

# AASM CLINICAL PRACTICE GUIDELINE TREATMENT OF OBSTRUCTIVE SLEEP APNEA AND SNORING WITH ORAL APPLIANCE THERAPY



The Clinical Practice Guidelines for the treatment of Obstructive Sleep Apnea and snoring with oral appliances were updated in June of 2015 and published in *Journal of Clinical Sleep Medicine*.

The guidelines expand the role of OAT (Open Airway Therapy) in the treatment of adult patients with obstructive sleep apnea.

## PATIENT PREFERENCE COUNTS

Sleep physicians should consider prescription of OAT for patients with obstructive sleep apnea who are intolerant of CPAP therapy or prefer alternate therapy — regardless of severity.

- The benefits of treatment clearly outweigh the harm of no treatment
- Improvement in quality of life indices are not inferior to CPAP
- Patient preference is an important consideration when prescribing oral appliance therapy

## CUSTOM DEVICES ARE PREFERRED

When oral appliance therapy is prescribed by a sleep physician, a qualified dentist should use a custom, titratable device.

- Custom titratable devices reduce AHI, arousals index and oxygen desaturation index and improve oxygen saturations to a greater extent than non-custom devices.

## FOLLOW-UP IS IMPORTANT

A qualified dentist should provide oversight for patients using a OAT to survey for dental related side effects or occlusal changes.

- While oral appliances have been shown to be safe and effective, the long term dentalside effects need to be carefully monitored by a qualified dentist.

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