

## **OBSTRUCTIVE SLEEP APNEA AND TYPE 2 DIABETES**

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Type 2 diabetes (DM2) and obstructive sleep apnea (OSA) are diseases with high prevalence and major public health impact. There is evidence that regular snoring and OSA are independently associated with alterations in glucose metabolism. Thus, OSA might be a significant risk factor for the development of DM2. Possible causes might be intermittent hypoxemia and sleep fragmentation, which are typical features of OSA. OSA might also be a reason of ineffective treatment of DM2. There is further evidence that the treatment of OSA by continuous positive airway pressure (CPAP) therapy might correct metabolic abnormalities in glucose metabolism. It is assumed that this depends on therapy compliance to CPAP. On the other hand, there are also hints in the literature, that DM2 per se might induce sleep apnea, especially in patients with autonomic neuropathy. Pathophysiological considerations open up new insights into that problem. Based on the current scientific data, clinicians have to be aware of the relations between the two diseases, both from the sleep medical and the diabetological point of view.