A multicentre randomised controlled trial and economic evaluation of continuous positive airway pressure for the treatment of obstructive sleep apnoea syndrome in older people: PREDICT

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Plain English summary

CPAP for the treatment of obstructive sleep apnoea syndrome

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Plain English summary

Obstructive sleep apnoea (OSA) is a condition in which the walls of the throat relax during sleep, repeatedly blocking the airway for a few seconds, which disrupts sleep and makes some people very sleepy in the daytime. OSA affects up to one in five older people, so as more people get older the best treatment needs to be found. OSA can be treated with continuous positive airway pressure (CPAP), in which the patient breathes pressurised air through a mask, keeping the throat open. CPAP is already known to help middle-aged people with OSA, but the benefit in older people is unknown.

We carried out the trial in 278 people with OSA syndrome (which means OSA plus symptoms of sleepiness) aged > 65 years in UK sleep centres. Some patients were randomly allocated to receive CPAP and some to receive their usual care without CPAP. We measured daytime sleepiness and treatment costs for 12 months. We took steps to avoid a biased result by ensuring that the researchers assessing the sleepiness were unaware of which treatment the patients received.

Our results showed that OSA syndrome patients treated with CPAP had significantly less daytime sleepiness than those who did not receive CPAP. We believe that this result is reliable because 83% of the patients who started the trial completed it. A comparison of the costs of treatment suggests that CPAP would meet the usual criteria for being funded by the NHS.

Overall, this study supports the use of CPAP in older people with OSA syndrome and shows that it would be good value for money in the NHS.

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