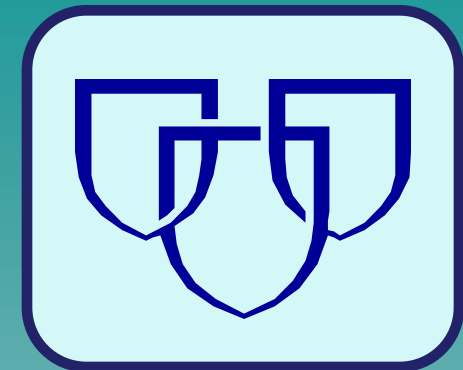




# Awareness of OBSTRUCTIVE SLEEP APNEA in a Latin American community



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## Background

OSA (obstructive sleep apnea) is a frequently under diagnosed condition which can lead to substantial morbidities. Prevalence of this disorder in Latin America was found to varied from 2.9% in subjects with no sleep related symptoms and 23.5% in population that presented symptoms such as excessive daytime sleepiness, snoring, and apneas. Even though the significant impact on quality of life and daily functioning, sleeping disorders unawareness lead in failing to report any symptoms. Community limited knowledge and awareness of this disorder can delay diagnosis and timely intervention. The present study tries to link the variables related to lower public levels of OSA awareness.

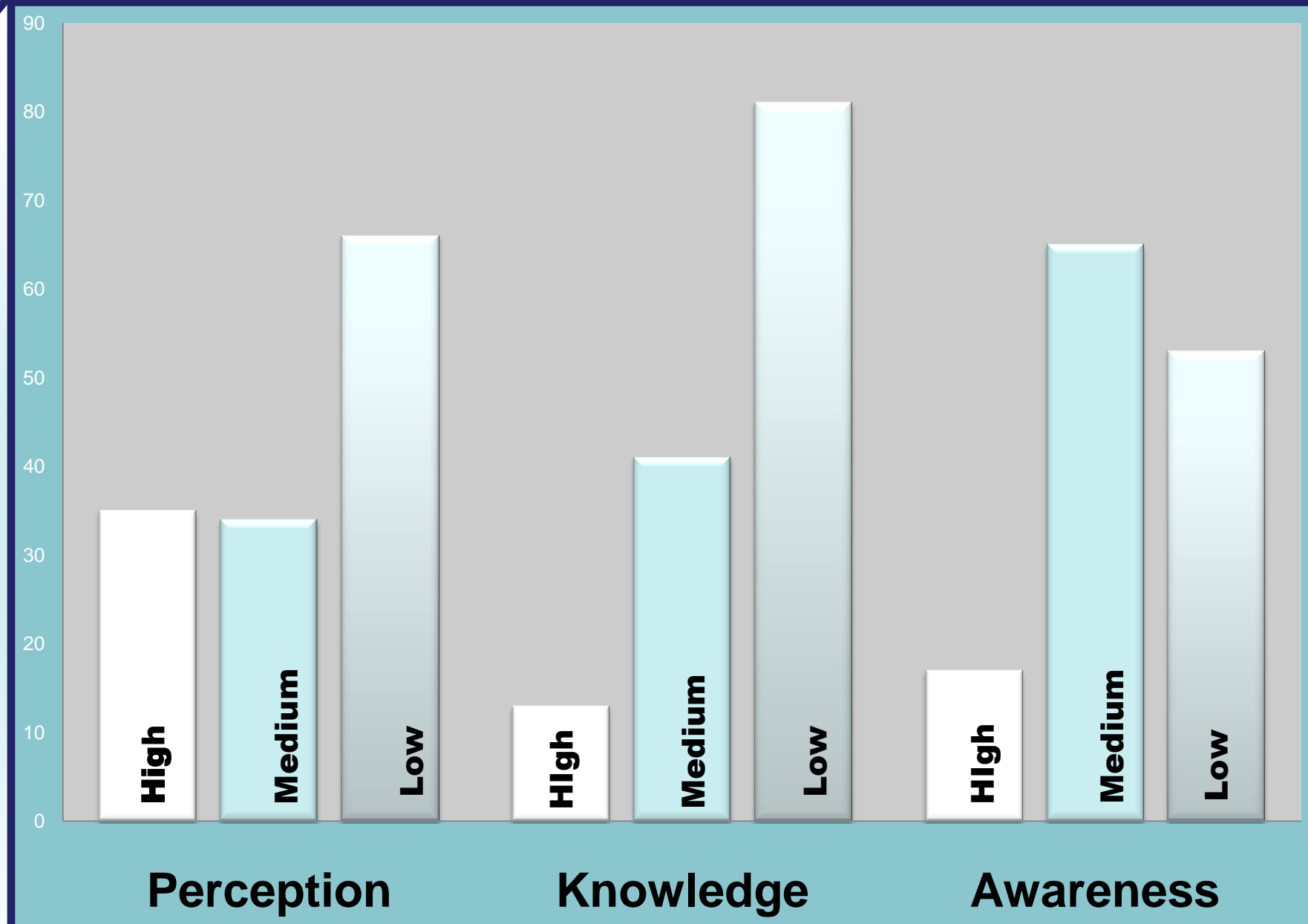
## Methods

Cluster sampled cross sectional in multiple shopping centers of Guayaquil. Ecuador. Guayaquil is the biggest city in Ecuador with a population over 2 million habitants.

We selected the biggest shopping centers of the city and randomly selected 4 in multiple areas of the city. The surveys were done during local festivities in order to ensure higher foot traffic.

We did 135 surveys; collected demographic data and asked if they had family members with OSA. We defined awareness as a function of perception and knowledge. Perception was measured with a visual scale measuring the degree of agreement to 3 different statements implying importance of the disease. The numerical equivalent was translated into a 1 to 3 score depending on the quartile. Knowledge was measured with multiple choice questions selected from a pool of options written by 2 different authors and considered to be representative of a moderate understanding of the disease. It was scored from 0 to 3, 0 being the lowest.

Low awareness was defined as a summed score less than 3, a score of 5 and 6 were interpreted with "high awareness".



Perception, Knowledge and Awareness distribution

	Low Perception			Low Knowledge			Low Awareness		
GENDER	n	%	p	n	%	p	n	%	p
Male	33	50.8	0.51	39	60	0.8	25	38.5	0.7
Female	33	47		42	60		28	40	
Age, mean (SD)	36.4±12.5			37.8±13.7			38.8±12.2		
EDUCATION in YEARS									
6	5	7.7	0.6	7	87.5	0.01	4	50	0.4
12	16	32.7		21	72.4		12	41.4	
>12	14	57.1		53	54.6		36	37	
FAMILY MEMBER WITH OSA									
Yes	6	19.4	0.0002	20	64.5	0.6	6	19.4	0.02
No	58	57		59	57.8		45	44.1	

Table 2. Variables Correlated with OSA Awareness

Table 1. General Characteristics

GENDER	n	%
Male	65	48.2
Female	70	51.8
EDUCATION		
6	8	6
12	29	21.6
>12	97	72.4
OSA IN FAMILY		
Yes	31	23.3
No	102	76.7

## Results

From the 135 respondents 48% were men and 52% women. At least 6% had 6 years of education and 72% had more than 12 years of education. High awareness was found in 12% which 41% were males and 59% females.

Low knowledge was found in 60% and high knowledge in 10%. Perception was low in 49% and high in 26%. Males and females had no difference in awareness of this condition. Family members of people with OSA had a higher perception (p<0.01) and awareness (p=0.01).

## Conclusion

Overall, awareness of this condition was low in the community. Family members who coexist with probable OSA patients can facilitate prompt detection and assistance. Educational programs assigned for the general community should be implemented in order to increase awareness. Predominance of women in the high awareness group may trigger the opening for educational campaigns in this population.

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