1. Sleep centers in the United States

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Incidence of adult OSA in the United States was 4%. Aging population expected increasing be estimated by 2150 approximately 25 million American would have OSA. More than 2000 laboratories in the United States are performing PSGs. Increased awareness of OSA among general public has caused a great demand for sleep studies. Due to the expense ($1500) many insurance carrier has set criteria for approval in some occasions they deny or propose less expensive monitoring (for example oxymetry measurement) many physicians have to pressure insurance plans for approval.

Although air way examination is critical part of OSA diagnosis a large amount of patients are treated by these sleep centers without evaluation by an otolaryngologist.

Insurance and surgical treatment

Surgical costs in the United States can vary from $2000 for pediatric tonsillectomy (one night admission), to $3000 for UPFP (one night admission), and up to $7000 for combined surgeries (3-4 days admission). Because of such high cost the vast majority of insurance carriers mandate CPAPs trial before any surgical intervention.

Because of cost benefit conscious environments, treatments for OSA in the United States are problematic.