

■ **The use of positive airway pressure (PAP) for the treatment of sleep apnoea in patients with type 2 diabetes mellitus (T2DM) is a "cost-effective use of NHS resources"**, according to researchers who presented their findings at the 2013 Annual Meeting of the European Association for the Study of Diabetes. Their analysis used data from 150 PAP-treated patients and 150 matched non-PAP treated patients to model total NHS cost and outcomes over 5 years. Over this time, PAP-treated patients had more QALYs (3.00 vs 2.11 for non-PAP treated patients; $p < 0.05$) but costs were higher (£17 528 vs £11 973; $p < 0.001$). This resulted in an incremental cost of £6242 per QALY gained for PAP vs non-PAP treatment.

Guest JF, et al. Clinical effectiveness and cost-effectiveness of using positive airways pressure to manage sleep apnoea in patients with type 2 diabetes in the UK. 49th Annual Meeting of the European Association for the Study of Diabetes : abstr. 84, 23 Sep 2013.

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