

Sleep Apnea May Not Be Closely Linked to Heart Failure Severity

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Obstructive sleep apnea (OSA) and central sleep apnea (CSA) are not markedly decreased in heart failure (HF) patients managed with beta-blockers and spironolactone, reports a study in the March issue of *Journal of Cardiac Failure* , published by Elsevier.

The study, “Prevalence and Physiological Predictors of Sleep Apnea in [Patients](#) with [Heart Failure](#) and Systolic Dysfunction,” was authored by Dai Yumino, Hanqiao Wang, John S. Floras, Gary E. Newton, Susanna Mak, Pimon Ruttanaumpawan, John D. Parker, and T. Douglas Bradley.

As heart failure is a major public health concern, it is important to identify treatable conditions that may occur alongside it. The high prevalence of OSA and CSA in patients with heart failure has been well recognized in recent years, but there is limited information about secular trends in its occurrence, despite important advances in the management of these patients since this phenomenon was recognized.

The study involved 218 heart failure patients with reduced ejection fraction (mean 24.7%) who underwent sleep studies between 1997 and 2004. Overall 47% had moderate to severe OSA or CSA. Both conditions were more prevalent in older age and in men. OSA was associated with greater [body mass index](#), whereas CSA was associated with atrial fibrillation, hypocapnia, and diuretic use.

These findings may have important implications for care HF patients with a prevalence of OSA and CSA because effective treatment of these

sleep-related breathing disorders may be beneficial in addition to treatment with beta-blockers and spironolactone.

"This study reemphasizes the high prevalence of sleep apnea, but unfortunately shows that despite the improvements in medical therapy and associated improvements in outcomes, the prevalence of sleep apnea has not diminished," commented Barry M. Massie, M.D., Editor-in-Chief of *Journal of [Cardiac Failure](#)*. "This may indicate that the severity of heart failure and the occurrence of sleep apnea are not closely linked, but that there are common risk factors for both, such as older age, male sex, and obesity.

More information: "Prevalence and Physiological Predictors of [Sleep Apnea](#) in Patients With Heart Failure and Systolic Dysfunction", *Journal of Cardiac Failure*, Volume 15, Issue 4, May 2009, Pages 279-285, www.elsevier.com/locate/cardfail

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