



新聞稿 PRESS RELEASE

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**CUHK Study shows Obese Children have
10 times higher risk of Obstructive Sleep Apnoea Syndrome than normal**

Childhood obstructive sleep apnoea syndrome (OSAS) is increasingly being recognized. Studies from overseas have reported its prevalence to be as high as 10.7% among the paediatric population. It is important that the condition is diagnosed early and accurately as if left untreated, complications such as hypertension, growth failure, poor attention span and school performance may result. Unlike the adult OSAS patients who are typically obese, the relation between obesity and childhood OSAS is not clear. In light of the increasing prevalence of childhood obesity around the world, it is particularly important to determine whether obesity would predispose to OSAS in children. The Chinese University of Hong Kong conducted a case-control study in the Prince of Wales Hospital (1998-2000) to determine whether obese children had an increased risk of OSAS. We hypothesised that obese children were more at risk of OSAS when compared to the normal population, and that this risk was potentiated by the presence of pharyngeal lymphoid tissue.

Forty-six children (age range 7-15 years) were consecutively recruited from the paediatric obesity clinic. Forty-four normal weight, sex and age matched controls were randomly selected from the local schools. Obese children were defined as those with actual weight $\geq 120\%$ of the ideal weight for height (IBW), whereas normal controls had IBW of 80-120%. The height and weight of each child were measured and the size of tonsils was assessed by an ENT surgeon prior to the sleep assessment. All children then underwent overnight sleep study in a dedicated sleep laboratory.

The obese children were found to have more frequent and severe respiratory disturbances at night. Using an internationally well-accepted diagnostic criterion for childhood OSAS, 26% of obese children had OSAS compared to 2.3% of normal controls (obstructive apnoea index, OAI ≥ 1). We also found that the presence of OSAS was related to the presence of enlarged tonsils and the body mass index. Our result suggested that obese children were at significantly higher risk for OSAS and the presence of any pharyngeal lymphoid tissue enlargement in obese children would further potentiate the risk for OSAS.

The Chinese University of Hong Kong advocates that doctors looking after obese children and parents are made aware of these important findings. Symptoms of OSAS among obese children should be sought for and if present, the child should be referred to a specialized centre for further management.

Full article can be seen in "A controlled study of sleep related disordered breathing in obese children" by YK Wing, SH Hui, WM Pak, CK Ho, A Cheung, AM Li, TF Fok. Archives of Disease in Childhood 2003;88:1043-1047.