

Response to ‘The New DDS – “Dentists Diagnosing Sleep”’

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Dear Dr Simmons and Shapiro,

It is with great interest that I have read your letter. I believe it follows the editorial that I wrote in October about *Lancet Respiratory Medicine’s* July paper.¹

I do agree that the numbers indicate that we are heading towards a major public health problem if nothing is done regarding the underdiagnosis of OSA patients. I also agree that properly educated dentists could do more than what we are currently doing.

In my opinion, obstructive sleep apnea remains a medical condition, potentially associated with numerous co-morbidities, which prevents it from being taken care of exclusively by dentists. However, the idea of a co-treating physician, as you suggest, is an interesting one.

In this age of major advances in technology and artificial intelligence, the way we practice is challenged on a daily basis. As the status quo regarding the treatment of OSA patient should also always be questioned, I am hoping that the AASM and the AADSM can renew the process of treating obstructive sleep apnea. It is in the patient's best interest.

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REFERENCES

1. Benjafield A V, Ayas NT, Eastwood PR, et al. Estimation of the global prevalence and burden of obstructive sleep apnoea: a literature-based analysis. *Lancet Respir Med.* 2019;7(8):687-698. doi:10.1016/S2213-2600(19)30198-5

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