

REVISED CED ACTION PROPOSAL

This form can be used by CED Working Groups to propose a CED action to the CED Board.

WG proposing action:	WG Oral Health
Title of document, project or event proposed:	CED Recommendation on the Role of the Dentist in the Multidisciplinary Management of Obstructive Sleep Apnea (OSA)
Target (name of EU legislation or initiative to be influenced):	<p>The intention of this paper is not to directly target an existing EU directive. Its aim is to highlight OSA as an integral syndrome under the umbrella of chronic respiratory diseases addressed by EU health policies -as well as-, and to underline the fundamental role of dentists in the wider health team involved in the detection process and supportive management of OSA.</p> <p>Obstructive sleep apnea has been recognised under Directive 2014/85/EU as one of the highest risk factors for road traffic accidents and occupational accidents. Directive 2014/85/EU recognises the effectiveness of OSA treatments in mitigating these risks, and requires medical supervision and regular check-ups, relative to the level of diagnosed OSA.</p> <p>OSA is also concerned by other EU legislation tackling non-communicable diseases (NCDs), including the EU “Healthier Together”- EU Non-Communicable Diseases Initiative’ (2022-2027, under the EU4Health Programme).</p> <p>Furthermore, this paper aims to highlight the critical need to address OSA distinctly under current and future EU programmes and initiatives on chronic diseases.</p> <p>Most importantly, increased awareness and understanding of the role of dentists in the multidisciplinary treatment of OSA must be advanced.</p>
Justification (how would action promote interests of dental profession in the EU):	<p>The important role of dentists in the detection process and supportive management of OSA must be put forward to policy makers, public health and other healthcare professionals.</p> <p>Obstructive sleep apnea (OSA) is a multi-factorial and complex disease, not curable by a single approach in every patient. Importantly, OSA is more than a simple anatomical condition. It cannot simply be prevented or treated by altering dentofacial structures. Instead, it is a complex interaction of neurological, muscular, and physical variables that results in the collapse of the oropharynx (upper airway).</p> <p>OSA is a life-threatening medical condition affecting an estimated 936 million adults aged between 30 and 69 worldwide (including~425 million with moderate-severe OSA).</p>

	<p>The CED has not yet addressed this issue in a policy document, nor has it highlighted the important role played by dentists in the detection process and supportive management of OSA, handling referred cases as needed.</p> <p>Dentists are indeed central to care in cases where custom, titratable mandibular advancement devices (MADs) are indicated (e.g. for CPAP-intolerant patients or by preference). Furthermore, the development, creation and customization of mouth appliances is the sole responsibility of the dentist, and off-the-shelf sales of mandibular advancement devices (MADs) should be discouraged.</p> <p>This document also underlines the necessity for interdisciplinary collaboration between dentists and other healthcare professionals, as well as the need for professional and institutional support to dentists for the supportive management of OSA. This includes recommendations for patients treated through intraoral devices to have access to regular dental care.</p>
<p>Audience (Commission - specific DG?, Parliament – specific committee?, Council – specific national ministries?):</p>	<p>European Commission, European Parliament SANT Committee, stakeholders currently involved in the Healthier Together”- EU Non-Communicable Diseases Initiative.</p>
<p>Stakeholders to collaborate with:</p>	<p>National dental associations, and the European Academy of Dental Sleep Medicine.</p>
<p>Deadline for completion:</p>	<p>In the course of 2026</p>
<p>Evaluation: was it accomplished?</p>	