

Research shows that older patients with untreated sleep apnea need greater medical care

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Obstructive sleep apnea (OSA) is a common and costly medical condition leading to a wide range of health risks such as cardiovascular

disease, stroke, depression, diabetes and even premature death. Researchers at the University of Maryland School of Medicine (UMSOM) found that the medical costs are substantially higher among older adults who go untreated for the disorder.

The research, which was published in the *Journal of Clinical Sleep Medicine*, involved a review of a national sample of Medicare claims data. The researchers measured the [health care costs](#) over a year among Medicare beneficiaries who were 65 years and older and were ultimately diagnosed with OSA. They found that patients who went undiagnosed with OSA over a 12-month period had more doctor's appointments, emergency room visits, and hospital stays prior to being treated for the disorder. These patients on average had nearly \$20,000 more in costs a year than those who were diagnosed and treated for OSA, the research found.

"Sleep disorders represent a massive economic burden on the U.S. health care system," said Emerson Wickwire, Ph.D., Associate Professor of Psychiatry and Medicine at UMSOM and Director of the Insomnia Program at the University of Maryland Medical Center, Midtown Campus. Dr. Wickwire, who was the Principal Investigator for this research, explained that economic aspects of diseases are increasingly recognized as important drivers of health decisions by patients, those paying for services, policymakers and ultimately the taxpayers.

Medical costs among those untreated for OSA will continue to rise, Dr. Wickwire cautioned, highlighting the importance of early detection and treatment among [older adults](#)..

"We conducted the largest economic analysis of sleep apnea among older adults to date," said Dr. Wickwire. "Medicare beneficiaries with obstructive sleep apnea cost taxpayers an additional \$19,566 per year and utilized more outpatient, emergency, inpatient, prescription, and

overall health care services. It's important to realize that costs associated with untreated [sleep disorders](#) are likely to continue to accrue year after year, which is why our group focuses on early recognition and treatment."

Researchers also observed that Medicare patients with OSA were more likely to suffer from other ailments more so than those individuals without the sleep disorder. For example, OSA is linked to an increased risk for high blood pressure, diabetes, heart disease, stroke and depression. The study authors suggest that insurers, legislators, and health systems leaders consider routine screening for OSA in older patients, especially those with medical and psychiatric comorbidities, to better contain treatment costs.

"The good news is that highly effective diagnostic and treatment strategies are available. Our team is currently using big data approaches as well as highly personalized sleep disorders treatments to improve outcomes and reduce costs associated with sleep disorders," said Dr. Wickwire.

The research is critical as OSA affects up to 70% of elderly nursing home residents, and these individuals are at higher risk of death.

A 2016 report by the American Academy of Sleep Medicine estimated that undiagnosed OSA among U.S. adults costs \$149.6 billion annually. While the report projected it would cost the health care system nearly \$50 billion to diagnosis and treat every American adult with OSA, treatment would produce savings of \$100 billion. The current study in JCSM is the largest analysis to date of the economic burden of untreated OSA among older adult Medicare beneficiaries. Dr. Wickwire's research was funded by RedMed as an investigator-initiated grant.

"Early detection and treatment for disorders such as [obstructive sleep](#)

[apnea](#) is critical, particularly among older adults who face the risk of the most serious illnesses such as [cardiovascular disease](#), hypertension, stroke, and diabetes," said UMSOM Dean E. Albert Reece, MD, Ph.D., MBA, who is also Executive Vice President for Medical Affairs, UM Baltimore, and the John Z. and Akiko K. Bowers Distinguished Professor, University of Maryland School of Medicine.

More information: Emerson M. Wickwire et al, Older adult US Medicare beneficiaries with untreated obstructive sleep apnea are heavier users of health care than matched control patients, *Journal of Clinical Sleep Medicine* (2020). [DOI: 10.5664/jcsm.8128](https://doi.org/10.5664/jcsm.8128)

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