Portable home studies (unsupervised) vs Lab studies

The general consensus is that:

Unsupervised home studies are appropriate for patients with high clinical probability of obstructive sleep apnoea (apnoea/hypopnoea index usually about 30 per hour)

Not appropriate and less reliable in people with co-morbidities

- Severe pulmonary disease (high failure rate)
- Neuro-muscular disease
- Heart failure
- Central apnoea
- Narcolepsy
- Obesity, hypoventilation
- Patients on oxygen

Combined with appropriate clinical assessment and selection of patients the comparison between in home vs. lab study


In our unit at Sleep Medicine the agreement is as follows:

Sleep Medicine Quality Assurance 2\textsuperscript{nd} of July 2013
There are different sleep studies available supervised and unsupervised as follows:

**Level 1:**
- Respiratory and EEG in Sleep Lab

**Level 2:**
- Respiratory and EEG at home

**Level 3:**
- Respiratory with no EEG

**Level 4**
- Oximetry alone, oximetry plus nasal flow

Sleep Medicine provides all levels of testing depending on the assessment of the patients’ condition (sites at Warners Bay Private Hospital and our Charlestown Practice).

One application on Level 3 (respiratory but no EEG) is for titration of oral appliances before establishing the amount of mandibular advancement.

Do not hesitate to contact me to discuss any of the above.

Regards
Antonio Ambrogetti