

# **Tilmelding af Foredrag**

## Foredragets titel

Cardiovascular Risk in Young Patients Diagnosed with Obstructive Sleep Apnea

## Forfatter(e)

I. Albertsen (1)

J. Bille (2)

G. Piazza (3)

G. Y. H. Lip MD (4, 5)

P: B. Nielsen (5, 6)

# Afdeling/praksis

- 1) Department of Otolaryngology, Head and Neck Surgery and Audiology, Aalborg University Hospital, Aalborg, Denmark.
- 2) Department of Otolaryngology, Head and Neck Surgery and Audiology, Aarhus University Hospital, Aarhus University Hospital, Aarhus, Denmark.
- 3) Division of Cardiovascular Medicine, Department of Medicine, Brigham and Women's Hospital, Harvard Medical School, Boston, MA, USA
- 4) Liverpool Centre for Cardiovascular Science, University of Liverpool, Liverpool John Moores University and Liverpool Heart & Chest Hospital, Liverpool, UK
- 5) Danish Center for Health Services Research, Department of Clinical Medicine, Aalborg University, Aalborg, Denmark.
- 6) Department of Cardiology, Aalborg University Hospital, Aalborg, Denmark.

## Uddannelsesniveau

I. Albertsen MD, Ph.D.

I. Bille MD

G. Piazza MD, MS

G. Y. H. Lip MD

P. B. Nielsen MPH, Ph.D.

### Introduktion

In older adults, obstructive sleep apnea (OSA) has been associated with several cardiovascular complications. Whether young patients diagnosed with OSA also are at higher risk of developing subsequent cardiovascular disease is uncertain. We aimed to estimate the risk of developing incident cardiovascular risk factors or overt cardiovascular disease among young patients diagnosed with OSA.

#### Materiale/metode

We linked nationwide Danish health registries to identify a cohort of patients aged ≤50 years with OSA using data from 2010 to 2018. Cases without OSA at baseline were obtained from the general population and matched to controls (1:5). The cohort was followed in up to 5 years to describe and compare the risks of 'any cardiovascular event' (including hypertension, diabetes mellitus, atrial fibrillation, ischemic heart disease, ischemic stroke, heart failure, and venous thromboembolism). All-cause mortality was a secondary outcome.

#### Resultater

The study included 20,240 patients aged  $\leq$ 50 with OSA (19.6% female; mean age 39.9 years, SD 7.7) and 80,314 sex and aged matched controls.



After 5-years follow-up, 31.8% of the OSA patients developed 'any cardiovascular event' compared with 16.5% of the controls, corresponding relative risk (RR) of 1.96 (95% CI (1.90- 2.02). The risk of all-cause mortality at 5-year follow-up was 1.1% for OSA patients and 0.6% for controls with a RR of 1.81 (95% CI 1.50- 2.20).

## **Diskussion**

Similar to older adults, young adults with OSA demonstrate increased risk of developing cardiovascular events. To prevent both cardiovascular disease progression, accumulation of cardiovascular risk factors, and mortality, risk stratification and prevention strategies should be considered for these patients.

## Forfatters fulde navn

Ida Ehlers Albertsen

## Forfatters email

idaehlers@gmail.com

Årsmøde DSOHH 2/2