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Research Title : *Sleep-disordered breathing in patients with acquired retrognathia secondary to rheumatoid arthritis*

Sleep-disordered breathing in patients with acquired retrognathia secondary to rheumatoid arthritis

Descriptipn : Background: Sleep-disordered breathing (SDB) is associated with a variety of conditions that cause upper-airway narrowing. It was hypothesized that upper-airway narrowing can occur in patients with rheumatoid arthritis (RA) when retrognathia develops secondary to temporomandibular joint (TMJ) destruction. Therefore, the aim of this study was to detect the prevalence of SDB in patients with acquired retrognathia secondary to rheumatoid arthritis and to assess the effi cacy of nasal continuous positive airway pressure (nasal CPAP) therapy in patients with SDB. Material/Methods: Employed were a questionnaire, lateral cephalometry, and overnight polysomnography in seven women and three men (mean age \pm SD: 50 ± 20 years, mean body mass index: 24.2 ± 5.7 kg/m²) with acquired retrognathia secondary to RA. Results: Three patients had severe obstructive sleep apnea (OSA) with apnea+hypopnea indices (AHI) >60 /hour, three had mild obstructive sleep hypopnea (AHI >10 /hour), and four had AHI <10 /hour. The three patients with severe OSA all had excessive daytime sleepiness and evidence of retrognathia. In these three patients the mean AHI decreased from 72/hour to 3/hour with nasal CPAP therapy. Conclusions: SDB occurs quite frequently in non-obese patients with acquired retrognathia secondary to RA. The severity of SDB is related to the degree of retrognathia and the presence of daytime sleepiness. Nasal CPAP therapy is effective and well tolerated in these patients

Research Type : Article

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Researchers :

Researcher Name (Arabic)	Researcher Name (English)	Researcher Type	Degree	Email
أ.د. / عمر العمودي		Researcher	أستاذ	

Attatchments :

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