# Adherence to Respiratory Supports in OSA and COPD

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**Abstract:** Chronic respiratory diseases constitute a serious public health problem in all countries, and Chronic obstructive pulmonary disease (COPD) and obstructive sleep apnea (OSA) are two of the most prevalent. Positive airway pressure (PAP) is recommended for ongoing treatment of OSA in adults while Long-term oxygen therapy (LTOT) is indicated for stable COPD patients with Chronic Respiratory Insufficiency. In real contexts, the clinical efficacy of these therapies is limited by an often-low adherence with consequent rising back of symptoms and adverse consequences on the quality of life. Until now, several driving factors have been identified for a low adherence to CPAP and LTOT and several solutions are proposed in many papers. In this review we identify and discuss the driving factors reported for a low adherence (addressing personal conditions, social context and specificities of the device) and the strategies adopted to mitigate them (behavioral, educational and supportive interventions) and to monitor actual compliance (self-reporting, eHealth solutions and consumptions of device accessories). An overall picture of these aspects allows planning the healthcare service and adequate support for OSA and COPD patients with an attention to the individual, social and cultural level. Further investigation is still needed to explore the value of combinations of the reported approaches on different patient phenotypes and at what cost.

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