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Title: Obstructive sleep apnea in patients with idiopathic pulmonary fibrosis

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**Body:** Background: The outcome of patients with idiopathic pulmonary fibrosis (IPF) is poor. Breathlessness and coughing are usually progressive and about 50% of the patients die within 3 years after diagnosis. The role sleep disordered breathing in IPF should be investigated. Objective: The aim of this study was to investigate obstructive sleep apnea and associated daytime sleepiness in IPF patients and investigate the correlation between IPF and OSA. Subjects and Methods: 28 patients with IPF and 10 control subjects matched on age and BMI were included in the study. Sleep quality and its daytime consequences were assessed by the Epworth Sleepiness Scale and all-night polysomnography. Results: 23 patients had an abnormal ESS (82.1 %). 24 IPF patients (85.71%) had OSA; 21 patients(75%) had mild-to-moderate OSA, and 3 patients(10.71%) had severe OSA. AHI was statistically significant correlated with, ESS, FVC, and TLC. Conclusion: Patienta with IPF are at high risk for OSA that may account for reversible daytime fatigue, possibly wrongly ascribed to IPF. Further, without treatment the sleep deprivation and lack of oxygen caused by sleep apnea increases health risks that have a significant negative effect on prognosis of IPF that already carries a poor prognosis. Recommendation: sleep evaluation should be extended to IPF patients routinely and the scientific work should focus on the improvement of sleep quality during sleep in these patients.

	Normal	Mild OSA	Moderate OSA	Severe OSA
Patient no.	4	12	9	3
Patient %	14.29	42.85	32.14	10.71

The prevalence of OSA in IPF patients.

Ref. Aydogdu M, Firat GS, et al. Assessment of sleep with polysomnography in patients with interstitial lung disease.Tuberk Toraks 2006; 54:213-221.