Good News: Dentists are Competent in Diagnosing Undiagnosed Sleep Apnea

Sir,

Obstructive sleep apnea (OSA) is a sleep-related breathing disorder characterized by the narrowing and blockage of upper airways and inevitable arousal in the night. The disorder is often neglected by patients and healthcare professionals; therefore, it has now become one of the public health issues. Undiagnosed OSA leads to diabetes, stroke, road accidents, and death. It is a mixture of various symptoms such as insomnia, frequent snoring, morning headaches, and paused breath, which are further associated with numerous other disorders. Despite evident symptoms of OSA, why is it ignored largely? Who should be blamed for negligence, patient or physician? In reality, the affected individuals are not aware of disturbed sleep and mostly consider themselves as heavy snorers. Moreover, OSA is often anecdotally diagnosed by the partner but mostly taken lightly without realizing the threats. Unfortunately, in the absence of proper information from the partner, physicians often fail to diagnose OSA.

Dentists have secured an important role in the medical team of OSA management since the introduction of oral devices by American Academy of Sleep Medicine. However, their efficiency in diagnosing is under question owing to the assumption that OSA is purely a medical condition. Secondly, the lack of information on sleep medicine in dental curriculum does not prompt them to take responsibility for diagnosing this life-threatening disorder. Thereby, around 80% of moderate and severe cases go undetected. Current spent out in the United States has reached US$150 billion per year, which is a threat to economy. Are these numbers shocking to you, as to me? Thus, how can we identify the undiagnosed subjects?

Many of the patients, who usually do not need to visit a physician for years, might visit dental clinics with some regularity. Thus, the dentists can further be complemented to be the first healthcare professionals to identify an unrecognized OSA. In the light of current findings, dentists could be better sleep apnea diagnosticians than the specialized physicians. It is because the two main visible signs of this disorder are enlarged tonsils and tongue, which could be noticed during a dental check-up. Therefore, despite the independent risk-factors, such as obesity, hypertension, smoking, and alcohol, the stated intra-oral signs aid the dentists in diagnosing OSA a step ahead. Furthermore, by nature, dentists are engaged in close association with intra-oral anatomy, which undoubtedly favors the undiagnosed OSA patients and mutually help the physicians to treat the hidden risk-factors. Henceforth, we should not miss the opportunity in referring an undiagnosed OSA patient to our medical colleagues.

REFERENCES


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