

### 7.09 Does weight and weight loss influence sleep position?

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**Background:** Obesity is a serious condition often resulting in sleep-related breathing conditions. Despite this, there is minimal research investigating how weight affects sleep position and whether weight loss alters sleep position, in turn affecting the presence of obstructive sleep apnoea (OSA). **Methods:** This single-centre retrospective database study evaluated the impact of bariatric surgery-related weight loss on the sleeping position of 147 participants. Comparisons were made using pre-operative sleep study and repeat study six months post-operatively. **Results:** Of 147 patients, 74.66% were female, with a mean age of  $51.25 \pm 7.2$  years. Patients spent more time supine post-operatively than pre-operatively (38% vs 36.12%,  $p < 0.05$ ), while 8.5% of patients had no significant change ( $\leq 1\%$ ) in time supine. BMI did not correlate with time supine ( $p = 0.162$ ) (mean pre-operative BMI  $49.7 \pm 8$  vs post-operative  $35.4 \pm 7.2$ ). Similarly, there was no relationship between change in sleeping position and change in Apnoeic-Hypopnoea Index (AHI) post-surgical weight loss ( $p = 0.716$ ), despite significant improvement in mean AHI post-operatively ( $43 \pm 27.3$  vs  $13.9 \pm 13.3$ ). **Conclusions:** Patients are more likely to increase their time asleep supine following weight loss surgery. However, time spent supine has no correlation to BMI or change in AHI. **Keywords:** Obesity, sleep position, sleep-related breathing disorders **Disclosures:** The authors declare they have no conflict of interest.