CORRESPONDENCE

Defining obesity hypoventilation syndrome

The definition of obesity hypoventilation syndrome (OHS) proposed by Hart et al1 raises two questions that we have tried to answer briefly in this letter.

First, previous definitions of OHS included obstructive sleep apnoea (OSA); Hart et al have excluded it. Why? OSA is present in most patients with OHS and is partly responsible for the hypercapnia.2 We believe that it is useful to include it in the definition or classification of the condition in a manner similar to narcolepsy: OHS with OSA and OHS without OSA, as in narcolepsy with cataplexy and narcolepsy without cataplexy. Such classification has mechanistic and therapeutic implications.3

Second, are high bicarbonate and base excess enough to establish the presence of chronic respiratory acidosis? For detecting OHS with OSA and OHS without OSA, as in narcolepsy with cataplexy and narcolepsy without cataplexy. Such classification has mechanistic and therapeutic implications.4

We believe that it is useful to include it in the definition or classification of the condition in a manner similar to narcolepsy: OHS with OSA and OHS without OSA, as in narcolepsy with cataplexy and narcolepsy without cataplexy. Such classification has mechanistic and therapeutic implications.5

In summary, OSA and careful interpretation of arterial blood gas are critical for the definition of OHS. Obesity and elevated bicarbonate are merely triggers to look for it.

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