The use of continuous positive airway pressure (CPAP) in adults with obstructive sleep apnoea/hypopnoea syndrome (OSAHS) at Wythenshawe Sleep Service: a clinical audit

Authors: Abhinav Bhatia^A and Jessica Singleton^B

Introduction

Obstructive sleep apnoea/hypopnoea syndrome (OSAHS) is a chronic condition pertaining to episodes of airway obstruction during sleep, causing a disruption to breathing. The management of OSAHS is dependent upon its severity, with moderate or severe cases requiring continuous positive airway pressure (CPAP). CPAP is only recommended by the National Institute for Health and Care Excellence (NICE) in mild cases if lifestyle advice has been deemed inappropriate or unsuccessful.^{1,2} This audit aimed to explore the compliance of the regional sleep service at Wythenshawe Hospital with the NICE guidance for the management of OSAHS. NICE guidance helps patients to receive care which is based on the best available evidence.³ It ensures that patients are cared for in a consistent, evidence-based manner and helps to eliminate healthcare inequalities across the country. Ensuring that NICE guidance is implemented in day-to-day clinical practice is therefore of major importance.

Materials and methods

New patients referred to the regional sleep service for assessment of OSAHS from 1 October 2020 to 3 November 2020 were reviewed. Patients' clinic letters and sleep study results were analysed to ascertain the severity of their sleep apnoea and the management which they had. These data were collected into a spreadsheet for analysis.

Results and discussion

The results showed that 93% of cases were managed by the service in a manner compliant with NICE (Fig 1). It was also highlighted that the current NICE guidance is only a guide and that clinical discretion is required during particularly complex cases where there are many factors at play. NICE guidance cannot account for all these different factors. A re-audit is recommended following the

Authors: ^AManchester University NHS Foundation Trust, Manchester, UK; ^BEast Lancashire Hospitals NHS Trust, Blackburn, UK

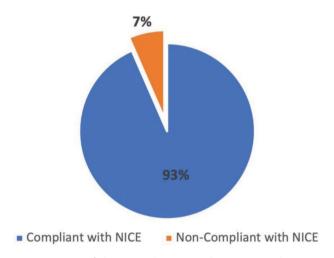


Fig 1. Proportion of obstructive sleep apnoea/hypopnoea syndrome management compliant with National Institute for Health and Care Excellence guidelines.

publication of the new NICE guidance in August 2021 to ensure that standards are being maintained.

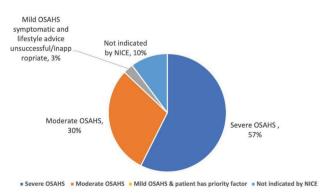


Fig 2. Indication for those offered continuous positive airway pressure.

Conclusion

This audit confirmed that all patients with moderate or severe OSAHS were offered CPAP as per the NICE guidance (Fig 2). Management plans which were non-compliant with NICE were all mild OSAHS cases who were offered CPAP at the discretion of the consultant, which appears to be justified. NICE guidance cannot account for all clinical scenarios and sometimes clinical decision making must be used by the consultant.

References

1 National Institute for Health and Care Excellence. Obstructive

- sleep apnoea/hypopnea syndrome and obesity hypoventilation syndrome in over 16s: Draft for consultation, March 2021. NICE, 2021. www.nice.org.uk/guidance/gid-ng10098/documents/draft-guideline [Accessed 14 March 2022].
- National Institute for Health and Care Excellence. Continuous positive airway pressure for the treatment of obstructive sleep apnoea/hypopnoea syndrome: Technology appraisal guidance [TA139].
 NICE, 2021. www.nice.org.uk/guidance/ta139/chapter/1-Guidance [Accessed 14 March 2022].
- 3 National Institute for Health and Care Excellence. Benefits of implementing NICE guidance. NICE, 2021. www.nice.org.uk/about/ what-we-do/into-practice/benefits-of-implementing-nice-guidance [Accessed 14 March 2022].