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Investigation of Obstructive Sleep Apnea in Adult Non-Cyctic Fibrosis Bronchiectasis Patients

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Objectives: It can be considered theoretically that there may be air flow limitation and desaturation during sleep in the bronchiectasis accompanied by bronchial wall thickening and destruction, with intense secretions in the airways. There are few studies investigating the association of bronchiectasis and obstructive sleep apnea (OSA). The aim of this study was to investigate the presence of OSA in adult non-cyctic fibrosis bronchiectasis patients in adult age group.

Methods: The first 150 stable patients were randomized 1-1 who were admitted to the bronchiectasis follow-up polyclinic between 1 January 2018 and 1 January 2019, were diagnosed with bronchiectasis by thoracic computed tomography, without cyctic fibrosis, aged 18-65, has not had an episode of infection for 1 month, no other comorbidity known to affect sleep, not receiving oxygen or NIMV treatment were included in the study.

Results: Of 75 patients randomized to be included in the study, 24 did not accept polisomnography (PSG), 6 did not come to the PSG appointment, 2 were excluded due to insufficient sleep time in the PSG. 43 patients were included in the study and PSG was performed: the mean age of 43 patients was 50.13 ± 15.06 , 25 (58.1%) were female and 18 (41.9%) were male. 27 patients (62.8%) were diagnosed with OSA. 27 patients with OSA; 16 were mild (37.2%), 6 were moderate (14.0%) and 5 were severe (11.6%) OSA. In 39 (90.7%) patients with OSA; snoring (72.1%), witnessed apnea (37.2%), daytime sleepiness (76.7%) was one of the complaints. OSA was found in 2 (50%) of 4 patients with no main complaint.

Conclusion: OSA frequency is 1-4% in the general population in Turkey, this ratio is 62.8%, in patients with bronchiectasis, and it is so high compare to ratio of general population. Main complaints that will suggest sleep apnea are present in 90.7% of patients. 50% of patients without main complaints have OSA. PSG should be performed in all patients with bronchiectasis, even if they do not have main complaints about OSA.

Keywords: Bronchiectasis, OSA, OSAS