient safety.

METHODS

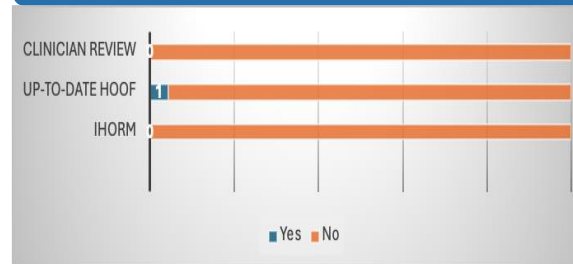
- Retrospective service evaluation across the Milton Keynes region.
- Patients prescribed short-burst home oxygen (SBOT) for cluster headache between July 2025 and January 2026 were identified from primary care records and home oxygen databases.
- Data included Home Oxygen Order Form (HOOF), Initial Home Oxygen Risk Mitigation (IHORM) assessment, home oxygen clinician review, flow rates/equipment, oxygen use and safety risks.

RESULTS

23 Patients identified (1 RIP)	54.5% High risk patients (smoking, COPD)
0% IHORM / clinician review	4.3% up-to-date HOOF

- 69.6% and 43.5% remained on oxygen for ≥ 5 years and >10 years respectively.
- 21.7% had oxygen flow rates outside recommended practice.

FIGURE 1. GOVERNANCE ASSESSMENT



WHAT THIS MEANS

Patients prescribed SBOT for cluster headache were not routinely assessed or monitored in accordance with recommended home oxygen governance standards.

FOLLOW-UP ACTION

- All patients received written communication and reviewed
- 9 oxygen prescriptions **DISCONTINUED**

CONCLUSION

Inclusion of cluster headache patients within commissioned Home Oxygen Assessment Services (HOAS) pathways may improve governance, optimise prescribing, reduce unnecessary oxygen provision and enhance patient safety.

REFERENCES

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CONSENT / PERMISSIONS • The authors confirm that appropriate permissions and processes for collecting and sharing any patient data have been followed.