

CPAP doesn't alter renal function in coexisting OSA, CVD

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events. The findings were not influenced by the level of CPAP adherence.

"CPAP treatment of OSA in patients with cardiovascular disease does not alter <u>renal function</u>, nor the occurrence of renal <u>adverse events</u>," the authors write.

Respironics Sleep and Philips Respironics provided funding for the trial.

More information: <u>Abstract</u> <u>Full Text (subscription or payment may be required)</u>

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(HealthDay)—For individuals with coexisting obstructive sleep apnea (OSA) and cardiovascular disease, continuous positive airway pressure (CPAP) does not alter renal function, according to a study published online July 25 in the *American Journal of Respiratory and Critical Care Medicine*.

Kelly A. Loffler, Ph.D., from Flinders University in Daw Park, Australia, and colleagues examined the effects of CPAP on renal function in individuals with coexisting OSA and <u>cardiovascular disease</u> in a substudy of the international Sleep Apnea and Cardiovascular Endpoints trial. Renal function and adverse events were compared between 102 CPAP treated and 98 usual-care treated patients.

The researchers found that after a median period of 4.4 years, the median change in estimated glomerular filtration rate did not differ significantly between the CPAP and usual-care groups. No between-group differences were seen in the end-of-study urinary albumin:creatinine ratio or the occurrence of serious renal or urinary adverse

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