Sleep Apnea Severity Tied to Glycemic Control

BY SUSAN LONDON

SEATTLE — Treating obstructive sleep apnea in patients with type 2 diabetes may improve glycemic control, according to observational study results.

Dr. Renee Simon Aronsohn and colleagues enrolled 54 patients seen in outpatient clinics during 2000-2008 who had physician-diagnosed type 2 diabetes and were on stable doses of medication. A total of 29 patients (54%) were women, and 29 (54%) were black.

In a multivariate analysis that adjusted for potential confounders, mean HbA1c decreased significantly across OSA categories, with values of 6.5%, 7.1%, 7.8%, and 8.7% among patients with no, mild, moderate, and severe OSA, respectively.

The presence and severity of OSA were also associated with a more unfavorable metabolic profile, Dr. Togeiro noted. Both OSA groups had higher levels of total cholesterol, triglycerides, fasting glucose, and fasting insulin, and a higher homeostasis model assessment index, compared with the unaffected group.

In a multivariate analysis, participants with mild OSA had a nonsignificant increase in the risk of diabetes relative to their counterparts who did not have OSA (odds ratio 1.07), and participants with moderate or severe OSA had a significant near doubling of risk (odds ratio 1.97). OSA also was more prevalent in participants with diabetes. A total of 73% of individuals with diabetes had OSA, compared with 36% of those without diabetes, said Dr. Togeiro, who reported having no conflicts of interest.

—Susan London