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OSA: Exploring the Impact on Morbidity and Mortality

### Announcer:

Welcome to CME on ReachMD. This episode is part of our MinuteCE curriculum.

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### Dr. Rodriguez:

Hi, I'm Dr. Alcibiades Rodriguez and today we want to speak about Obstructive Sleep Apnea: Exploring the Impact on Morbidity and Mortality. First, definition of obstructive sleep apnea, it's a medical condition where the airway repeatedly, partially or completely closes during sleep. Once this process happens, the oxygen drops, and after that, there's an arousal which causes a surge in adrenaline and subsequent reopening of the airway. This issue may happen several times during the night, closing, opening, closing, opening, which can lead to fragmented sleep.

Normally, we find symptoms during sleep, such as loud, habitual snoring, gasping, choking for air, fragmented sleep, in some cases, insomnia, unrefreshing sleep, frequent urination at night, nightmares, but also, we have consequences during the day. Immediate one will be excessive daytime sleepiness, with persons fall asleep in inadequate situations. You also can have, in moderate to severe cases, morning headaches, mood changes, forgetfulness, difficulty with focus and concentration, declining work performance, and because of the sleepiness, it may lead to motor vehicle accidents. So, the consequences are multiple nighttime and daytime.

Patients at high risk for sleep disordered breathing, including obstructive sleep apnea, are obese patient, specifically with a BMI of more than 35, congestive heart failure, atrial fibrillation and noted cardiac arrhythmias, treatment refractory hypertension, type 2 diabetes, a stroke, pulmonary hypertension, and decreased concentration.

Why is the need of making people aware of sleep apnea? It's a significant challenge in the OSA management. It is the risk of disjointed treatment during the referral from general practitioner to a sleep expert. We need to make aware, not only the general practitioners, but the public about the risks obstructive sleep apnea. It is estimated that approximately 80% of persons with obstructive sleep apnea remain undiagnosed. This translates in about more than 900 million adults globally. If left untreated, it can significantly increase the risk of cardiovascular diseases, including hypertension, atrial fibrillation, heart failure, a stroke, pulmonary hypertension, and myocardial infarction. So, the need is huge.

What are morbidities that are associated with obstructive sleep apnea? Several, and affect different systems. Cardio and cerebrovascular disease, including hypertension 40%, coronary artery disease. There is a risk of stroke 2 to 4-times more than controls, pulmonary hypertension, cardiac arrhythmias – different cardiac arrhythmias, metabolic dysfunctions, increased glucose and triglyceride levels, excessive daytime sleepiness that may lead to motor vehicle accidents, and also impaired brain function with problems with memory, attention, and concentration. Also, there is a risk of social and sexual dysfunctions, and eye conditions that is not too much talked about, but it occurs not uncommonly, including glaucoma, non-arthritis ischemic optic neuropathy, floppy eye syndrome, retinal vein occlusion. Also, pulmonary conditions such as asthma exacerbation, depression, and overall, a decreased quality of life.

How about mortality? This is usually associated mostly with moderate to severe sleep apnea. Patients with severe OSA, death from all causes is 3.8 times higher than controls. Patient with severe OSA also, death due to cardiovascular disease is 5.2 times higher than controls. One of the treatments of obstructive sleep apnea is PAP therapy, the machine that opens the airway. This treatment reduces mortality in patient with OSA after stroke and reduces fatal and non-fatal cardiac events. So, therapy for moderate to severe sleep apnea helps decrease mortality.

And just to finalize this presentation, we see this graphic where we see the consequences of obstructive sleep apnea in our whole body, right, including the brain, the GI tract, the lungs, the heart, the genitourinary system. And also, in patients that will undergo surgical procedures, if left untreated, that can lead to more complications such as ICU transfer, respiratory complication and neurological complication.

Thank you.

**Announcer:**

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