MedPro Respiratory Care

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Weight Loss Medications and Sleep Apnea: What Healthcare Providers Need to Know

Clinical Education Series for Healthcare Professionals



Health Canada has authorized Zepbound® (tirzepatide) for the treatment of moderate-to-severe obstructive sleep apnea in adults living with obesity, defined as a body mass index of at least 30 kg/m². Treatment is used alongside a reduced-calorie diet and increased physical activity. [1]

For appropriately selected patients, this expands available treatment options alongside lifestyle interventions and positive airway pressure therapy. [1,3]

As treatment options evolve, one thing remains unchanged:
Every patient still needs an accurate diagnosis and an individualized treatment plan.

What the Clinical Evidence Shows

Two 52-week clinical trials evaluated tirzepatide in 469 adults with moderate-to-severe obstructive sleep apnea and obesity. [2]

PATIENTS NOT USING PAP	PATIENTS USING PAP
−25.3 events/hour	**−29.3 events/hour**
Placebo: −5.3 events/hour	*Placebo: −5.5 events/hour*

AHI refers to the apnea-hypopnea index. Individual responses varied, and improvement did not mean sleep apnea resolved in every patient. [2]

Weight Matters—But It Isn't the Whole Story

Obesity is an important risk factor for obstructive sleep apnea, but it is not the sole cause.

Upper-airway anatomy, age, and other individual characteristics also contribute to airway obstruction during sleep.

OSA can occur at any body size, and some patients may continue to require treatment even after substantial weight loss. [3,5]

Body Weight · Airway Anatomy · Age · Genetics

Changes in weight or symptoms alone cannot confirm whether sleep apnea has resolved.

Should Patients Stop CPAP After Losing Weight?

Patients should not discontinue positive airway pressure therapy independently after losing weight.

The Canadian product monograph specifically states that tirzepatide is not a replacement for PAP therapy in patients who require it. [1]

Following clinically meaningful weight loss, consider clinical reassessment and repeat home sleep apnea testing or polysomnography when the findings could change treatment decisions. [4]

> ***PAP should only be adjusted or discontinued under the direction of a qualified healthcare provider.***

Consider Sleep Assessment or Reassessment When...

- ✓ *A patient has symptoms or risk factors for OSA but has never completed objective sleep testing.*
- ✓ *A patient living with obesity is being considered for medication specifically to treat OSA.*
- ✓ *A patient wants to discontinue PAP after substantial weight loss.*
- ✓ *Symptoms persist or return despite weight reduction.*
- ✓ *Symptoms continue despite PAP therapy.*
- ✓ *A patient reports symptoms suggestive of OSA regardless of body weight.* [4,5]

Objective sleep assessment helps determine whether therapy should be initiated, continued, adjusted, or reassessed.

Home sleep apnea testing is appropriate for selected uncomplicated adults. Complex cases may require in-lab polysomnography. [5]

Fall Fatigue: Is There More Behind the Complaint?

As routines resume this fall, patients may attribute persistent fatigue to schedule changes, stress, or disrupted sleep.

However, obstructive sleep apnea does not always present with loud snoring or witnessed pauses in breathing.

- *Excessive daytime sleepiness.*
- *Morning headaches.*
- *Difficulty concentrating.*
- *Mood changes.*
- *Insomnia.*
- *Feeling unrefreshed despite adequate opportunity for sleep.* [7]

Persistent fatigue may warrant a closer look at sleep quality and possible underlying sleep apnea.

Further Reading & Clinical Resources

1. Eli Lilly Canada Inc. ZEPBOUND® Product Monograph. Authorized June 11, 2026.
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4. Caples SM, Anderson WM, Calero K, Howell M, Hashmi SD. Use of polysomnography and home sleep apnea tests for the longitudinal management of obstructive sleep apnea in adults. Journal of Clinical Sleep Medicine. 2021;17:1287–1293. doi:10.5664/jcsm.9240.
5. *Kapur VK, Auckley DH, Chowdhuri S, et al. Clinical practice guideline for diagnostic testing for adult obstructive sleep apnea. Journal of Clinical Sleep Medicine. 2017;13:479–504. doi:10.5664/jcsm.6506.*
6. *Patil SP, Ayappa IA, Caples SM, et al. Treatment of adult obstructive sleep apnea with positive airway pressure. Journal of Clinical Sleep Medicine. 2019;15:335–343. doi:10.5664/jcsm.7640.*
7. *Public Health Agency of Canada. Sleep Apnea: Signs, Symptoms, and Risk Factors.*

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