

Diagnosis: Obstructive Sleep Apnea

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	Pathophysiology Summary	Signs and Symptoms (subjective)	Physical Assessment Findings (objective)	Pharmacologic Recommendations
<p>Diagnosis: Obstructive Sleep Apnea</p>	<p>Obstructive sleep apnea (OSA) occurs by recurrent collapse of the pharyngeal airway during sleep, which in turn results into a partial blockage of the airway (hypopnea) or complete cessation (apnea). The disruption of the breathing pattern leads to intermittent blood gas disturbances (hypercapnia & hypoxemia) and activation of the sympathetic nervous system. (Eckert & Malhotra, 2008)</p> <p>As the patient sleeps on his/her back it causes the base of their tongue to adhere to the posterior pharyngeal wall and soft palate causing an</p>	<p>Upon assessment patient complains of:</p> <ul style="list-style-type: none"> • Chronic loud snoring • Intermittent gasping or choking episodes during sleep • Increased daytime sleepiness • Increased drowsiness when driving • Automobile or work-related accidents due to fatigue • Decreased concentration related to fatigue • Personality changes due to fatigue • Extreme fatigue throughout the day 	<p>Upon physical assessment patient is observed:</p> <ul style="list-style-type: none"> • Obese-overweight • Measurement of neck circumference: >17 inches in male and >16 inches in females • Nasopharyngeal narrowing • Hypertension <p>Perform head to toe physical assessment and compare previous history. Ask patient:</p> <ul style="list-style-type: none"> • About their sleeping pattern • Energy status <p>Diagnostic testing:</p> <ul style="list-style-type: none"> • CBC/ BMP: rule out any underlying health conditions • Polysomnography : done in a sleepover laboratory which evaluates sleep stages, airflow and ventilatory effect, arterial oxygen saturation, electrocardiogram, 	<p>Obstructive sleep apnea can be treated by nonsurgical or surgical procedures and does not have a specific medication regimen. Like obesity is one of the most prevalence risk factor that is associated with obstructive sleep apnea, the patient is recommended to start a weight loss program to help reduce sleep apnea. The nonsurgical procedures include continuous positive airway pressure (CPAP) and oral appliances.</p> <ul style="list-style-type: none"> • CPAP <ul style="list-style-type: none"> -moderate to severe cases -provides a steady stream of pressurized air to patients using a mask to help maintain an open airway -prevents the progression of complications and accidents owing to sleepiness (Hubert & VanMeter, 2018) • Oral appliance <ul style="list-style-type: none"> -mild to moderate cases -aids in maintaining an open and unobstructed airway -repositions or stabilizes the lower jaw, tongue,