

Transcript Details

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Challenges in Identifying, Assessing, & Monitoring Excessive Daytime Sleepiness in Obstructive Sleep Apnea

Announcer: Welcome to ReachMD.

This medical industry feature, titled “Challenges in Identifying, Assessing, & Monitoring Excessive Daytime Sleepiness in Obstructive Sleep Apnea” is provided in partnership with Jazz Pharmaceuticals, Inc. This program is intended for physicians.

Here’s Dr. Paul Doghramji, Senior Family Physician at Collegeville Family Practice and Medical Director of Health Services at Ursinus College.

Dr. Doghramji is a paid consultant for Jazz Pharmaceuticals, Inc.

Dr. Doghramji: Hi. I’m Dr. Paul Doghramji.

If a patient being treated for obstructive sleep apnea, or OSA, has continuing excessive sleepiness, it can be difficult for the patient to recognize and accurately report his or her symptoms. This makes it challenging for you to identify excessive sleepiness. Unfortunately, this happens in clinical practice.

Research indicates that patients don’t always report their excessive sleepiness as a symptom of OSA.

They may be sleepier than they realize, or hesitant to bring it up.

Recognizing excessive sleepiness requires direct input from patients, or from their spouse or partner about their personal experiences, which highlights the importance of discussing excessive sleepiness in OSA.

There are a number of reasons why.

Patients can adapt to their sleepiness, which means that some patients come to view their chronic sleepiness as normal.

Other patients use caffeine regularly, which tends to mask their sleepiness.

And some patients may deny the sleepiness they’re feeling and its effects on daily life.

Whatever the reason, when patients underreport symptoms, it can negatively affect their quality of life, not to mention pose potential risk to others.

For example, patients with excessive sleepiness may be at greater risk for motor vehicle accidents. In fact, patients with OSA incur a 2- to 3-fold increased risk for motor vehicle crashes compared with patients without OSA.

Patients may not fully recognize the extent of their sleepiness. Therefore, the American Thoracic Society guidelines recommend routinely asking patients with OSA about their sleepiness and educating them about the risks associated with excessive sleepiness.

Patient-physician dialogue is particularly important as excessive sleepiness doesn’t necessarily correlate with other OSA symptoms and can persist even when an improvement occurs in the patient’s AHI.

The Epworth Sleepiness Scale—also known as the ESS— is often used to collect patient-reported information on the level of daytime sleepiness.

Essentially, the short questionnaire asks patients to rate their probability of falling asleep in different common daily situations.

The ESS is the most often used assessment and can be administered in the waiting room or exam room.

The key takeaway is this: under-recognition of excessive sleepiness in OSA is common, and excessive sleepiness may lead to adverse consequences. Therefore, it's important for healthcare professionals to initiate the discussion about excessive sleepiness in OSA, rather than relying on patients to start the conversation.

Announcer: This program was brought to you by Jazz Pharmaceuticals, Incorporated.

To find out more about the challenges of identifying and monitoring excessive daytime sleepiness in obstructive sleep apnea please visit EDAandOSA.com. That's E-D-A-A-N-D-O-S-A.com.

If you missed any part of this discussion or to find others in this series, visit ReachMD.com/SleepScience. This is ReachMD. Be part of the knowledge.

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