



# What Is the Relationship Between Rurality, Socioeconomic Factors, and Outcomes in Idiopathic Pulmonary Fibrosis?

## STUDY DESIGN

- **Retrospective study of patients with idiopathic pulmonary fibrosis (IPF)** from University of California, San Francisco Interstitial Lung Disease (UCSF ILD) Cohort from August 2001 to February 2020
- Included adult patients with IPF and pulmonary function tests within 12 months and **geocoded to their home address**

## RESULTS

	Large Central Metro (inner city) (N=241)	Large Fringe Metro (suburban) (N=220)	Medium/ Small Metro (N=323)	Rural (N=59)
Supplemental Oxygen Use (%)	38 (16.1%)	41 (19.2%)	58 (18.4%)	20 (34.5%)
FVC% ± SD	70.0 ± 18.3	72.4 ± 18.5	69.4 ± 17.5	66.6 ± 19.1
DLCO% ± SD	48.9 ± 19.1	53.7 ± 19.2	45.8 ± 16	43.4 ± 15.4
Public Insurance (%) (IQR)	25.5 (20.0-32.5)	26.4 (21.9-34.5)	34.2 (26.5-41.1)	40.0 (33.2-49.1)
Unadjusted Mortality (HR; 95% CI)	0.84 (0.52-1.34)	ref	1.05 (0.69-1.61)	1.67 (0.93-3.01)

Rural patients with IPF present to ILD specialty care with worse disease severity, higher frequency of reported oxygen use, lower PFTs, and a trend toward increased mortality when compared with their suburban counterparts.