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Early diagnosis, treatment of sleep apnea may reduce hospital readmissions for heart failure patients

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Early diagnosis and treatment of sleep apnea may reduce six-month readmissions for patients hospitalized with heart failure, according to research recently published online by the *American Journal of Cardiology*.

"Our research showed that early recognition and treatment of patients hospitalized with decompensated congestive heart failure is associated with a reduction in readmissions, for patients who use their positive airway pressure (PAP) therapy on a regular basis," said first author Sunil Sharma, M.D., FAASM, Associate Professor of Pulmonary Medicine in the Sidney Kimmel Medical College at Thomas Jefferson University. "Importantly, hospitals can implement cost-effective screening programs to catch sleep apnea in hospitalized, high risk patients."

Dr. Sharma and the team screened patients admitted to the hospital with heart failure, for underlying sleep disordered breathing. Of the 75 patients that followed up with an outpatient polysomnography, the gold standard test, 70 received the diagnosis of sleep disordered breathing. Over the next six months, the team tracked patients' PAP compliance, emergency room visits and readmissions. Compliance was monitored objectively by the device computer and defined as a minimum of four hours of use, 70 percent of the time, for four weeks consecutively or more during the first three months of therapy.

By comparing pre- and post-treatment readmissions in compliant (n=37) and non-compliant patients (n=33), the researchers found a reduction in hospital visits for those who used their PAP regularly over a period of six months.

"Physicians should be on the lookout for sleep apnea in patients with heart failure with the goal of diagnosing and treating early, which might help prevent readmissions and emergency room visits," Sharma said. "Multi-center, randomized studies are needed to replicate and validate these findings."

Source:

Thomas Jefferson University
