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Title: Allergic rhinitis' impact on obstructive sleep apnoea (OSA)

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Body: Introduction: According to ARIA (Allergic Rhinitis and its Impact on Asthma), OSA has been associated with nasal disturbances, however the relationship between Immunoglobulin E-mediated Allergic Rhinitis (IgEAR) and OSA is not fully determined. Objectives: To analyse the impact of IgEAR on OSA. Methods: Patients (pts) referred to a sleep clinic performed overnight polysomnography during the month of August. Two indicators of rhinitis were considered for diagnosis: having a previous rhinitis diagnosis or having two or more nasal symptoms in the last 12 months. If present, Skin Prick Tests (SPT) to common aeroallergens were performed. IgEAR was considered when nasal symptoms were accompanied by positive SPT, whereas Non-IgE mediated Rhinitis (NIgER) occurred with negative SPT. Results: From 68 consecutive pts, OSA was diagnosed in 52 (77%), 75% male; mean age: 58 years old. 67% of OSA pts had rhinitis. The frequency of IgEAR and NIgER among OSA pts was 38% and 29%, respectively; 21% had a IgEAR diagnosis and 8% had taken drugs for this disease. Most pts had persistent (60%) and moderate-severe (75%) IgEAR symptoms. Most frequent nasal symptoms were sneezing and nasal pruritus (90%). Pts with IgEAR had significantly more severe OSA than pts with NIgER ($p=0.03$), with no differences in age, gender, obesity or sleep symptoms between groups. Those with more severe IgEAR symptoms had higher AHI ($p=0.04$). Conclusions: A high frequency of IgEAR was found among OSA pts (38%), which was underdiagnosed and undertreated. These pts had more severe OSA than patients with NIgER; their nasal symptoms severity was associated with higher AHI. The evaluation of IgEAR in OSA pts may contribute to improve these patients' clinical approach.