



Key Points Summary

Garcia, A., Wilde, E. A., Tate, D., Reljic, T., Kenney, K., Troyanskaya, M., Agyemang, A., Walker, W. C., & Nakase-Richardson, R. (2021). 787 OSA risk is associated with number of white matter hyperintensities, but history of mild TBI is not: A LIMBIC-CENC study. *Sleep*, 44, Supplement_2, page A307. <https://doi.org/10.1093/sleep/zsab072.784>

Primary Question this Study Addresses

What is the relationship between obstructive sleep apnea risk, mTBI, and white matter hyperintensities in a military cohort with a history of combat deployment?

Study Findings That Add to Our Knowledge

About 37% of Veterans had white matter hyperintensities (WMHs). Increasing age, female sex, hypertension, diabetes, and higher sleep apnea risk score were associated with higher number of WMHs. A history of lifetime mTBI exposure was not associated with WMH.

Multivariable analyses revealed that only age remained associated with WMH presence. When looking at only those with presence of WMHs, age and obstructive sleep apnea were associated with the amount of WMH.

How Study Evidence Might Be Used in Practice

Consistent with the literature in non-brain injured populations, age was the strongest predictor of WMH presence and number.

In those with identified WMH, OSA risk was a significant predictor of WMH number, while history of mTBI was not.

For more information on assessing and treating sleep, visit:

 [Resource](#)

To access the study abstract, click here:

 [Abstract](#)

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