

The firstly visited department affects the acceptance of continuous positive airway pressure therapy in patients with obstructive sleep apnea

Objective

This study aimed to determine the factors that influence the acceptance rate of CPAP.

Methods

This retrospective cohort study was conducted at the sleep center of Shuang-Ho Hospital. Initially, 1186 OSA patients who received CPAP therapy between December 2013 and December 2017 were selected, and finally, 1016 patients were analyzed. All patients with OSA received CPAP therapy for at least one week, and their acceptance of treatment was subsequently recorded.

Outcome measures included patients' demographic and clinical characteristics (sex, age, BMI, comorbidities, history of smoking, and the medical specialist who prescribed CPAP treatment), polysomnography (PSG) results, and OSA surgical records.

Results

Patients with a lower CPAP acceptance rate were referred from otolaryngologists (acceptance rate of otolaryngology vs. others: 49.6% vs. 56.6%, $p = 0.015$), in addition to having a lower apnea-hypopnea index (AHI) (acceptance vs. non-acceptance: 55.83 vs. 40.79, $p = 0.003$), rapid eye movement AHI (REM-AHI) (acceptance vs. non-acceptance: 51.21 vs. 44.92, $p = 0.014$), and arousal index (acceptance vs. non-acceptance: 36.80 vs. 28.75, $p = 0.011$). The multiple logistic regression model showed that patients referred from otolaryngology had a lower CPAP acceptance rate (odds ratio 0.707, $p = .0216$) even after adjusting for age, sex, BMI, AHI, REM-AHI, arousal index, comorbidities, and smoking status.

Conclusion

Before their initial consultation, patients may already have their preferred treatment of choice in mind, which is strongly linked to the type of medical specialists they visit, and as a result, affects their rate of acceptance of CPAP therapy. Therefore, physicians should provide personalized care to patients by exploring and abiding by their preferred treatment choices.

中文題目：初次看診的科別會影響阻塞性睡眠呼吸中止症病人對於陽壓呼吸器的接受度

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