

This fact sheet explains the Task Force's draft recommendation on screening for obstructive sleep apnea. It also tells you how you can send comments about the draft recommendation to the Task Force. Comments may be submitted from June 14 through July 11, 2016. The Task Force welcomes your comments.

Screening for Obstructive Sleep Apnea

The U.S. Preventive Services Task Force (Task Force) has issued a **draft recommendation** statement on *screening for obstructive sleep apnea (OSA)*. It found that there is not enough evidence to make a recommendation for or against screening.

This draft recommendation statement applies to adults who do not have symptoms of OSA. It does not apply to adults who are being treated for OSA or who have conditions that can trigger OSA, such as a stroke. It also does not apply to children, adolescents, or pregnant women.

What is obstructive sleep apnea?

Obstructive sleep apnea (OSA) is a sleep disorder in which the throat can narrow and block the flow of air from the nose and mouth to the lungs, causing a person to stop breathing many times during sleep.

Facts about Obstructive Sleep Apnea

OSA is usually an ongoing condition that disrupts a person's sleep. Most people who have OSA do not know it because it happens only during sleep. Snoring is often a sign of OSA. Symptoms of OSA include daytime sleepiness, fatigue, and insomnia (trouble getting to sleep or staying asleep). The lack of sleep caused by OSA also can lead to mood changes and problems with memory or concentration.

Men are more likely than women to have OSA, and the risk increases as people get older. People who are overweight or obese also have a higher risk of OSA.

Some studies have found that people with OSA may have a greater chance of heart disease, motor vehicle accidents, reduced quality of life, and an increased risk of death, although it is not clear that OSA causes any of these things. The most recent data from the 1990s suggests that OSA may affect at least 10% of the U.S. population.

Screening and Treatment for Obstructive Sleep Apnea

Although the Task Force did not find enough information to be able to recommend for or against screening, potential screening tools for OSA include questionnaires that ask about symptoms or factors that increase a person's likelihood of having OSA.

Commonly, OSA may be treated with breathing devices that try to keep the airway open during sleep. Other treatments for OSA that have been explored include weight loss and surgery to widen breathing passages.

Potential Benefits and Harms of Screening for Obstructive Sleep Apnea

The Task Force looked for research about potential benefits of screening for OSA. It did not find enough evidence to determine whether or not screening people without symptoms of OSA is beneficial. The Task Force also did not find enough evidence about harms of screening.

The Draft Recommendation on Screening for Obstructive Sleep Apnea: What Does It Mean?

Here is the Task Force's draft recommendation on screening for OSA. It is based on the quality and strength of the evidence about the potential benefits and harms of screening for this purpose. Task Force recommendation grades are explained in the box at the end of this fact sheet.

When there is not enough evidence to judge the benefits and harms of screening, the Task Force does not make a recommendation for or against—it issues an **I Statement**.

If patients have concerns that they might have OSA, they should talk with their clinician.

Before you send comments to the Task Force, you may want to read the full [draft recommendation statement](#). The draft recommendation statement explains the evidence the Task Force reviewed and how it decided on the grade. An [evidence document](#) provides more detail about the scientific studies the Task Force reviewed.

The USPSTF concludes that the [current evidence is insufficient](#) to assess the balance of benefits and harms of screening for obstructive sleep apnea (OSA) in [asymptomatic](#) adults.

I Statement

Notes

[current evidence is insufficient](#)

The Task Force did not find enough information to determine whether or not OSA screening is beneficial or harmful.

[asymptomatic](#)

Having no symptoms of OSA.

What is the U.S. Preventive Services Task Force?

The Task Force is an independent, volunteer panel of national experts in prevention and evidence-based medicine. The Task Force works to improve the health of all Americans by making evidence-based recommendations about clinical preventive services, such as screenings, counseling services, or preventive medicines. The recommendations apply to people with no signs or symptoms of the disease being discussed.

To develop a recommendation statement, Task Force members consider the best available science and research on a topic. For each topic, the Task Force posts draft documents for public comment, including a [draft recommendation statement](#). All comments are reviewed and considered in developing the final recommendation statement. To learn more, visit the [Task Force Web site](#).

Click Here to Learn More About Obstructive Sleep Apnea



Sleep Apnea

(National Heart, Lung, and Blood Institute)



Obstructive Sleep Apnea

(MedlinePlus)

USPSTF Recommendation Grades

Grade	Definition
A	Recommended.
B	Recommended.
C	Recommendation depends on the patient's situation.
D	Not recommended.
I statement	There is not enough evidence to make a recommendation.

[Click Here](#) to Comment on the Draft Recommendation



The Task Force welcomes comments on this draft recommendation.



Comments must be received June 14 through July 11, 2016.



All comments will be considered for use in writing final recommendations.