CORONAVIRUS (COVID-19) AND USING CPAP TREATMENT FOR SLEEP APNEA

- If you have COVID-19 you can continue to use CPAP.
- Precautions are needed if using CPAP when you have, or may have, COVID-19.
- If a person is infected, contaminated droplets may be spread into the air through CPAP use and special care with isolation is recommended.
- Special care in cleaning your CPAP equipment is required.
- While community transmission exists use CPAP in a separate bedroom if possible, even if not showing symptoms.
- Similar considerations apply to using non-invasive ventilators and for the use of CPAP in children.

Note: All words that are underlined relate to topics in the Sleep Health Foundation Information Library at www.sleephealthfoundation.org.au

1. Can CPAP worsen COVID-19 if I have it?

There is no evidence to suggest continuous positive airway pressure (CPAP) therapy will worsen COVID-19 if you have it. Positive airway pressure therapies are commonly used in the treatment of severe lung infections.

2. If I have coronavirus can CPAP use transmit my infection to others?

- Yes, it can if precautions are not taken.
- There are two main ways in which COVID-19 is passed from person to person. Firstly, by the spread of contaminated droplets from an infected person’s lungs and airways through the air and secondly, by direct contact with contaminated people, objects or surfaces.

- Droplet spread can be increased by using positive airway pressure treatments such as CPAP. The air pressure from CPAP increases droplet production and spread from the mouth and nose.
- This process is called aerosolization of secretions. Aerosolized virus particles may remain suspended in the air for an hour or more.
- Contaminated CPAP masks and tubing can also aid disease transmission through direct contact. Without cleaning, COVID-19 can persist on plastic and other surfaces for hours or even days.

3. What can I do if I have COVID-19 symptoms and use CPAP?

- People with known or suspected COVID-19 must ensure that they are as isolated as possible from others, including while using CPAP. They should sleep in a separate bedroom if possible, with doors closed.

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If a separate bedroom is not available, you should seek advice from your doctor about alternate treatments for your obstructive sleep apnea while you are unwell. There are changes that can be made to your CPAP equipment to decrease the risk to others, including use of a different face mask and viral filters. However, any modification to your treatment must only be done under the direction of a skilled provider to ensure the CPAP therapy continues to be delivered safely to you.

In the case of children (see below) any change should only be done under the direction of your child’s sleep doctor.

Your CPAP equipment must be cleaned after every use and the bedroom environment kept clean, with regular disinfecting of surfaces, including careful attention to the casing of your CPAP device. Before cleaning turn your device off at the plug and when wiping down make sure the cloth is not too wet, to avoid moisture getting inside and damaging internal components.

The mask and tubing from your CPAP equipment require special attention. Basic steps include:

– Disconnecting these from your CPAP machine.
– Disassembling your mask into its 3 parts: head straps, cushion and frame.
– Cleaning these mask parts and your tubing in mild soap and warm water.
– Rinsing them in warm water.
– Placing them on a towel on a flat surface out of direct sunlight to dry.
– Doing this after every use.

If you have a humidifier, clean and dry the humidifier tub in the same way. When ready for use then fill it with fresh water (preferably distilled) for overnight use.

4. I have no COVID-19 symptoms, should I still take precautions when using CPAP?

You can have COVID-19 with little or no symptoms, particularly in the first few days of infection. Thus, if there is any risk you have been exposed to the infection you may choose to sleep using your CPAP in a separate bedroom, if available, even if you have no COVID-19 symptoms. This will reduce the chance of infecting your sleeping partner via droplet spread from CPAP if you do become infected. Such a precaution may be wise until community spread of the infection is controlled.

5. What if my child has COVID-19 symptoms and is using CPAP?

The same considerations apply. Your child should be as isolated from others as possible while using their CPAP device, as long as you are still able to supervise their treatment. Use careful handwashing after handling and washing your child’s CPAP equipment. Seek advice from your doctor about alternative obstructive sleep apnoea treatments if your child is unwell. Do not stop their CPAP treatment without this advice.

6. What if I am using non-invasive ventilatory assistance (BiPAP, VPAP or similar devices)?

Similar concerns apply as for CPAP. However, your use of this type of device suggests you may have increased breathing vulnerability with infections, so it is particularly important you seek medical advice early about your problems. Do not stop using your equipment unless under the direction of your doctor. Be aware of increased infection risk to others when you have a respiratory infection and are using your ventilator.

If you have a disability that requires the help of carers and have suspected or confirmed COVID-19 which is being looked after at home:

– You should be cared for in one designated room.
– The room must be kept clean including regular disinfection of hard surfaces.
– The carer must use personal protective equipment including a surgical mask, special gloves and apron, and eye protection when attending to you.
– The carer should minimise the time spent in your room, where safe to do so.
– Consider using mobile phones for communication with the carer rather than repeated entry into the room.
– Prohibit non-essential visits by others.

7. Other information

See our Fact Sheet Getting good sleep during the COVID-19 pandemic

For information on over 70 different sleep related topics, written by professionals, visit the Sleep Health Foundation Information Library at www.sleephealthfoundation.org.au. The underlined topics in this article are covered in detail there.