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Introduction: Despite widely available efficacious treatments for obstructive sleep apnea (OSA), patients commonly report frustration in accessing and adhering to treatments. Sparse research has explored factors influencing OSA care from the patient perspective, which may limit provision of patient-centered care: care responsive to patient preferences, needs, and values. To this end, we conducted qualitative research to identify factors, voiced by patients, that influence OSA treatment initiation and adherence.
Methods: We performed semi-structured interviews with 15 patients previously diagnosed with OSA from Boston, MA and a national patient portal (MyApnea.Org). Patients were asked about barriers and facilitators to their diagnosis and treatment as well as about their preferences and values that informed their treatment decisions. Interviews were audio-recorded and transcribed. A qualitative content analysis was performed to identify themes. After developing a codebook, interviews were coded. Codes were then audited and finalized by study team consensus.
Results: Our sample was aged 25-74 years; 71% identified as female. Among participants, 57.1% identified as White, 14.3% Black, 14.3% Asian, and 14.3% Other. Major themes were broadly classified as (1) facilitators (provision of useful information on treatment options, participation in shared decision-making, continued clinician support); (2) barriers (inconvenience of treatment, difficulty of habit formation, treatment side effects, competing comorbid conditions); (3) motivators (value of improving chronic health, family support, positive treatment effects); (4) contextual factors (insufficient knowledge/awareness of OSA, navigating healthcare systems, access to informational resources). Awareness of OSA symptoms and treatments, and ongoing support were cited as the most common factors influencing the patient experience.
Conclusion: This formative research highlights that diverse factors impact the OSA evaluation and treatment patient experience. Further research should test interventions that promote effective patient-centered care for OSA, such as shared decision-making tools.
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0625

THE EFFECTS OF TOPICAL NASAL STEROIDS ON CONTINUOUS POSITIVE AIRWAY PRESSURE COMPLIANCE IN PATIENTS WITH OBSTRUCTIVE SLEEP APNEA

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Introduction: Continuous positive airway pressure (CPAP) for treatment of moderate to severe obstructive sleep apnea can produce troublesome nasal symptoms (i.e. congestion, rhinorrhea, sneezing, itching) that may affect the continuity and decrease the compliance of CPAP. Topical nasal steroids are often prescribed to reduce these side effects, although recent studies are scarce supporting any benefit of this treatment for CPAP-induced nasal side effects.
Methods: 80 patients who were previously diagnosed with OSA and pretreatment nasal symptoms were enrolled. All of them were selected for CPAP treatment and divided randomly into two groups. The study group was prescribed Fluticasone furoate nasal spray 55 ug daily before bedtime. The patients' compliance to CPAP was recorded by the memory card in CPAP device. Total nasal symptom score was assessed using a questionnaire by direct interview. The follow-up was performed in 30 and 90 days after treatment.
Results: The compliance to CPAP (Percent days with usage, Average time usage and Percent of days with usage ≥ 4 hours) increased in both groups with higher significance in topical nasal steroid group (P-value=0.002, 0.001, 0.002) after 90 days of treatment. There was no difference in nasal symptom between both groups after 30 days of treatment. However, addition of topical nasal steroid resulted in decreased rhinorrhea and congestion symptom (P-value <0.001, <0.001) after 90 days of treatment.
Conclusion: The addition of topical nasal steroid decreased the frequency of nasal symptoms (esp. rhinorrhea and congestion) in OSA patients initiating CPAP therapy and increased the compliance to CPAP after 90 days of treatment.
Support: Keywords: Obstructive sleep apnea, Continuous positive airway pressure, CPAP, Topical nasal steroid

0626

WITHDRAWN

0627

COGNITIVE PERCEPTIONS IMPACT SHORT-TERM CPAP ADHERENCE IN ASIAN PATIENTS WITH OBSTRUCTIVE SLEEP APNEA

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Introduction: Adherence for the gold standard Continuous Positive Airway Pressure (CPAP) treatment for obstructive sleep apnea (OSA) is poor worldwide. Studies have explored factors impacting CPAP adherence but data is limited for Asian patients where cultural and social norms differ. This study aimed to examine the role of disease and treatment-related perceptions in short-term CPAP adherence among patients from a multi-ethnic Southeast Asian country.
Methods: 34 patients with newly diagnosed OSA were recruited from Changi General Hospital, a 1000-bed tertiary hospital in Singapore between September 2018 and February 2019. Psychological factors of self-efficacy, risk-perception and outcome expectancies were assessed with the Self-Efficacy Measure for Sleep Apnea (SEMSA) questionnaire. The SEMSA questionnaire has been previously validated for the evaluation of adherence-related cognitions. Patients were administered the SEMSA questionnaire before commencement of CPAP treatment and 1 month after.
Results: 73.5% (25/34) of the patients were male (82.4% Chinese, 11.8% Malays, 2.9% Indians, 2.9% others). Mean age was 43.3 ± 11.8 years, mean apnea hypopnea index (AHI) was 45.2 ± 29.6 events/hr and mean CPAP usage at one month was 3.6 ± 2.0 hours. 47% were adherent to CPAP, defined as average device use > 4 hrs/day. Pre-treatment self-efficacy was significantly correlated with CPAP adherence (r = 0.498, P<0.01). Outcome expectancies and self-efficacy measured after one-month CPAP use were significantly

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