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*Why I, as a rheumatologist, am happy to make the diagnosis of obstructive sleep apnea*

Why should a rheumatologist have special interest in this disorder? The answer lies in 2 major reasons patients are referred for a rheumatology consultation: fatigue and inflammation.

Brian F. Mandell, MD, PhD

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*Oral lichen planus*

Risk factors include medications, dental materials, and viral infections such as hepatitis C.

Sanjana Mathew, MBBS; Carol Lobo, MBBS, MD; Meryl Antony, MBBS, MD

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*Stiff hands in a man with type 1 diabetes*

The patient had been on injectable insulin for the past 6 years, with frequent dose titrations because of poor control. A recent hemoglobin A1c was 7.2%.

Rhea Ahuja, MD; Purn Pragya, MBBS

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*Should my patients take their blood pressure medications in the evening to enhance cardiovascular benefit?*

The focus should be to achieve blood pressure control and facilitate adherence, regardless of the timing of the medications.

Elias Bassil, MD; George Thomas, MD; Jagmeet Dhingra, MD; Ali Mehdi, MD, MEd, FACP, FASN

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Treatments for obstructive sleep apnea: CPAP and beyond 755
Options include behavioral interventions, oral appliances, nasal expiratory positive airway pressure, negative pressure interventions, and surgical procedures. Certain drugs are also promising.
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