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**Title:** Investigation of frequency of OSAS in patients with pulmonary hypertension by polysomnography

Dr. Aysel 11207 Sunnetcioglu izciayseli@mynet.com MD <sup>1</sup>, Dr. Bunyamin 12880 Sertogullarindan bunyaminsert@hotmail.com MD <sup>2</sup>, Dr. Hulya 12881 Gunbatar hunyagunbatar@hotmail.com MD <sup>2</sup> and Dr. Bulent 18950 Ozbay drbulentozbay@hotmail.com MD <sup>2</sup>. <sup>1</sup> Pulmonary Medicine, Van Teaching and Research Hospital, Van, Turkey and <sup>2</sup> Pulmonary Medicine, Yuzuncu Yil University, Faculty of Medicine, Van, Turkey .

**Body:** Aim: The aim of our study was to determine the frequency of OSAS in patients with PH by polysomnography. Material and Methods: Fifty-six (female/male = 35/21) patients with PH were enrolled in this study. Patients were grouped into four groups according to etiology (COPD, congestive heart failure (CHF), scleroderma, and isolated PH). Anthropometric features, tobacco consumption, pulmonary artery pressure (PAB) by echocardiography, the results of blood gas analysis, and hematocrit levels were recorded for all subjects. We performed Epworth sleepiness scale (ESS) to determine excessive daytime sleepiness. All patients were assessed by polysomnography. Results: The frequency of OSAS was found 60.7% (34/56) in patients with PH. It was found as 54.5%, 88.9%, 50%, and 58.3 in patients with COPD, CHF, scleroderma, and isolated PH, respectively.

## Frequency of OSAS in Groups

	OSAS present	OSAS Not Present	P
COPD	18 (54,5% )	15(45,5%)	>0.05
CHF	8(88,9%)	1(11,1 %)	>0.05
SCLERODERMA	7(58,3%)	5(41,7%)	>0.05
IPH	1(50,0%)	1(50,0%)	>0.05

The frequency of OSAS in patients with snore and apnea was higher than in patients without snore and apnea. OSAS was found in all of patients with daytime hypersomnolence. The patients with OSAS had higher neck circumference than others. Conclusion: The frequency of OSAS was found quite common in patients with PH than general population. It was shown that polysomnography should be used for OSAS diagnosis in patients with PH, especially PH with obscure etiology. The PH patients with high neck circumference must be questioned about symptoms of OSAS. If major symptoms are found,

polysomnographic sleep measures must be done.