TABLE 1] Illustration of the Baseline Characteristics and Postimplantation Results

Variable	Baseline	Postimplantation	
Age (y) ± SD	56.7 ± 11.3	…	…
BMI (kg/m^2) ± SD	29.4 ± 4.3	29.1 ± 3.7	NS
AHI (n/h) ± SD	32.8 ± 13.9	12.6 ± 13.4	$P < .001$
ODI (n/h) ± SD	27.6 ± 17.6	12.0 ± 14.0	$P < .001$
ESS ± SD	12.9 ± 4.6	7.0 ± 4.6	$P < .001$

Abbreviations: AHI = apnea-hypopnea index; ESS = Epworth sleepiness scale; n/h = number/hour; ODI = oxygen desaturation index.

use it for 5 to 7 h per night, which correlated with the data of the implanted pulse generator ($r = 0.485$, $P < .001$). UAS device analysis showed that 22.6% of the patients in the reported cohort used the sUAS therapy < 4 h per night, 77.4% for 4 h and more per night, and 55.7% of the patients for more than 6 h per night (Fig 1).

In conclusion, this investigation on the sUAS therapy in OSA patients revealed a high adherence to the therapy. Future studies should evaluate if high adherence to UAS has the same effect as high adherence to CPAP therapy on cardiovascular disorders, diabetes, and neurobehavioral performance.

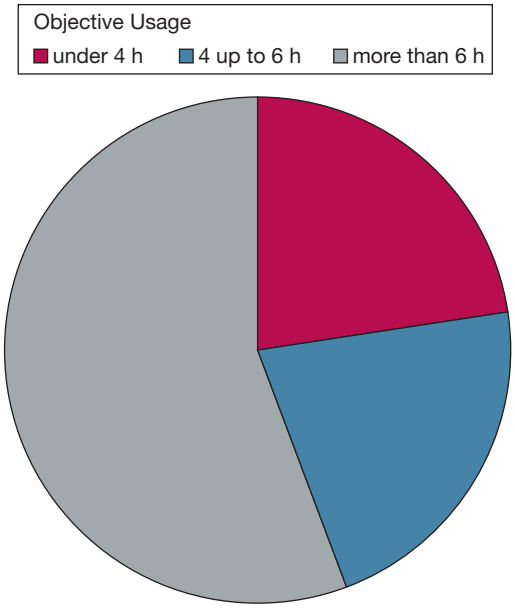

Figure 1 – *Illustration of the objective usage per night as shown by analysis of the implantable pulse generator.*

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The Impact of Fluctuations in Pack-Year Smoking History in the Electronic Health Record on Lung Cancer Screening Practices

To the Editor:

Low-dose computed tomography (LDCT) reduces lung cancer deaths,[1,2] but implementation of screening

TABLE 1] Comparison of Encounters in Which LDCT Was and Was Not Ordered[a]

Characteristic	LDCT Ordered (n = 686) No. (% of subgroup)	LDCT Not Ordered (n = 52,721) No. (% of subgroup)	Logistic Regression	
			Adjusted OR (95% CI)	*P* Value
Age at time of encounter, y				
55-59	201 (29.3)	16,695 (31.7)	Reference	
60-64	222 (32.4)	15,212 (28.9)	1.2 (1.0-1.4)	.09
65-69	158 (23.0)	10,487 (19.9)	1.3 (1.0-1.6)	.03[b]
70-74	84 (12.2)	6,879 (13.0)	0.99 (0.74-1.31)	.94
75-80	21 (3.1)	3,448 (6.5)	0.49 (0.30-0.77)	.003[c]
Sex of patient				
Female	356 (51.9)	28,036 (53.2)		
Male	330 (48.1)	24,685 (46.8)		
Race/ethnicity of patient				
White	483 (70.4)	31,244 (59.3)	Reference	
Black	160 (23.3)	17,599 (33.4)	0.64 (0.53-0.77)	< .001[d]
Hispanic	25 (3.6)	2,579 (4.9)	0.76 (0.49-1.12)	.19
Other	18 (2.6)	1,299 (2.5)	0.83 (0.50-1.29)	.44
Preferred language of patient				
English	663 (96.6)	50,292 (95.4)		
Spanish	8 (1.2)	1,409 (2.7)		
Other	15 (2.2)	1,020 (1.9)		
Insurance				
Commercial	133 (19.4)	7,403 (14.0)	Reference	
Medicaid	205 (29.9)	15,707 (29.8)	0.85 (0.68-1.07)	.16
Medicare	324 (47.2)	27,043 (51.3)	0.68 (0.55-0.86)	< .001[d]
Other	24 (3.5)	2,568 (4.9)	0.56 (0.35-0.86)	.010[b]
Last documented exposure				
≥ 30 pack-years	487 (71.0)	37,578 (71.2)	Reference	
20-29 pack-years	91 (13.3)	4,737 (8.9)	1.6 (1.2-2.0)	< .001[d]
10-19 pack-years	73 (10.6)	6,388 (12.1)	0.90 (0.69-1.15)	.41
< 10 pack-years	35 (5.1)	4,018 (7.6)	0.67 (0.46-0.93)	.022[b]
Provider LDCT ordering volume				
First quartile (lowest)	13 (1.9)	4,826 (9.2)	Reference	
Second quartile	32 (4.7)	13,209 (25.1)	0.86 (0.46-1.69)	.64
Third quartile	117 (17.1)	11,998 (22.8)	3.6 (2.1-6.8)	< .001[d]
Fourth quartile (highest)	524 (76.4)	22,688 (43.0)	8.3 (5.0-15.3)	< .001[d]
Provider's specialty				
Internal medicine	232 (33.8)	20,866 (39.6)		
Gerontology	234 (34.1)	6,430 (12.2)		
Family medicine	172 (25.1)	16,528 (31.3)		
Medicine/pediatrics	48 (7.0)	8,897 (16.9)		

LDCT = low-dose CT.

[a]The columns on the right demonstrate the results of the multivariate logistic regression. Variables that were not selected in a forward stepwise regression were not included in the model and are therefore not accompanied by an OR.

[b]$P < .05$.

[c]$P < .01$.

[d]$P < .001$.