



Reply: High-sensitive cardiac troponin after CPAP in obstructive sleep apnoea

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Reply to D. Monneret:

We appreciate the correspondence from D. Monneret regarding the issue of analytical precision for troponin assays in the low range of concentrations, and thus the limitations in the interpretation of small decrements in troponin levels. In our study, serum biomarkers were secondary endpoints [1], and the findings and clinical significance of the lowering of troponin levels in the low range of concentrations certainly warrant further delineation in studies specifically targeting the possibility of subclinical myocardial injury in a group of high cardiovascular risk patients, and correlating any biochemical change with functional tests such as cardiac imaging. Regarding potential lot-to-lot variation of the troponin assay, the study samples were tested in batch assay, and paired pre- and post-CPAP samples were analysed in the same lot.

We concur with the value of close collaboration between the clinic and the laboratory in research and clinical practice.

Shareable abstract (@ERSpublications)

Changes in troponin levels in the low concentration range after treatment of obstructive sleep apnoea warrant further studies and functional correlation <https://bit.ly/3HN9iss>

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Conflict of interest: None declared.

References

- 1 Lui MM-S, Tse H-F, Lam DC-L, *et al.* Continuous positive airway pressure improves blood pressure and serum cardiovascular biomarkers in obstructive sleep apnoea and hypertension. *Eur Respir J* 2021; 58: 2003687.