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RESPIRATORY SLEEP-RELATED COMPLAINTS IN YOUNG ADULTS WITH REPAIRED CLEFT LIP/PALATE AND MAXILLOMANDIBULAR DISCREPANCY: PRELIMINARY RESULTS.

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PURPOSE: Sleep-disordered breathing (SDB), ranging from primary snoring to obstructive sleep apnea, is highly prevalent among children and adults. In Brazil, studies have shown that 29% of the general population report snoring and 6%, breathing pauses during sleep. In individuals with cleft lip and palate (CLP), many factors, such as nasal deformities and secondary surgeries for velopharyngeal insufficiency treatment, have the potential effect of reducing the internal nasal dimensions and posterior airway space, respectively, leading to SDB. Moreover, maxillomandibular discrepancies (MMD), frequently observed in this population, also seem to be an important risk factor. As the initial stage of a larger project, this study aimed at investigating the occurrence of respiratory sleep-related complaints in young adults with CLP and MMD. METHODS: Records from 46 subjects with repaired CLP and MMD (mean age:23±4 years, 27 male), previously evaluated at the Laboratory of Physiology/HRAC-USP, were analyzed. Twenty-four had unilateral CLP, 15 bilateral and 7 isolated cleft palate. Data related to nasal obstruction, oral breathing, snoring and breathing pauses during sleep were considered for analysis. RESULTS: Among the 46 subjects included in the study, 89% had at least one respiratory complaint. Oral breathing was reported by 78%, nasal obstruction by 48%, snoring by 52% and breathing pauses during sleep by 9%. **CONCLUSIONS:** A significant number of patients with CLP and MMD had respiratory complaints related to SDB. The prevalence of symptoms seems to be higher than in the general population. In a subsequent study, subjects with MMD will be evaluated by polysomnography, the gold standard method for SDB diagnosis.