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## **Hyperbaric Oxygen Therapy (HBO2) for Tissue Damage Including Wound Care and Treatment of Central Nervous System (CNS) Conditions**

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Health Technology Assessment Program

### **Key Questions – Public Comments**

July 20, 2012

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**Health Technology Assessment Program (HTA)**

Washington State Health Care Authority

PO Box 42712

Olympia, WA 98504-2712

<http://hta.hca.wa.gov>

[SHTAP@HCA.WA.GOV](mailto:SHTAP@HCA.WA.GOV)

(360) 725-5126

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**Hyperbaric Oxygen Therapy (HBO2) for Tissue  
Damage Including Wound Care and Treatment of  
Central Nervous System (CNS) Conditions**

***Response to Public Comments on Key Questions***

**July 20, 2012**

Prepared by:

HAYES, INC.  
157 S. Broad Street Suite 200  
Lansdale, PA 19446  
P: 215.855.0615 F: 215.855.5218

**Response to Public Comments of Key Questions**  
**Hyperbaric Oxygen Therapy (HBO2) for Tissue Damage Including Wound Care**  
**and Treatment of Central Nervous System (CNS) Conditions**

Hayes, Inc. is an independent vendor contracted to produce evidence assessment reports for the WA HTA program. For transparency, all comments received during the comments process are included in this response document.

Draft key questions for each WA HTA report are posted online in order to gather public input and any additional evidence to be considered in the evidence review. Since key questions guide the evidence report, WA HTA seeks input on whether the questions are appropriate to address its mandate to gather evidence on safety, efficacy, and cost-effectiveness relevant to coverage determinations. Input about the following is especially helpful:

- Are appropriate populations or indications identified?
- Are appropriate comparators identified?
- Are appropriate patient-oriented outcome measures included?
- Are there special policy or clinical considerations that could affect the review?

Comments related to program decisions, process, or other matters not pertaining to the evidence report are acknowledged through inclusion only. When comments cited evidence, the vendor was encouraged to consider inclusion of this evidence in the report.

This document responds to comments from **Neil Hampson, MD**. Table 1 provides a summary of comments with responses. No other parties submitted comments.

**Table 1. Public Comments on Key Questions for the use of HBOT**

Comment and Source	Response
<p>May 31 2012 Comments on Topic (letter from Neil B. Hampson, MD)                      Emeritus Physician, Virginia Mason Medical Center, Seattle; Past President, Undersea and Hyperbaric Medical Society; Clinical Professor of Medicine, University of Washington</p>	
<p>Hyperbaric oxygen should be considered as delivery of 100% oxygen at a pressure greater than 1.3 atmospheres absolute, not 1.0 atm abs.</p>	<p>Thank you for your comment.                      No change to Key Questions.</p>
<p>With regard to chronic radiation tissue injury the mechanism of benefit is considered to be the same at any site in the body. As such, I hope that you are willing to extrapolate the randomized, controlled data available and not expect that such long and costly studies be done for every bodily tissue.</p>	<p>Thank you for your comment.                      We will review and synthesize the available data on late radiation tissue damage according to how the published data defines the indication.                      No change to Key Questions.</p>
<p>I would suggest that you orient your investigation of other non-healing wounds towards those that are hypoxic and with potential to benefit from hyperbaric oxygen and not lump those together with reports of failure in chronic wounds that had no chance of responding in the first place'</p>	<p>Thank you for your comment.                      The review will include all the literature on non-healing wounds and will be stratified according to type of wound when possible.                      No change to Key Questions.</p>
<p>I would also suggest that you concentrate your review on those conditions that are treated most frequently and address little or no time to those that are listed but rarely treated anyway. The latter would include headache/migraine, sensorineural hearing loss, and multiple sclerosis.</p>	<p>Thank you for your comment.                      No change to Key Questions.</p>
<p>It would be helpful if you would make a statement about autism, a condition that hyperbaric medicine practitioners are asked to treat almost daily.</p>	<p>Thank you for your comment.                      No change to Key Questions.</p>
<p>Finally, I would like to see our state come out of this assessment as a leader in the field. That specifically involves statements on the requirements necessary for facilities and physicians to bill for hyperbaric oxygen treatment. I would recommend that our state adopt a policy of reimbursement only to those facilities accredited for safety and quality by the Undersea and Hyperbaric Medical Society and with at least one physician who is board-certified in Undersea and Hyperbaric Medicine through the American Board of Medical Specialties on the staff.                      A period of time could be allowed for those facilities not currently accredited facilities to apply for accreditation. This would help insure that Washington State citizens are treated as appropriately and safely as possible.</p>	<p>Thank you for your comment.                      No change to Key Questions.</p>