

Sleep apnea in pregnancy linked to metabolic syndrome, hypertension

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(aRRs, 2.02 and 1.53, respectively). Higher risks for both HTN and MetS were seen for participants with an AHI ≥ 5 in pregnancy that persisted after delivery (aRRs, 3.77 and 2.46, respectively). For persistent postdelivery ODI ≥ 5 , similar associations were seen.

"These results suggest that use of simple oxygen monitoring devices may be useful for identifying women in pregnancy and in the postdelivery period at risk for [adverse health outcomes](#) and identifying women who may potentially benefit from treating [sleep apnea](#)," a coauthor said in a statement.

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(HealthDay)—Sleep-disordered breathing (SDB) in pregnancy is associated with an increased risk for metabolic syndrome (MetS) and hypertension (HTN) after delivery, according to a study published online Feb. 11 in the *American Journal of Respiratory and Critical Care Medicine*.

Francesca Facco, M.D., from the University of Pittsburgh School of Medicine, and colleagues examined whether SDB in [pregnancy](#) and/or after delivery is associated with HTN and MetS among 1,964 participants who underwent SDB assessment during their first pregnancy and 1,222 who underwent repeat SDB assessment at two to seven years after pregnancy. Apnea-hypopnea index (AHI) ≥ 5 and oxygen desaturation index (ODI) ≥ 5 were used to define SDB.

The researchers found that given an AHI ≥ 5 during pregnancy, the adjusted risk ratio (aRR) was 1.44 for MetS, but no association with HTN was observed. Increased risks for HTN and MetS were observed in association with ODI ≥ 5 in pregnancy

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