

Prevalence treatment and determinants of Obstructive Sleep Apnoea and its symptoms in a French population-based French cohort

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Introduction

Sleep Apnea is associated with increased morbidity and mortality. The disorder has been well studied in selected high-risk populations but few data exist on in the general population.

We aimed to assess the prevalence and determinants of sleep apnoea in France

Methods

The population based CONSTANCES cohort



>200 000 volunteers

Aged 18 to 69 years

From 21 departments throughout metropolitan France

Recruited between 2012 and 2020

Follow up performed through yearly self-questionnaires

2012	2013	2014	2015	2016	2017	2018	2019	2020
inclusion	follow-up	evaluation	Sleep QR					
	inclusion	follow-up	Sleep QR					
		inclusion	follow-up	Sleep QR	evaluation			
			inclusion	follow-up	Sleep QR	follow-up	evaluation	
				inclusion	Sleep QR	follow-up	evaluation	

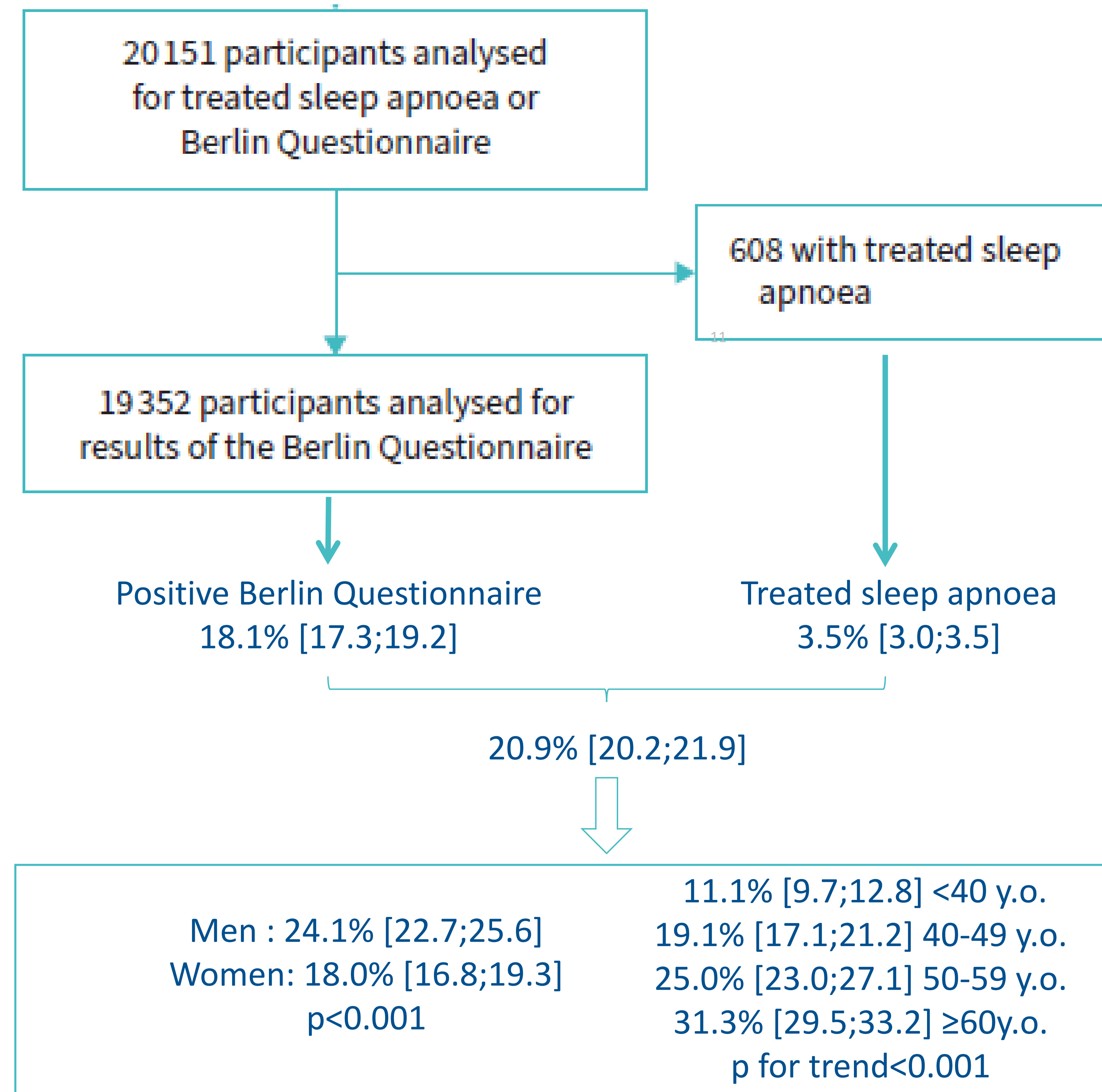
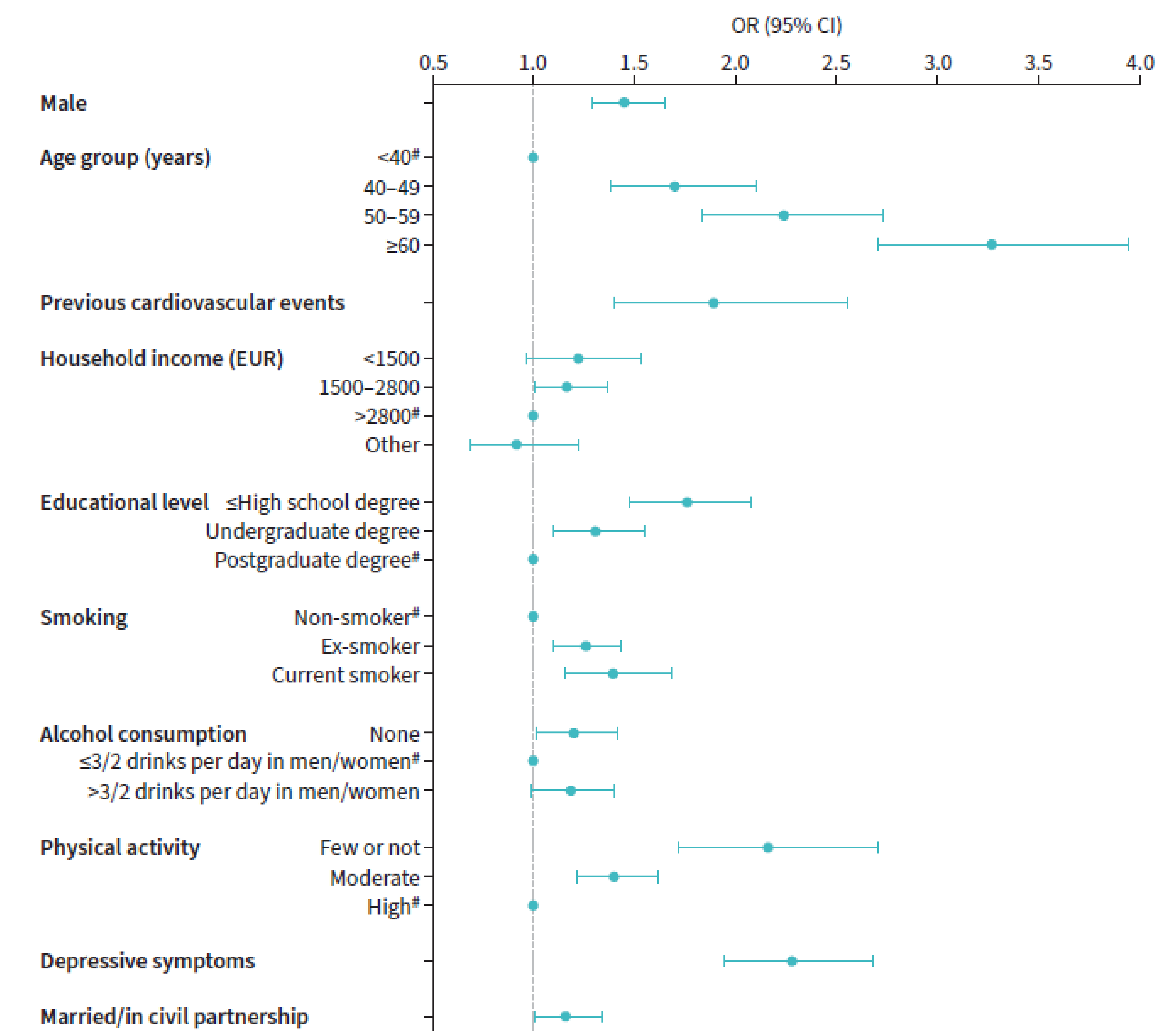
In 2017, participants screened for treated sleep apnoea and high risk of sleep apnoea using items of the Berlin Questionnaire

20,151 participants invited to participate in 2013 and 2014 analyzed (weighted data*) which provide a representative sample of the general French population covered by the general insurance scheme

*A weighting coefficient has been computed for each subject taking into account the survey weight and the non-participation correction factor, based on the follow-up of a control cohort of non-participants. Moreover, the probability of having completed the 2017 follow-up questionnaire was estimated for each participant in order to compute a participation weight for this follow-up. The product of this weight with the weight at baseline provided the final weight.

Results

In multivariate analysis treated sleep apnoea or high risk of sleep apnoea were associated with age, male sex, history of cardiovascular diseases, low education and physical activity levels, smoking and depressive symptoms*



Participants with treated sleep apnoea were older male, with more stroke history, a lower education and physical activity levels compared to those with positive Berlin questionnaire



*Adjusted for sex, age, marital status, household income, education level, smoking, alcohol consumption, physical activity, depressive symptoms and history of cardiovascular disease

Main Finding

One in five participants may have OSA, whereas only 3.5% were treated for the disorder, suggesting major underdiagnosis in the general population.

More attention should be given in people at high-risk such as older, obese or hypertensive adults, but also those with less recognized risk factors such as depressive symptoms as well as poor health behaviors and socioeconomic conditions.

