



# Beyond the Oral Appliance:

Navigating  
Technological  
Advances in Sleep  
Apnea Therapy

---

Aaron Glick, DDS, D.ABDSM



# What will we talk about?

- What is emerging technology
- Emerging OSA therapies
- Closing thoughts

OSA Severity Indication:

Mild Moderate Severe

## Market Access



On market



Eminently on market



Not on market

## Research Studies



Positive Results

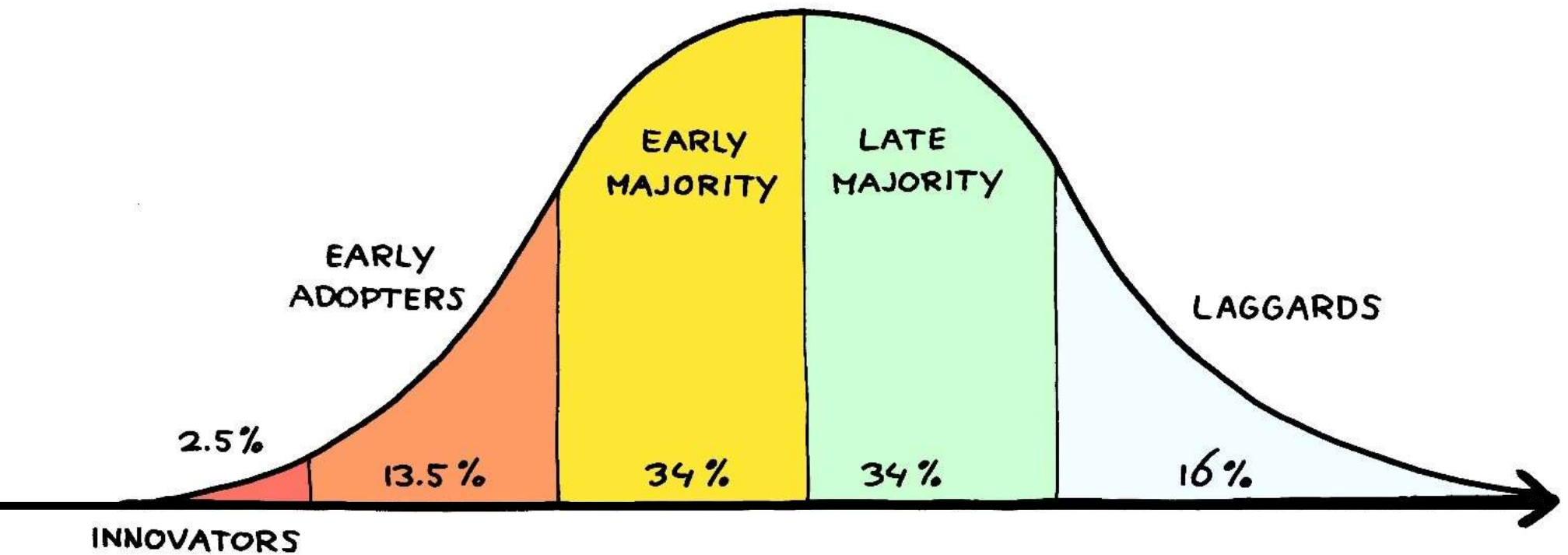


No studies or mixed results

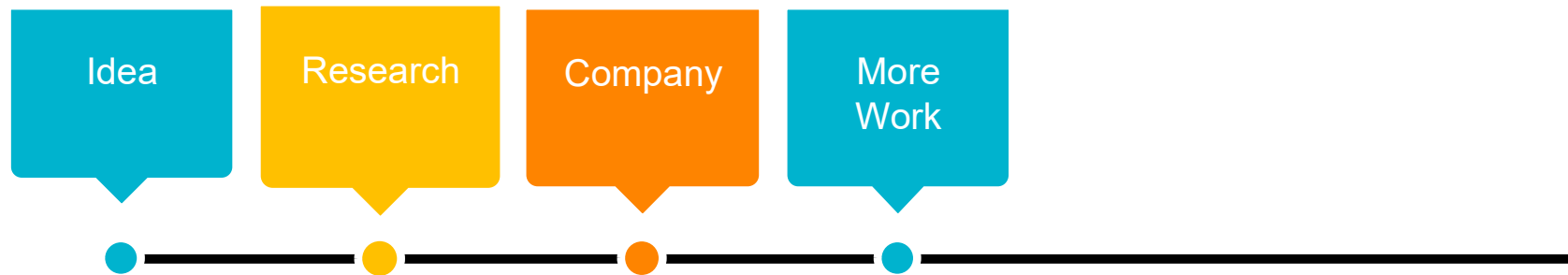


Negative results

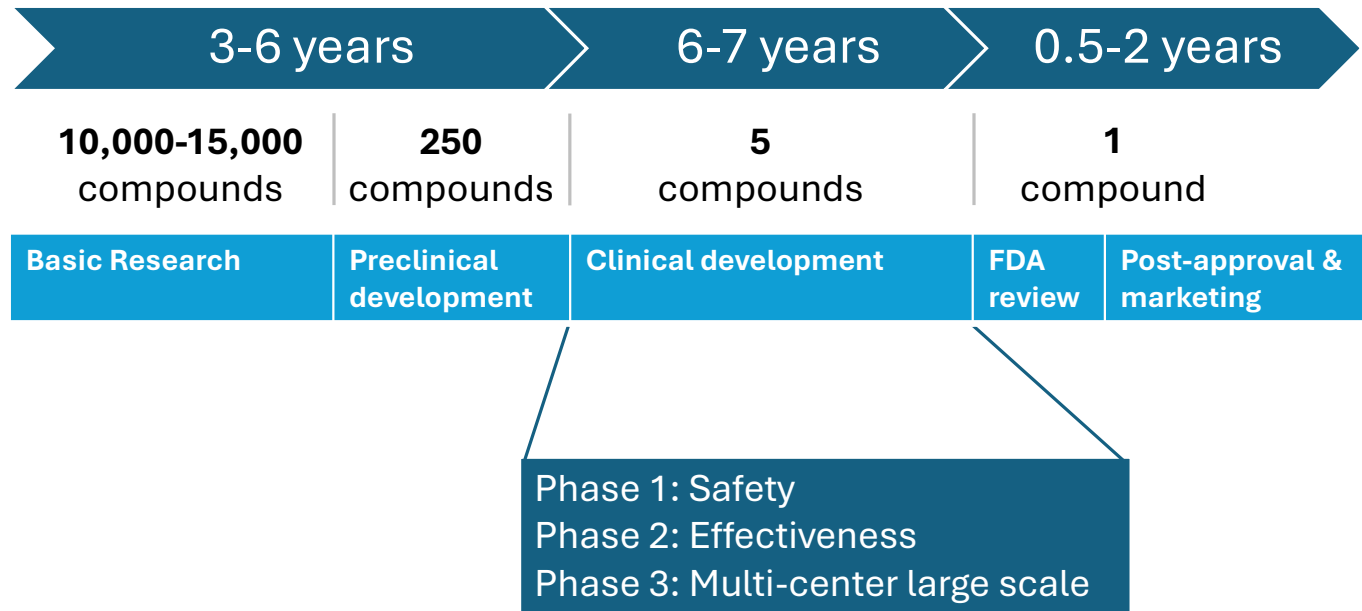
# Technology Adoption Lifecycle



# Technology Adoption Lifecycle



# FDA Drug Submissions – 505 pathway



# FDA Medical Device Pathway – Class III



# Therapeutics

## Surgical Hypoglossal Nerve Stimulation

- Inspire
- Nyxoah
- Liva Nova
- StimAire

## Non-Invasive Neuromodulation

- XII Medical
- Pasihea
- Restera
- WhisperSom

## Tongue Mobility

- Respiosa
- Linguaflex

## Hyoid Suspension

- MagNap
- Siesta Medical

## Positional Sleep Apnea

- Smart Nora
- Night Balance

## Soft Palate Augmentations

- Cryosa

## Pressures

- KPAP
- Sommetrics

## Myofunctional Therapy Devices

- ExciteOSA
- REMastered Sleep

## Mandibular Advancement Devices

- Somnomed
- Prosomnus
- Vivos

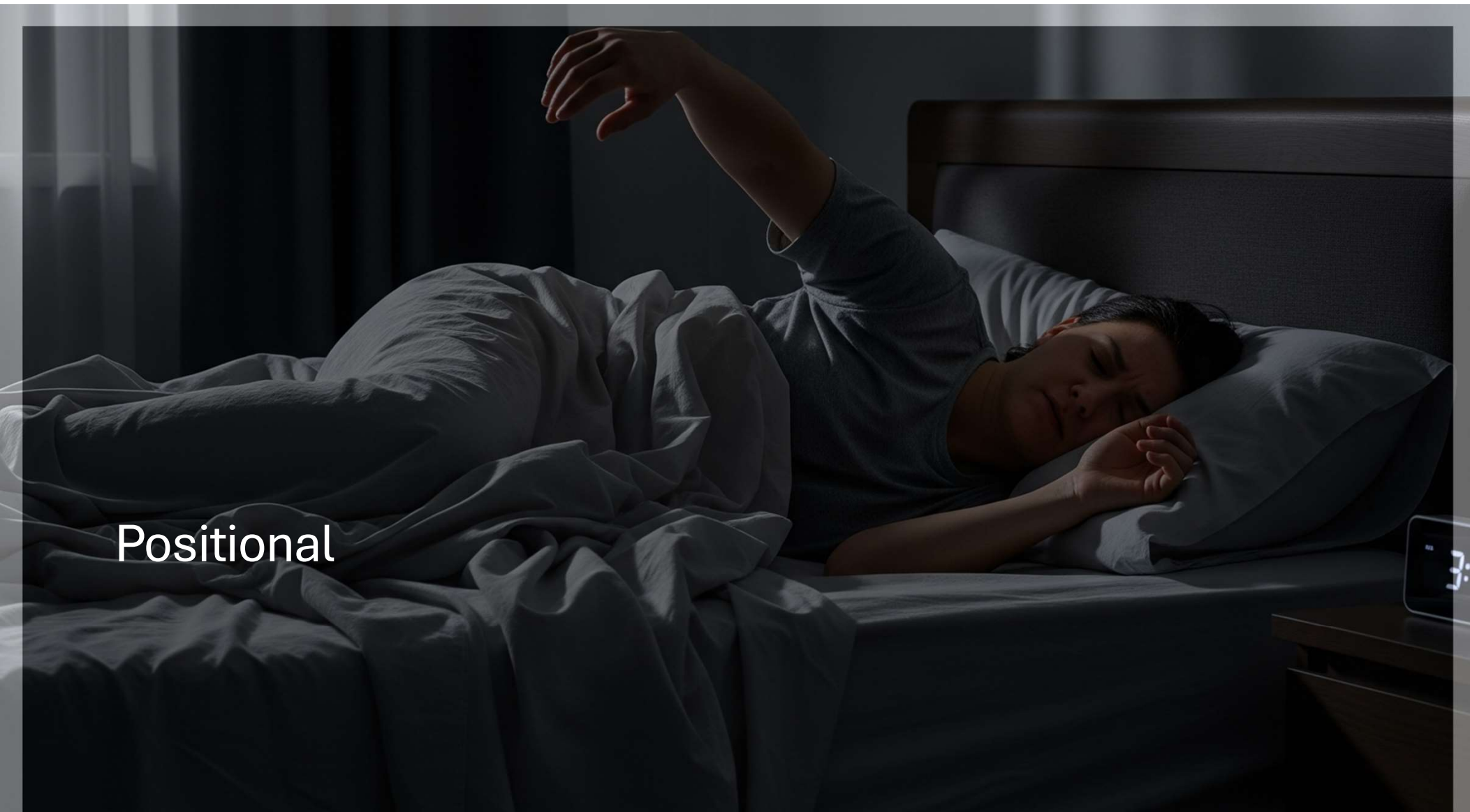
## Pharmacology

- Eli Lilly
- Apnimed
- Chugai Pharm
- RespireRX Pharm
- Incannex

## Digital Health

- Ensodata
- Ognomy
- Daybreak

Positional



# Smart Nora

- Detects snoring and moves pillow
- Recently out of business.



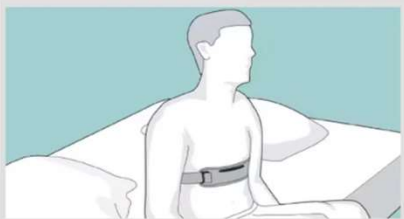
Bankrupt July 2025



Consumer product. No studies found

# Night Balance

- Positional detector to reposition patient



Patient can fall asleep in any position. After 15 minutes, the device activates and begins monitoring.



NightBalance detects when the patient is on their back. It prompts the patient to move off their back without disturbing their sleep.



Vibrations will stop when patient is on their side.

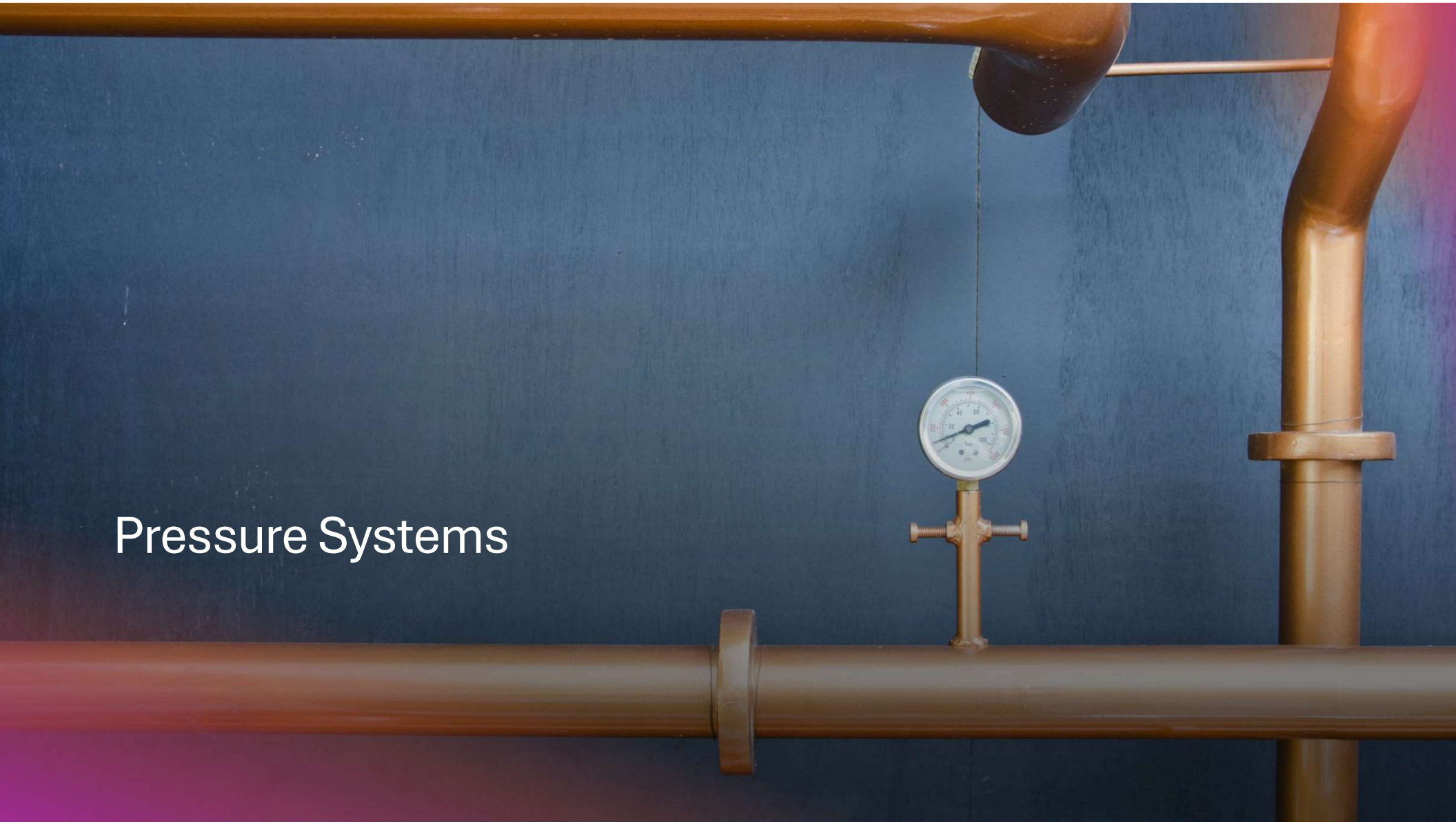


Discontinued Sept 2023.



POSAtive study showed improved adherence vs. APAP. Prospective study showed 17 AHI to 9 AHI.

# Pressure Systems



# Resmed

- CPAP, APAP, BPAP, ASV, EPR systems
- Gold standard of care
- App for mask selection and patient engagement



On market globally



Gold standard treatment

# Sommetrics

- Using aerSleep technology for external negative pressure on neck area.
- Difficult to use if you have a beard or vascular issues of the neck.



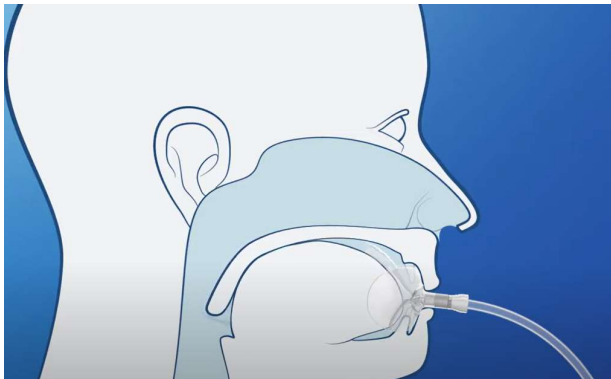
Targeting 2025 in US



2 articles with PSG. 87% responders with severe at baseline

# Somnics

- iNAP system creates intraoral negative pressure with titratable pressures.
- Patients that don't have anterior teeth, hx UPPP, or mouth breathers are not good candidates



\*per company



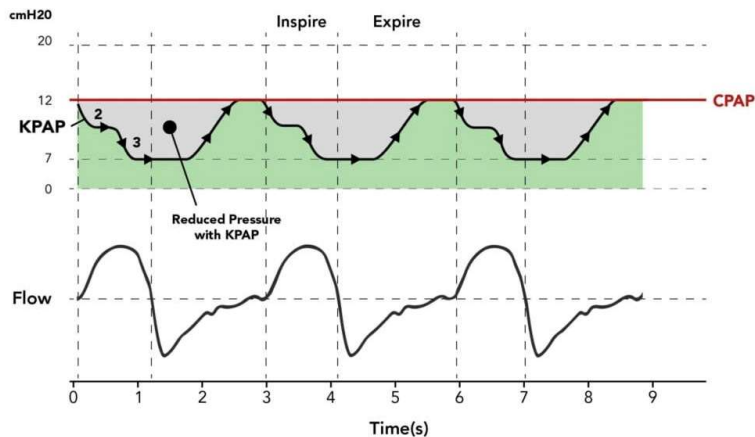
On market, company working towards increased reimbursement



Multiple articles. Approximately 80% subjects are responders in mild OSA

# SleepRes

- KPAP device to adjust inspiratory and expiratory pressures to improve comfort and increase natural breathing experience.



Not yet.



Similar efficacy to CPAP.  
69-84% prefer than CPAP.

# Bleep

- Mask free option for PAP therapy. Adhesive affixes to nose.



On market



Consumer product, none found.



# AirAvant Medical

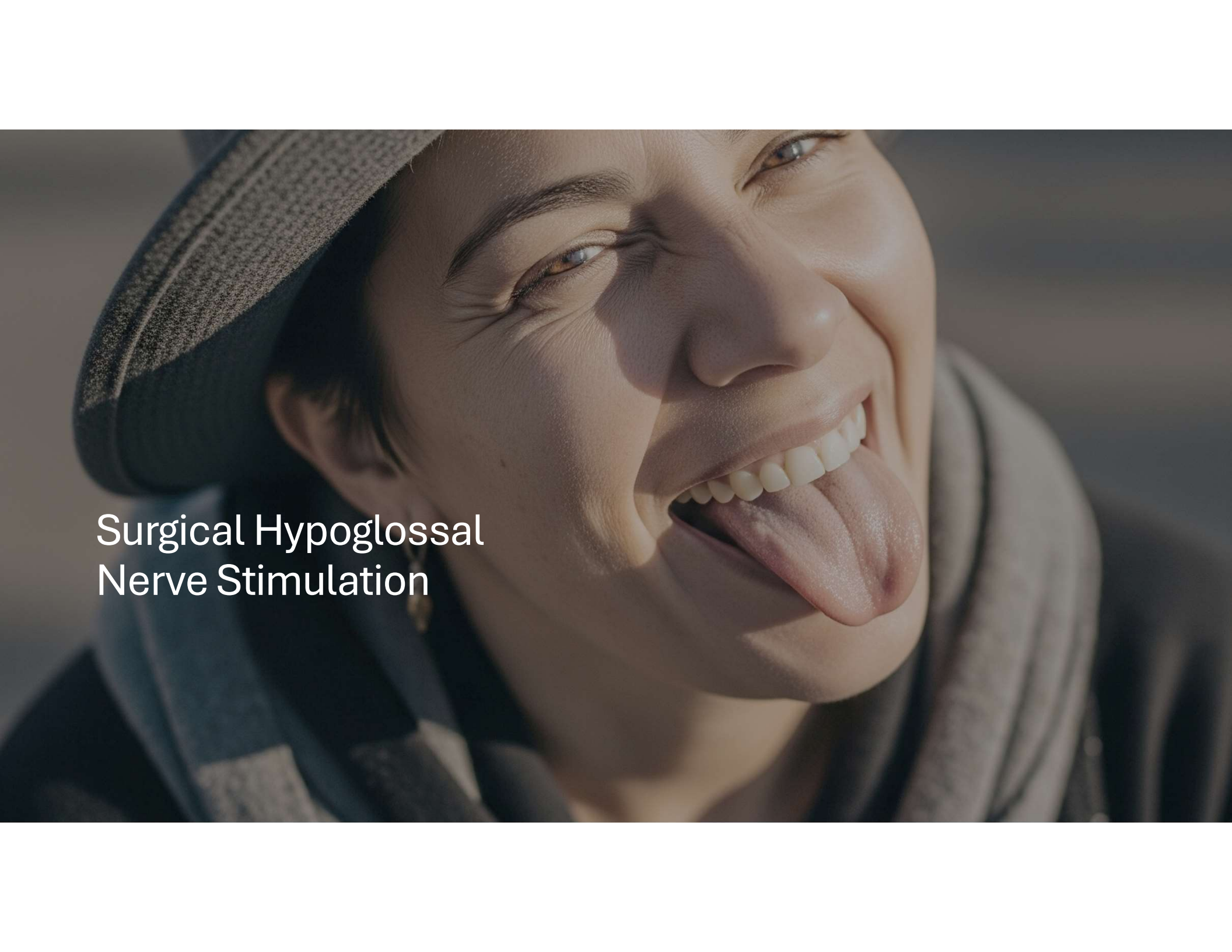
- EPAP device similar to Provent



On the market



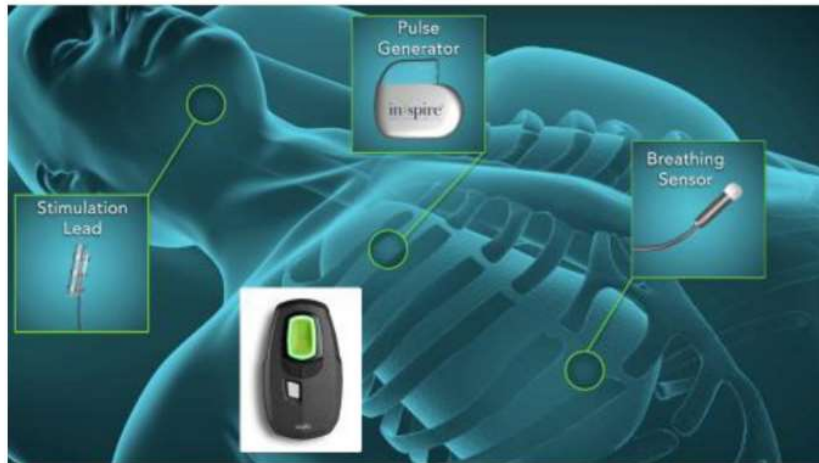
EPAP reduces AHI, yet compliance is low



# Surgical Hypoglossal Nerve Stimulation

# Inspire Medical Systems

- Unilateral hypoglossal nerve stimulation with sensing lead. Placed on distal nerve.
- Incumbent in the HNS space



Yamauchi2023

Mild

Moderate

Severe



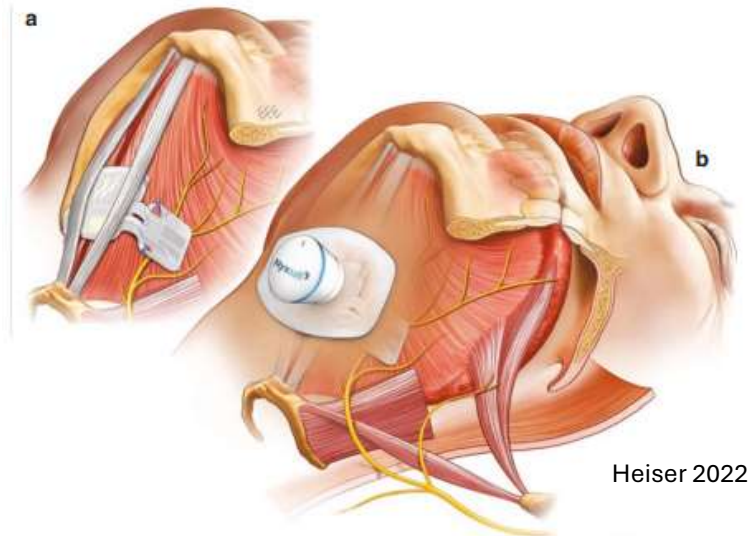
On the market



Gold-standard HNS

# Nyxoah

- Genio System with bilateral hypoglossal nerve stimulation with passive energy transcutaneously. Placed on distal nerve



Mild Moderate Severe



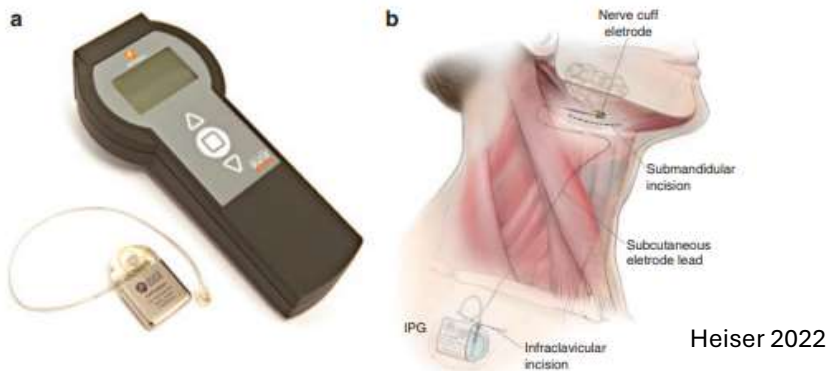
On the market. FDA approval August 2025. CE mark in 2019.



DREAM study with positive results

# Liva Nova

- Aura6000 system with unilateral activation of proximal trunk of hypoglossal through complex array of stimulation patterns to reduce muscle fatigue, simultaneous activation to reduce duty cycle and maintain near continuous activation



Mild Moderate Severe



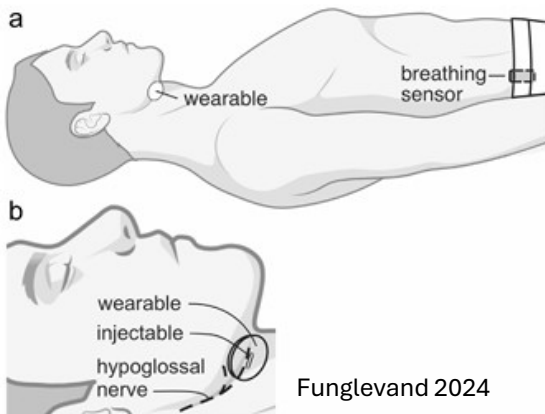
CE marked since 2012.  
Not on US market



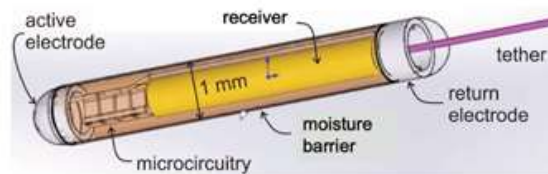
OSPREDY trial beginning in 2021. 12 month data showing 65% responder rate.

# StimAire

- Injectable hypoglossal nerve stimulation for a more simple in-office procedure



Funglevand 2024

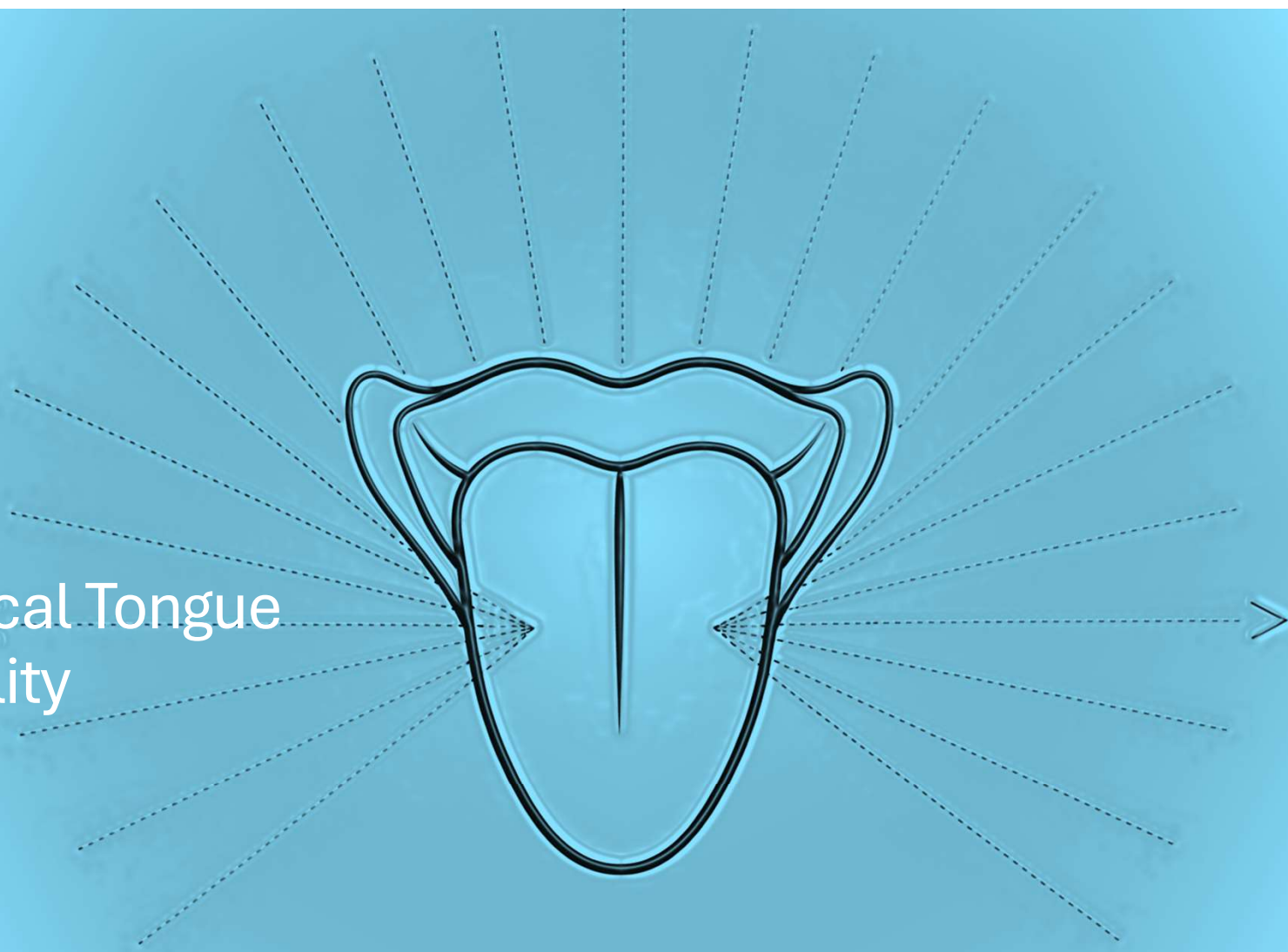


Not on the market anywhere



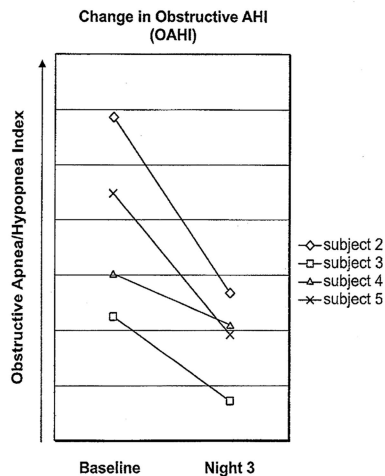
Animal studies showing stimulation in leg; FDA breakthrough designation

# Surgical Tongue Mobility



# Linguaflex

- Implantable tissue retractor surgically inserted into base of tongue. Pulls anteriorly on tongue base tissue.



Not on the market anywhere



Showed AHI decrease in 5 subjects

# Respiosa

- Titratable tongue implant to stabilize the tongue base



Not on the market  
anywhere



None found.



# Non-Invasive Neuromodulation

# XII Medical

- Minimally invasive neurostimulation device



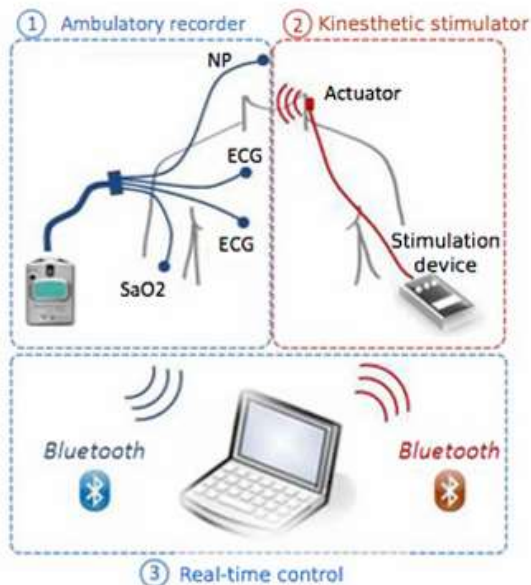
Not on the market



Limited published data. Enrolling for BEAT OSA trial.

# Pasithea

- Uses kinesthetic stimulation



Not on the market and no movement towards this



Early data showed minor change in apnea durations

# Restera

- Minimally invasive electrode for tongue stimulation



Not on the market



Feasibility of  
percutaneous approach  
and 7 cmH<sub>2</sub>O reduction  
with active implant



 Restera™



# WhisperSom

Precision acoustic  
neuromodulation



Not on the market



No data found



Hyoid Suspension

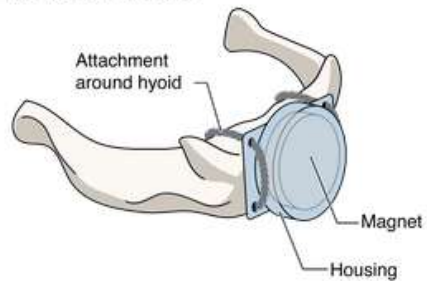
# MagNap

- Surgical treatment to anteriorly position the hyoid through magnetic force

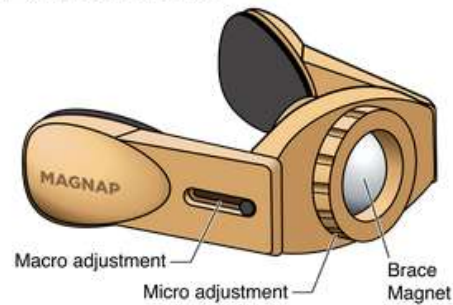


Not on the market anywhere

Internal device



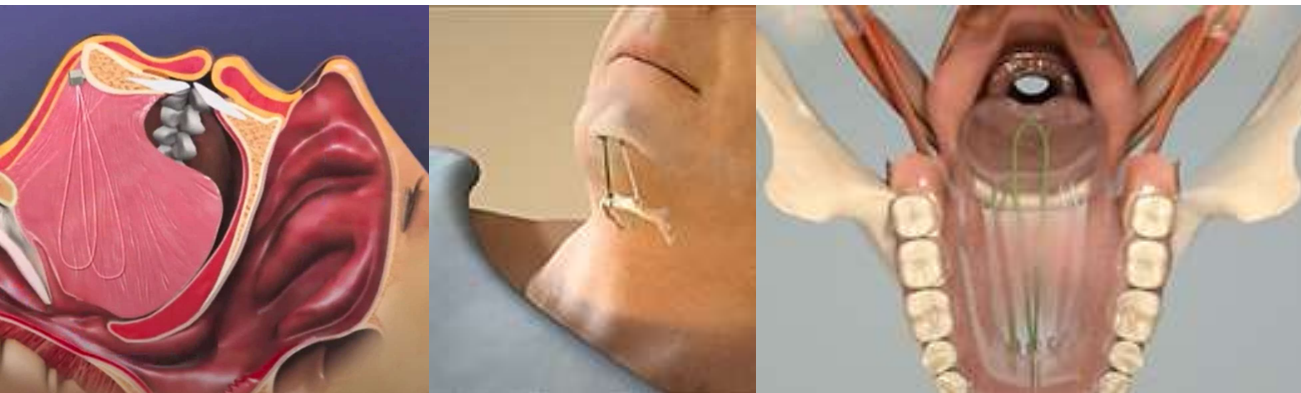
External device



Enrolling 10 patients now (21-70yo)

# Siesta Medical

- Airlift technology to suspend hyoid & separately tongue suspension through a tether system through surgery. It's adjustable and removable.



On the market



76% surgical success for hyoid suspension in moderate to severe;

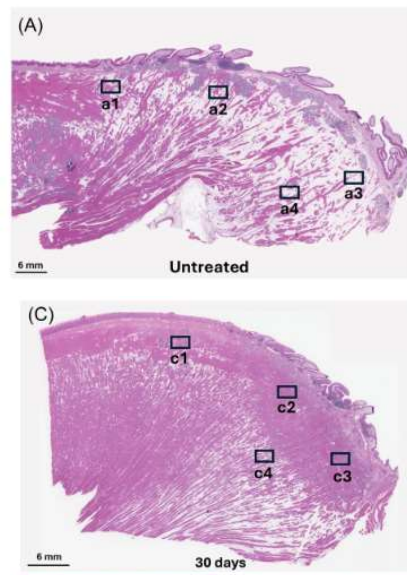
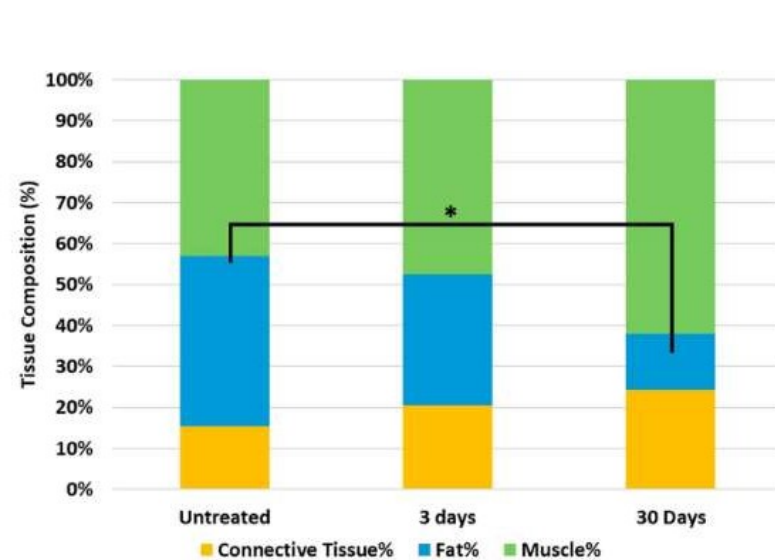
\*Tongue suspension alone is 36% success.

Soft Palate  
Augmentations



# Cryosa

- Minimally-invasive Surgical reduction of adipose tissue in soft palate through cryolysis



Not on the market



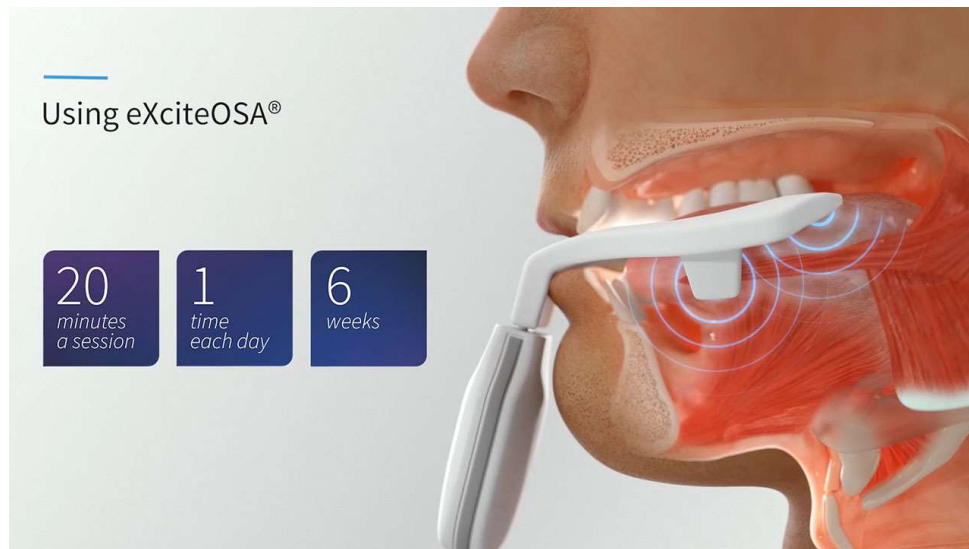
Treated first patient  
2024. Enrolling ARTIC-  
3 pilot study

A wide-angle landscape photograph capturing a serene sunrise or sunset. The sun is a bright, glowing orb positioned centrally on the horizon, casting long, golden rays across the sky and the misty valley below. The sky is a mix of soft blues, oranges, and yellows, with wispy clouds catching the low light. The foreground consists of a lush green field, with a single dark bird in flight on the left. A line of trees and a stone wall or path run diagonally across the lower right. The middle ground is a vast valley filled with a thick layer of white mist or fog, which obscures the details of the land and vegetation, creating a dreamlike atmosphere. In the distance, more hills and some small buildings are visible through the haze.

# Myofunctional Therapy / Daytime Devices

# Signifier Medical Technologies

- eXciteOSA



On market. Reimbursed via HCPCs.



90% responders to snoring.

# REMastered Sleep

- Myofunctional therapy provided through REMplenish Jr Myo-Nozzle for water bottles



On market.



34% reported improvement in tiredness.  
No objective testing.



Pharmacology

# Elli Lilly and Company

- Zepbound (tirzepatide) injection that is a GLP-1/GIP receptor agonist used to reduce fat deposition and systemic inflammation.
- Orforglipron (GLP-1 receptor agonist) discovered by Chugai Pharmaceutical for obesity in ATTAIN phase 3 clinical trial (27lbs / 12% weight loss). Will be studied for OSA.



FDA approved in late 2024



After 52 weeks significant decrease in AHI for Zepbound; 42% treated (SURMOUNT)

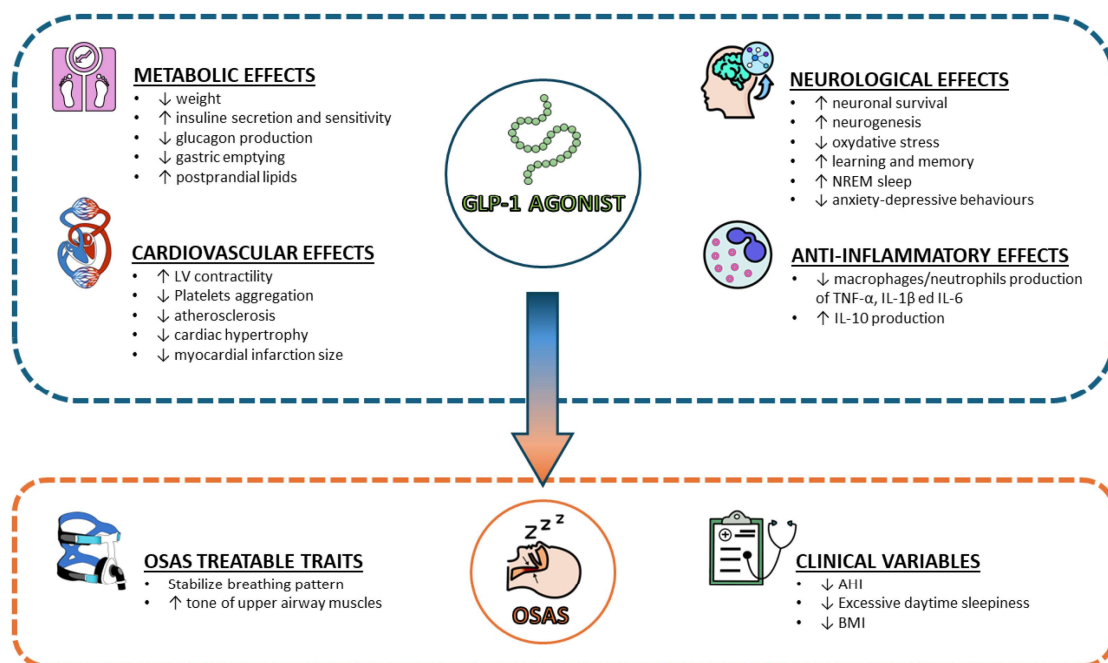
## Body composition changes during weight reduction with tirzepatide in the SURMOUNT-1 study of adults with obesity or overweight

Michelle Look MD<sup>1</sup> | Julia P. Dunn MD<sup>2</sup> | Robert F. Kushner MD<sup>3</sup> |  
Dachuang Cao PhD<sup>2</sup> | Charles Harris MD<sup>2</sup> | Theresa Hunter Gibble PhD<sup>2</sup> |  
Adam Stefanski MD<sup>2</sup> | Ryan Griffin Pharm. D.<sup>2</sup>

# Side effects

- Muscle Reduction (rapid weight loss)
  - SURMOUNT -1 clinical trial had significant reduction in muscle volume (~25%)
- Increased dose increases side effects related to compliance
  - GI side effects (nausea, diarrhea, vomiting)
  - Can decrease dose and even 5mg can result in 15% weight loss.
- Stopping treatment leads to regain of last weight
  - SURMOUNT-4 study; 36 weeks with drug and followed by 52 week wash out
  - 17% with placebo kept weight off compared to 90% that stayed on tirzepatide

# Sleep Apnea Treatment Independent of Weight Loss



## Therapeutic Potential of Glucagon-like Peptide-1 Receptor Agonists in Obstructive Sleep Apnea Syndrome Management: A Narrative Review

Silvano Dragonieri <sup>1,\*</sup>, Andrea Portacci <sup>1</sup>, Vitaliano Nicola Quaranta <sup>1</sup>, Pierluigi Carratu <sup>2</sup>, Zsofia Lazar <sup>3</sup>, Giovanna Elisiana Carpagnano <sup>1</sup> and Andras Bikov <sup>4</sup>

- **Anti-Inflammatory Effect**
  - GLP-1RA reduces proinflammatory TNF- $\alpha$ , IL-1 $\beta$ , and IL-6 AND increases anti-inflammatory IL-10
- **Cardiovascular Risk**
  - GLP-1 receptors regulate autonomic blood pressure
  - GLP-1RA reduction in vascular inflammation and atherosclerosis (decrease endpoint symptomology)
- **Neurological Effects**
  - GLP-1RA promotes neuronal survival, reduces oxidative stress, increases neurogenesis.

# Combination Therapies

- GLP-1 receptor agonists alone are not sufficient as a sole treatment for OSA
- High dose required for clinically meaningful AHI reduction has a high frequency of adverse events including nonfatal strokes, psychiatric derangements, and myocardial infarctions
- GLP-1 RA takes months (~6mo) to reduce BMI that provides significant benefit from OSA
- “Bariatric surgery will be reduced with tirzepatide, but oral appliance treatment should not be affected.” – Rich Schwab

## JOURNAL ARTICLE

### 0772 The Impact of GLP-1 and GLP-1/GIP Receptor Agonists on Hypoglossal Nerve Stimulator Treatment in Sleep Apnea Patients

Arman Saeedi, Valeria Munguia Jovel, Konstantinos Oikonomou, Aditya Kumar, Sarah Debs, Alyssa Calder, Maria Suurna, Ryan Nord

*Sleep*, Volume 48, Issue Supplement\_1, May 2025, Pages A334–A335,

<https://doi.org/10.1093/sleep/zsa090.0772>

**Published:** 19 May 2025

EXPERT OPINION ON PHARMACOTHERAPY  
2025, VOL. 26, NO. 1, 51–62  
<https://doi.org/10.1080/14656566.2024.2437525>

 Taylor & Francis  
Taylor & Francis Group

## REVIEW

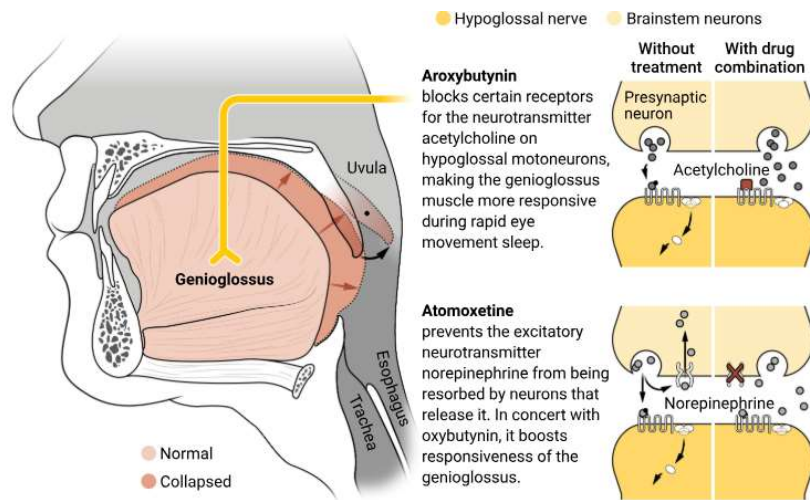
### Current perspectives on the use of GLP-1 receptor agonists in obesity-related obstructive sleep apnea: a narrative review

Ali A. El-Solh <sup>a,b,c</sup>, Erin Gould<sup>b</sup>, Keziah Aibangbee<sup>b</sup>, Tanya Jimerson<sup>b</sup> and Rebecca Hartling<sup>b</sup>

<sup>a</sup>Sleep Disorders Research Center, Western New York Healthcare System, Buffalo, NY, USA; <sup>b</sup>Division of Pulmonary, Critical Care, and Sleep Medicine, Department of Medicine, Jacobs School of Medicine and Biomedical Sciences, University at Buffalo, Buffalo, NY, USA; <sup>c</sup>Department of Epidemiology and Environmental Health, School of Public Health and Health Professions, Buffalo, NY, USA

# Apnimed

- AD109 product for neuromuscular dysfunction associated with OSA. Combination of 2 drugs (atomoxetine and aroxybutynin)



V. ALTOUNIAN/SCIENCE



Phase III trials LunAIRo (1yr) and SynAIRgy (6mo) meeting expectations and planned to be on market



Early data showing good clinical results; LunAIRo and SynAIRgy Phase III

# Chugai Pharmaceutical

- Tofogliflozin (Sodium-glucose cotransporter-2) is approved for type 2 diabetes. Effect seen in OSA patients with HF and DM



Not approved for OSA.  
Indication is T2DM



6 mo administration  
reduced AHI by 18.3%

# RespireRx Pharmaceuticals Inc.

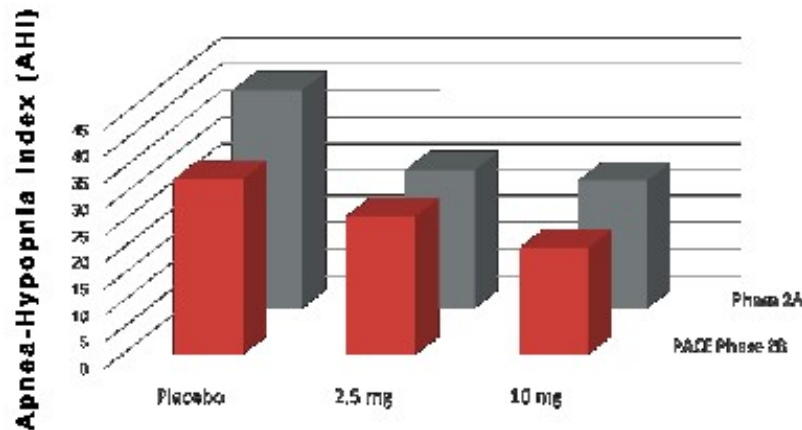
- Developing oral capsule dronabinol (synthetic THC / D9-THC) to treat OSA. ResolutionRx. Also working on AMPAkiners and GABAkiners for pain and ADHD.



Not on the market.

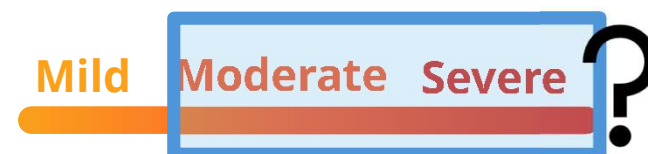


Phase 2 product through 505(b)(2). PACE clinical trial reduced by 13 AHI.



# Incannex

- Developing oral capsule IHL-42X (combination therapy of acetazolamide and dronabinol)



Not on the market.



Phase 2/3 efficacy and safety trial (RePOSA). 18 AHI reduction. In another, 43 to 21 AHI reduction with 80% reduction in severity.

|          |                                |                                                                                                                                                     |
|----------|--------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|
| RePOSA   | Ph 2/3 Safety & Efficacy Trial | <ul style="list-style-type: none"><li>• 560-patient, randomized, double-blind safety and efficacy study</li><li>• Dosing started May 2024</li></ul> |
| PK Study | PK and Safety Trial            | <ul style="list-style-type: none"><li>• 114-subject, pharmacokinetics and safety study</li><li>• Dosing completed July 2024</li></ul>               |
| POC      | Ph 2 Trial                     | <ul style="list-style-type: none"><li>• Crossover, safety and efficacy study</li><li>• Study completed</li></ul>                                    |

## Pharmacological treatment for obstructive sleep apnea: A systematic review and meta-analysis

Maria Lúfa Nobre<sup>a</sup>, Ayane Cristine Alves Sarmento<sup>a,b</sup>, Priscila Farias de Oliveira<sup>b,c</sup>, Felipe Ferreira Wanderley<sup>b,d</sup>, José Diniz Júnior<sup>b,c</sup>, Ana Katherine Gonçalves<sup>b,e,f,g</sup>

<sup>a</sup> Programa de Pós-Graduação em Ciências da Saúde, Universidade Federal do Rio Grande do Norte, Natal, RN, Brazil

<sup>b</sup> Department of Clinical Analysis and Toxicology, Universidade Federal do Rio Grande do Norte, Natal, RN, Brazil

<sup>c</sup> Department of Surgery, Universidade Federal do Rio Grande do Norte, Natal, RN, Brazil

<sup>d</sup> Faculdade de Medicina, Universidade Federal do Rio Grande do Norte, Natal, RN, Brazil

<sup>e</sup> Department of Gynecology and Obstetrics, Universidade Federal do Rio Grande do Norte, Natal, RN, Brazil

# In Context – Other Medications

| Comparison                    | Certainty assessment |                   |              |               |              |             |                      | No of patients |           | Effect            |                                                      | Certainty     | Importance    |
|-------------------------------|----------------------|-------------------|--------------|---------------|--------------|-------------|----------------------|----------------|-----------|-------------------|------------------------------------------------------|---------------|---------------|
|                               | No of studies        | Study design      | Risk of bias | Inconsistency | Indirectness | Imprecision | Other considerations | [Intervention] | [Placebo] | Relative (95% CI) | Absolute (95% CI)                                    |               |               |
| Nasal steroid vs Placebo      | 3                    | randomised trials | not serious  | not serious   | serious      | not serious | none                 | 46             | 46        | -                 | MD 1.74 lower (7.79 lower to 4.33 higher)            | ⊕⊕⊕○ Moderate | IMPORTANT     |
| Nasal decongestant vs Placebo | 2                    | randomised trials | serious      | not serious   | serious      | not serious | none                 | 27             | 27        | -                 | MD 7.97 events/h lower (18.71 lower to 2.77 higher)  | ⊕⊕○○ Low      | NOT IMPORTANT |
| AltoOxy vs Placebo            | 5                    | randomised trials | not serious  | not serious   | not serious  | not serious | none                 | 144            | 143       | -                 | MD 7.71 lower (10.59 lower to 4.83 lower)            | ⊕⊕⊕⊕ High     | IMPORTANT     |
| ReboxOxy vs Placebo           | 3                    | randomised trials | not serious  | not serious   | not serious  | not serious | none                 | 47             | 47        | -                 | MD 10.78 events/h lower (24.27 lower to 2.71 higher) | ⊕⊕⊕⊕ High     | IMPORTANT     |
| Mirtazapine vs Placebo        | 3                    | randomised trials | serious      | serious       | not serious  | not serious | none                 | 79             | 79        | -                 | MD 1.11 events/h lower (11.88 lower to 9.66 higher)  | ⊕⊕○○ Low      | IMPORTANT     |
| Eszopiclone vs Placebo        | 3                    | randomised trials | not serious  | not serious   | not serious  | not serious | none                 | 77             | 79        | -                 | MD 2.24 events/h lower (6.14 lower to 1.67 higher)   | ⊕⊕⊕⊕ High     | IMPORTANT     |
| Sodium oxybate vs Placebo     | 2                    | randomised trials | serious      | not serious   | not serious  | not serious | none                 | 68             | 64        | -                 | MD 5.5 events/h lower (9.28 lower to 1.73 lower)     | ⊕⊕⊕○ Moderate | IMPORTANT     |
| Trazodone vs Placebo          | 2                    | randomised trials | not serious  | not serious   | serious      | not serious | none                 | 37             | 37        | -                 | MD 12.75 events/h lower (21.3 lower to 4.19 lower)   | ⊕⊕⊕○ Moderate | IMPORTANT     |
| Zolpidem vs Placebo           | 2                    | randomised trials | serious      | not serious   | serious      | not serious | none                 | 61             | 61        | -                 | MD 0.21 events/h lower (4.39 lower to 3.96 higher)   | ⊕⊕○○ Low      | NOT IMPORTANT |
| Zopiclone vs Placebo          | 3                    | randomised trials | not serious  | not serious   | serious      | not serious | none                 | 54             | 56        | -                 | MD 0.98 events/h lower (9.71 lower to 7.76 higher)   | ⊕⊕⊕○ Moderate | IMPORTANT     |
| Donepezil vs Placebo          | 3                    | randomised trials | not serious  | not serious   | serious      | not serious | none                 | 63             | 63        | -                 | MD 8.56 events/h lower (15.78 lower to 1.33 lower)   | ⊕⊕⊕○ Moderate | IMPORTANT     |

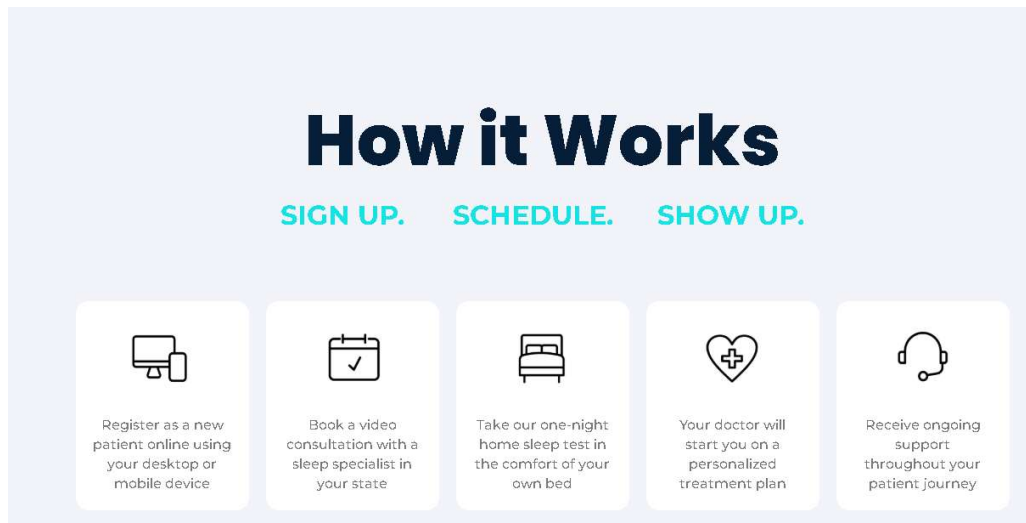
CI: confidence interval; MD: mean difference



Digital Health

# Ognomy

- Digital health to streamline sleep apnea process. Corporate investor is Inspire Medical Systems. Uses AI.



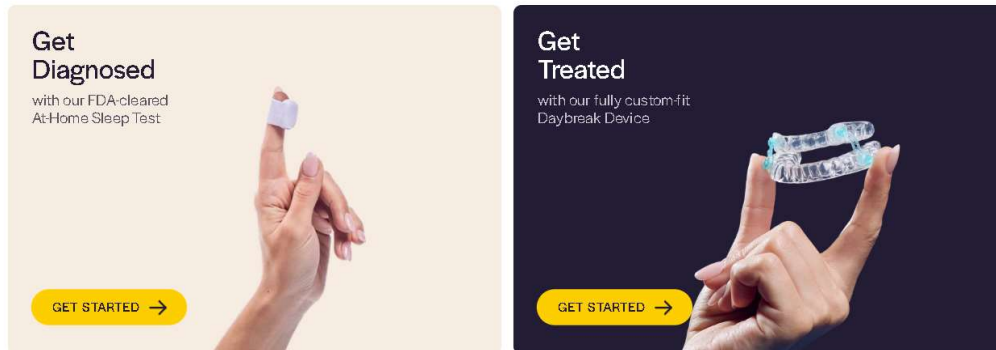
On market.



No studies

# Daybreak

- Offers OTC oral appliance therapy through website in addition to OSA diagnostics.



On market.



No studies

# EnsoData

- Current focus on diagnostics. Working with partners for hardware and has corporate investors of Inspire Medical Systems

## Connecting Sleep Disorder Diagnosis to Therapy

Supporting sleep professionals in the testing, diagnosis, and therapeutic monitoring of sleep disorders.

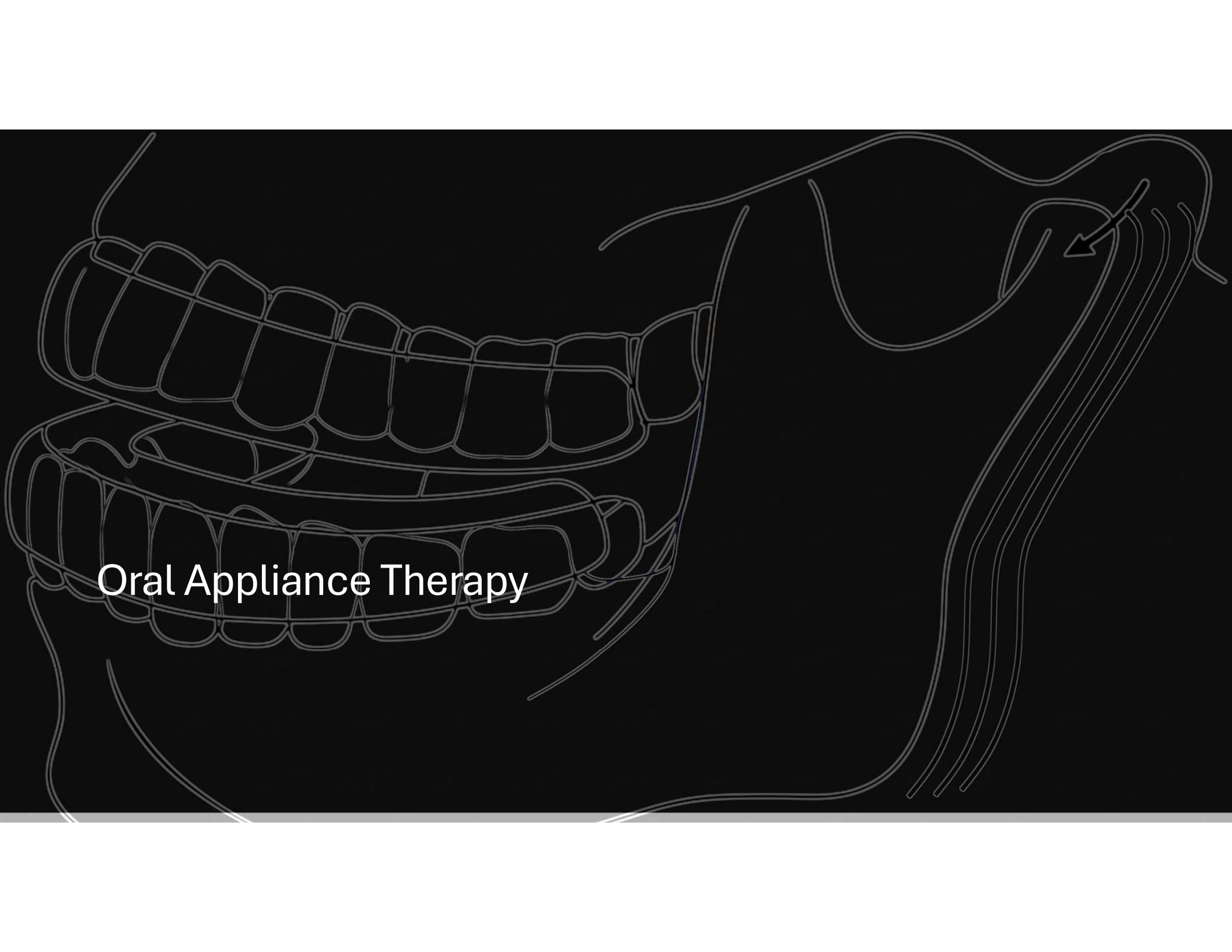
- EnsoSleep PPG™ Home Sleep Testing
- EnsoSleep™ AI Scoring for PSGs, HSATs
- Celeste+™ Mobile Application
- Remote Physiological Monitoring (RPM)



On market.



No studies



# Oral Appliance Therapy

# Somnomed

- Smart oral appliance that detects efficacy and compliance. Announced Feb 2022



Not on market in US.



High agreement in total sleep ( $r = .8$ ) yet issues with supine sleep (64% correlation)

# Vivos

- Vibration on lingual of teeth from the oral device to treat sleep apnea.
- Intermittent light cyclical forces to stimulate craniofacial osteogenesis



Vibration device not on market



No studies regarding this product.

# Prosomnus

- Remote patient monitoring RPMO2 OSA Device. Showed similarity to pulse oximeter per company. 12 patients enrolled.

Introducing the ProSomnus Buccal Mucosal Oximeter  
The Future of Sleep Medicine

WEAR MONITOR OPTIMIZE



Regression and Bland-Altman agreement versus arterial line and ECG (Snow et al, 2025)  
 $r = .95$ , SpO<sub>2</sub>% (Device) vs SaO<sub>2</sub>% (Co-oximeter); Bias = 0.72; n = 325  
 $r = .99$ , pulse rate vs ECG heart rate (bpm); Bias = 0.30; n = 346

ProSOMNUS SLEEP TECHNOLOGIES

Disclaimer: This product is not a medical device and is not intended to diagnose, treat, cure, or prevent any disease or medical condition. For medical concerns, please consult a licensed healthcare professional.



Not on the market yet.  
Applied to FDA.

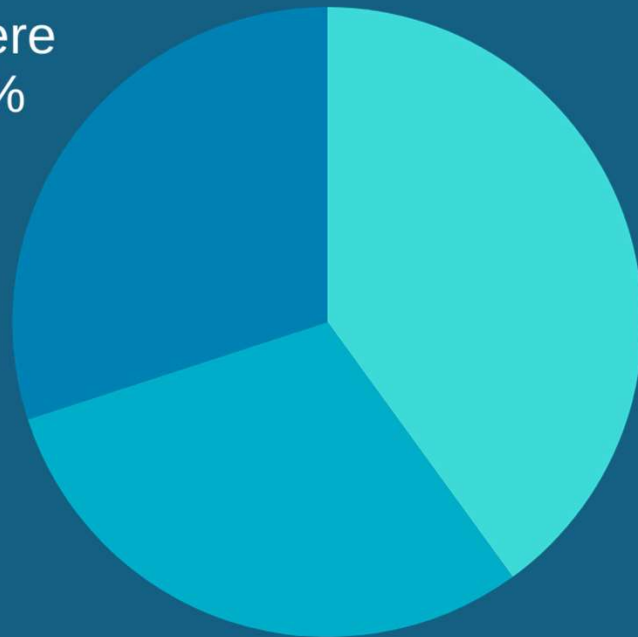


Accuracy root mean  
square of 2.32%

The image features a collection of light gray paper cutouts of human heads in profile, arranged in a layered, overlapping fashion. Most of the cutouts have a large black question mark on their forehead, while one central cutout displays a blue line drawing of a lit lightbulb. The cutouts are set against a dark teal background, and the word "Thoughts" is printed in white on the left side.

Thoughts

Severe  
30%

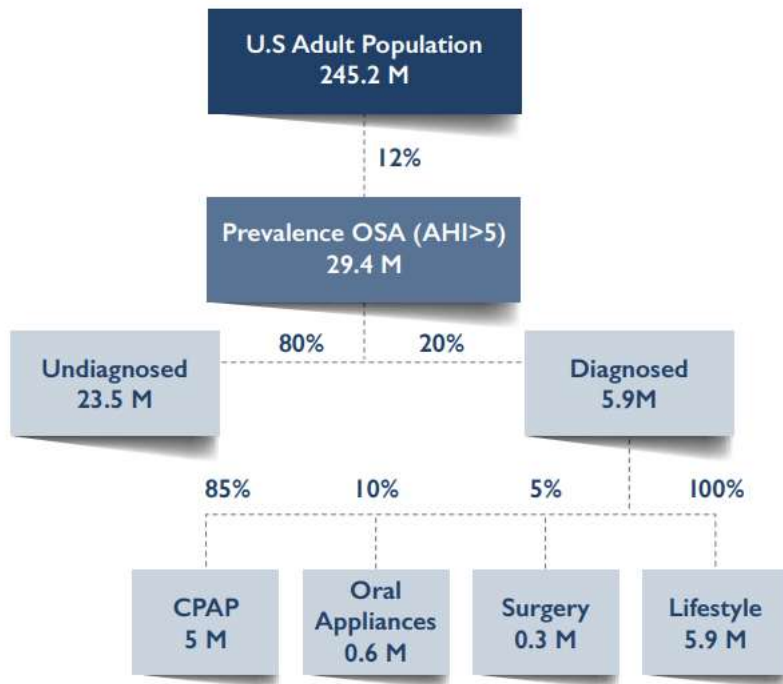


Mild  
40%

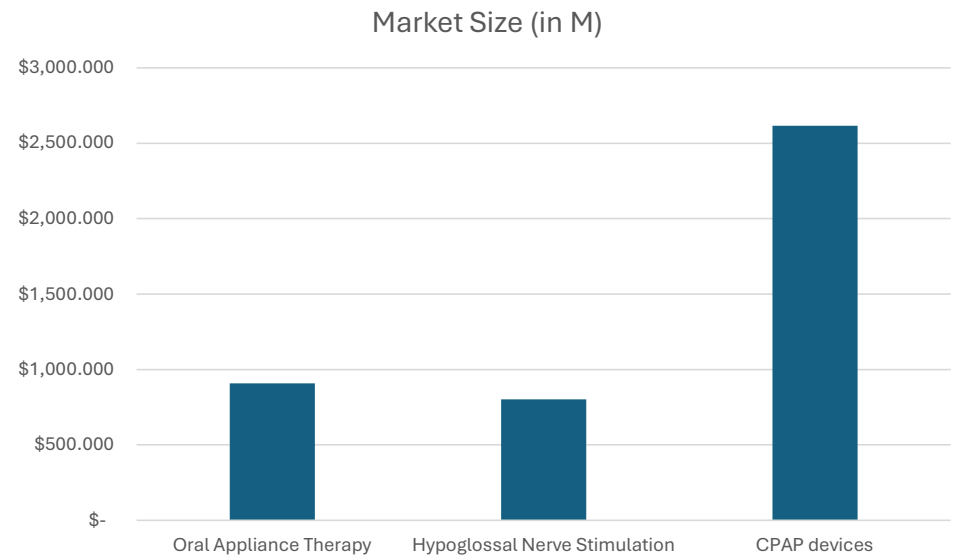
Moderate  
30%

Severity of Disease in  
the Population

# Clinical and Financial Positions



Frost & Sullivan 2016 report



Estimates for 2025

# Dentists' Role

## Dentist

### Mandibular Advancement Devices

- Somnomed
- Prosomnus
- Vivos

## DME / Consumer

### Positional Sleep Apnea

- Smart Nora
- Night Balance

### Digital Health

- Ensodata
- Ognomy
- Daybreak

### Myofunctional Therapy Devices

- ExciteOSA
- REMastered Sleep

## Non-Dentist

### Pressure Systems

- KPAP
- Sommetrics

### Soft Palate Augmentations

- Cryosa

### Hyoid Suspension

- MagNap
- Siesta Medical

### Non-Invasive Neuromodulation

- XII Medical
- Pasithea
- Restera
- WhisperSom

### Surgical Hypoglossal Nerve Stimulation

- Inspire
- Nyxoah
- Liva Nova
- StimAire

### Pharmacology

- Eli Lilly
- Apnimed
- Chugai Pharm
- RespireRX Pharm
- Incannex

### Tongue Mobility

- Respiosa
- Linguaflex

# Compliance

- **CPAP:** after 1 year 50% non-compliant
- **Inspire:** after 30 days 7%; after 6 months 7-25% non-compliant
- **Tirzepatide:** after 1 year 50% non-compliant

JAMA  
Network | **Open.**

Research Letter | Diabetes and Endocrinology

## GLP-1 Receptor Agonist Discontinuation Among Patients With Obesity and/or Type 2 Diabetes

Duy Do, PhD; Tiffany Lee, PhD; Samuel K. Peasah, PhD, MBA; Chester B. Good, MD, MPH; Angela Inneh, MPH, MBA; Urvashi Patel, PhD, MPH

*The Laryngoscope*  
© 2024 The American Laryngological,  
Rhinothological and Otological Society, Inc.

## Relationship of Modified Sleep Apnea Severity Index and HGNS Efficacy and Adherence in OSA Patients

Praneet C. Kaki, BS ; Nicole Molin, MD; Jennifer A. Goldfarb, MHS; Thomas M. Kaffenberger, MD; Erin Creighton, MD; Maurits Boon, MD; Colin Huntley, MD 