The trial was stopped prematurely due to low recruitment. This was due to a combination of the impact of COVID-19 on research infrastructure, financial issues for sites with the payment structure for the trial and lack of equipoise which limited site recruitment. 7 of 25 patients eligible, interested patients were randomised after pre-screening, implying a lack of interest amongst patients in the study. Baseline characteristics indicated that patients were elderly (mean age 81) and predominantly male. Qualitative work with 11 patients and 23 other stakeholders concluded that ambulatory oxygen is desirable, acceptable and widely commissioned in the UK, such that further trials are not likely to be feasible. In conclusion, although we are not able to formally address our objectives of assessing efficacy and cost-effectiveness of ambulatory oxygen in idiopathic pulmonary fibrosis, it is unlikely that conducting another randomised clinical trial is feasible due to lack of equipoise.