

Response to “Oral Appliance Therapy Should be Prescribed as a First-Line Therapy for OSA during the COVID-19 Pandemic”

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Dear Sir:

The recent Editorial¹ was timely and interesting; however, certain key issues were either omitted or inadvertently neglected. In response to some of the points raised, it should be noted that:

1. Although positive airway pressure (PAP) therapy potentially raises SARS-CoV-2 transmission risks, preventative precautions, such as social distancing, personal protective equipment use, etc. may help alleviate this risk.
2. Modified PAP therapy may be deployed as ventilators to treat non-obstructive sleep apnea patients diagnosed with COVID-19.²
3. Oral appliance therapies that target the nasal airway^{3,4} might be preferable since nasal lymph vessels that drain to local lymph nodes are thought to initiate immune responses, such as helper CD4+ T cells.⁵
4. Oral appliance therapies that target the paranasal sinuses⁶ might be preferable since it is thought that nitric oxide (NO) produced in the maxillary sinuses inhibits the replication cycle of the SARS coronavirus.⁷

Sincerely,

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DISCLOSURE STATEMENT

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