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AAOMS Paper States Jaw Advancement Surgery May Be Primary Treatment for Select Obstructive Sleep Apnea Patients

[Rosemont, IL, August 28, 2013] Surgical treatment may be a primary option for select obstructive sleep apnea patients who have airway narrowing and anatomy that is surgically correctible, and patients for whom nonsurgical therapies, including continuous positive airway pressure (CPAP) therapy, are inadequate or not tolerated, according to [“Evaluation and Management of Obstructive Sleep Apnea - Overview,”](#) a position paper published by the American Association of Oral and Maxillofacial Surgeons (AAOMS.)

Obstructive Sleep Apnea (OSA) is a common disorder involving the collapse of the upper airway during sleep. . It is estimated that upwards of 18-20 million adults in the US require treatment for this disorder, which causes interrupted sleep, daytime drowsiness, diminished cognitive function and an impaired quality of life.

In most adult patients with moderate to severe OSA, continuous positive airway pressure (CPAP) is the first line of treatment. Successful long term treatment with CPAP is difficult to achieve, however, and research has shown that fewer than 50% of patients on CPAP are adequately treated¹. Therefore, it is important that other treatment options must be available to patients with OSA.

Oral and maxillofacial surgeons utilize a variety of hard and soft tissue surgical treatments to help manage OSA. Outside of tracheostomy, maxillomandibular (Jaw) advancement surgery is considered to be the most effective and often the most well accepted therapy for severe obstructive sleep apnea. Surgery for OSA has been shown to improve sleep disordered breathing, as well as important clinical outcomes including improvement in daytime sleepiness and quality of life

While a diagnosis should only be made by a qualified physician who is trained in sleep medicine, oral and maxillofacial surgeons have acquired unique knowledge and extensive training during their residencies in upper airway and facial anatomy, physiology and surgery. As

such, they are uniquely qualified to perform jaw advancement surgery and techniques, and to manage the medical and perioperative surgical care of these patients.

To view the entire position statement on the evaluation and management of obstructive sleep apnea, visit <http://www.aaoms.org/members/resources/aaoms-advocacy-and-position-statements>.

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ⁱ Weaver TE, Grunstein RR; Adherence to continuous positive airway pressure therapy: the challenge to effective treatment, Proc Am Thorac Soc. 5(2):173-8, 2008