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BIPOLAR DISORDERS Factsheet

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How is sleep apnea related to bipolar disorder?

People with bipolar disorder may show increased rates of co-occurring conditions including sleep apnea. The most common form of sleep apnea is obstructive sleep apnea (OSA), which occurs when the muscles of the upper airway relax in such a way that they block the airway during sleep. As a result, OSA is associated with daytime sleepiness, cognitive dysfunction, and the development of hypertension, cardiovascular disease, and abnormalities in glucose metabolism. OSA also has adverse effects on quality of life, and can lead to anxiety and depression symptoms.

What is the evidence for sleep apnea in people with bipolar disorder?

Moderate quality evidence suggests around 25% of people with bipolar disorder have OSA, which is less than people with major depression (36%), but more than people with schizophrenia (15%).

For more information see the technical table



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NeuRA (Neuroscience Research Australia) is one of the largest independent medical and clinical research institutes in Australia and an international leader in neurological research.

Diseases of the brain and nervous system pose the greatest health, economic and social burden of any disease group because they are chronic, debilitating and have no known cures.

Medical research is the cornerstone of efforts to advance the health and wellbeing of families and the community. Our dedicated scientists are focussed on transforming their research into significant and practical benefits for all patients.

While we hope you find this information useful, it is always important to discuss any questions about bipolar disorder or its treatment with your doctor or other health care provider.

HOW YOUR SUPPORT HELPS

We are able to make significant advances due to the generosity of countless people. Your donation allows us to continue to work towards transforming lives. For information on how you can support our research, phone **1300 888 019** or make a secure donation at neura.edu.au/donate/.

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