

First Drug for Sleep Apnoea

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Context: The **United States Food and Drug Administration (US FDA)** has approved **Tirzepatide**, marketed as **Zepbound**, as a treatment for **Obstructive Sleep Apnoea (OSA)**. This marks the first drug-based option for certain patients with OSA, a condition previously treated primarily through mechanical interventions and lifestyle changes.

The approval recommends **Zepbound** in combination with a **low-calorie diet** and **increased physical activity**, targeting individuals with **moderate to severe OSA**. This milestone highlights Tirzepatide's versatility, extending its applications beyond managing **type 2 diabetes** and **obesity**.

Understanding Obstructive Sleep Apnoea (OSA)

Types of Sleep Apnoea

- 1. Obstructive Sleep Apnoea (OSA):
 - The most prevalent form, caused by physical blockage of the airway during sleep.
- 2. Central Sleep Apnoea:
 - Results from the brain failing to signal breathing muscles correctly.
- 3. Complex Sleep Apnoea Syndrome:
 - A combination of OSA and central sleep apnoea.

What is OSA?

OSA is a **sleep disorder** characterized by **repeated interruptions in breathing** during sleep, often caused by the **relaxation of throat muscles**.

- These interruptions, or apneas, can lead to:
 - A choking sensation.
 - Brief awakenings that disrupt sleep quality.
- Individuals with OSA may feel excessively fatigued during the day, despite spending sufficient time in bed.

Link Between Obesity and OSA

How Obesity Contributes to OSA

• Fat accumulation around the neck and tongue causes airway obstruction.

- Abdominal fat reduces lung size, increasing the risk of airway blockage.
- Studies reveal that over 50% of OSA patients are obese, and 25% are overweight.

Additional Risk Factors

- Aging
- Smoking
- Family history of sleep apnoea

Current Treatments for OSA

- Positive Airway Pressure Machines:
 - Devices like CPAP (Continuous Positive Airway Pressure) deliver pressurized air to keep airways open during sleep.
- Lifestyle Modifications:
 - Weight loss, exercise, and dietary changes.
- Medications:
 - Prescribed to improve sleep quality, though none were specifically designed for OSA—until now.

How Zepbound Works

• Mechanism of Action:

- Zepbound activates intestinal hormone receptors like GLP-1 (glucagon-like peptide)
 and GIP (glucose-dependent insulinotropic polypeptide). These hormones:
 - Reduce appetite.
 - Limit food intake, aiding weight loss.
- Target Population:
 - Individuals who are obese or overweight with conditions like type 2 diabetes, high cholesterol, or high blood pressure.

• Effectiveness in Treating OSA:

Studies indicate that reducing body weight with Zepbound significantly improves
 OSA by decreasing fat accumulation around the neck and abdominal fat, which obstruct airways.

Significance of FDA Approval

1. First Drug for OSA:

Zepbound is the first medication specifically approved for moderate to severe OSA,

addressing a critical gap in treatment options.

2. Expanded Applications of Tirzepatide:

• Initially developed for managing **type 2 diabetes**, the drug now demonstrates potential in treating a range of conditions linked to **obesity**, including OSA.

3. Broader Health Impacts:

 Zepbound's ability to reduce body fat opens possibilities for treating multiple obesityrelated disorders, with ongoing studies exploring additional mechanisms.

Conclusion

The FDA's approval of **Zepbound** is a game-changer in the treatment of **obstructive sleep apnoea**. By targeting the root cause—excess fat—Zepbound offers an innovative approach to managing OSA, potentially improving the lives of millions. This development underscores the growing recognition of **obesity's role** in chronic conditions and highlights the importance of holistic treatment strategies. As research continues, Zepbound's applications may expand, benefiting a wider spectrum of patients.

