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| User experiences of pulmonary rehabilitation: home-based with mHealth or centre-based. |
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| **Introduction:** Mobile health (mHealth) technology provides an innovative solution to improve access to pulmonary rehabilitation (PR). The study aimed to examine the experiences of people with chronic obstructive pulmonary disease (COPD) undertaking a PR program in a centre versus at home with a mHealth app (m-PR).  **Methods:** Purposive sampling was used to recruit participants with COPD enrolled in a prospective, multi-centre, equivalence randomised controlled trial after completion or withdrawal from either an 8 week home-based PR supported by m-PR or centred-based PR. Participants were invited to complete individual, semi-structured interviews. Interview transcripts were inductively open-coded and thematically analysed alongside reflective notes in consultation with the research team. A critical realist approach to evaluation was used.  **Results:** 22 participants were interviewed (mean age 75.6 years±8.2 (SD), 55% male), with 11 participants randomised to m-PR (8 completed, 3 withdrew) and 11 participants to centre-based PR (9 completed, 2 withdrew). Four major themes were identified from preliminary analyses: external motivators, internal motivators, program functionality, and living with and managing COPD. Motivators to exercise for both programs included reinforcement from staff and peers; internal reinforcement from the improvements experienced; and a feeling of accountability to staff and personal commitments. Family and staff encouraged the exercise routine and app use at home. App functions such as goal setting and monitoring were additional external motivators for m-PR participants. m-PR participants expressed more enjoyment with their program. They arranged the program around their schedule while centred-based participants arranged their schedule around the program. Education on COPD self-management was appreciated in both programs. Multi-morbidity and acute illness were barriers to completion and reasons for withdrawal in both programs.  **Conclusion:** Experiences of the centre-based program aligned with previous literature.m-PR enabled autonomy to the exercise routine through flexibility in timing, location and structure of exercise sessions.  **Grant Support:** NSW Health Translation Research Seed Grant  **Key Words:** Pulmonary Rehabilitation, mHealth, user experiences, |