Simple screening model for identifying the risk of sleep apnea in patients on opioids for chronic pain: an infographic

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ABSTRACT

Chronic pain patients taking opioids are at higher risk for obstructive sleep apnea (OSA) than the general population. Fifty million people in the USA have chronic pain and 20% of these patients are on opioids. Of these chronic pain patients on opioids, 59% had undiagnosed sleep apnea and 30.8% of these had severe OSA. A simple OSA screen using the STOP-Bang Questionnaire and resting daytime SpO₂ in the clinic can be very sensitive at detecting undiagnosed OSA. Those patients can be sent for definitive polysomnography (sleep study). However, this simple standard screening evaluation is not very specific and many patients without OSA end up receiving a sleep study that is expensive, time consuming and has limited

availability. Selvanathan *et al* propose an additional step to the screening model by adding a home oxygen desaturation test.¹ With this additional tool, the authors were able to rule out OSA for nearly 38% more patients than by just doing the STOP-Bang Questionnaire or resting oxygen saturation alone. The addition of home oximetry to detect oxygen desaturation events is a simple and effective way to screen for OSA in this high-risk population while reducing the number of patients without OSA who needed to undergo a sleep study.

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