

Roles of Chatbot on a Decision of Continuous Positive Airway Pressure (CPAP) Purchasing in Adult Patients with Obstructive Sleep Apnea

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Objective: Obstructive sleep apnea (OSA) is a common disease in clinical practice. To reduce risks of OSA consequences, a continuous positive airway pressure (CPAP) is needed. Chatbot is an artificial intelligence which is classified as conversational agents. Chatbot may be a helpful tool to assist patients with OSA and reduce physicians' workload regarding a decision on CPAP purchasing. This study aimed to evaluate if chatbot can be a helpful tool on a decision on CPAP purchasing.

Materials and Methods: This was an intervention study. The inclusion criteria were adult patients diagnosed as OSA and had an experience on CPAP trial. The primary outcome of the study was a decision on CPAP purchasing after chatbot intervention. All patients were categorized into two groups after chatbot intervention: purchased CPAP and did not purchase CPAP. Factors and outcomes were compared between both groups.

Results: There were 29 patients with OSA participated in the present study. Of those, 6 patients (20.69%) decided to purchase CPAP. The CPAP purchasing group had higher visits on chatbot than the non-purchasing group on the following items: Treatment of OSA, What is CPAP?, reimbursement of CPAP, types of CPAP and price. The CPAP purchasing group also spent more times in chatbot than the non-purchasing group (3.83 vs. 3.30 minutes; $p=0.678$). After chatbot intervention, 2 patients (33.33%) changed a decision of CPAP purchasing from deciding to purchased, while 3 patients who wanted to purchase a CPAP changed their minds. There were 6 patients (20.69%) who did not need to see a doctor after chatbot intervention; mostly in the group who did not purchase CPAP (5 patients; 83.33%).

Conclusion: Chatbot is a helpful tool to provide knowledge or cognitive ability on CPAP and may improve a decision of CPAP purchasing.

Keywords: Management; Artificial intelligence; Knowledge; Control

J Med Assoc Thai 2023; 106(Suppl.1):S71-5

Website: <http://www.jmatonline.com>

Obstructive sleep apnea (OSA) is a common disease in clinical practice. The prevalence of OSA in general population ranged from 9% to 38% with more prevalent in male or elderly population⁽¹⁾. The prevalence of OSA in male and female elderly population was 90% and 78%, respectively. OSA is also reported to be associated in several cardiovascular conditions such as diabetes, hypertension,

hypertensive crisis, stroke, or coronary artery disease⁽²⁻⁹⁾. To reduce risks of OSA consequences, a continuous positive airway pressure (CPAP) is needed. From a meta-analysis found that CPAP purchasing rate in patients with OSA varied from 32% to 77.36%^(10,11). Predictors of CPAP purchasing included age, education, income, or smoking.

Previously, marketing theory is focused on 4P: product, price, promotion, and place. Currently, three P and one G are added for marketing principles including people, process, perseverance and green marketing in the digital era⁽¹²⁾. Online or mobile marketing enhances perseverance and green online marketing. Chatbot is an artificial intelligence which is classified as conversational agents. It has been used for customer support in more than 67% of consumers worldwide with 53% of satisfaction⁽¹³⁾. There are several customers' benefits by chatbot including 24 hour service, instant response, answers to simple questions, or easy communication. Additionally, chatbot may assist customers' purchasing decision. But, there is limited data

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How to cite this article:

Thoumrungroje P, Chainarong A, Namwaing P, Sawanyawisuth K, Sawunyavisuth B. Roles of Chatbot on a Decision of Continuous Positive Airway Pressure (CPAP) Purchasing in Adult Patients with Obstructive Sleep Apnea. *J Med Assoc Thai* 2023;106:S71-5.

DOI: 10.35755/jmedassocthai.2023.S01.13791

of chatbot in purchasing medical devices.

A meta-analysis found that chatbot can be used for several reasons such as self-management or health monitoring⁽¹⁴⁻¹⁷⁾. As previously reported, a decision to purchase is a complex condition with several predictors⁽¹¹⁾. Additionally, attending physicians always have limited time to see each patient. Therefore, chatbot may be a helpful tool to assist patients with OSA and reduce physicians' workload regarding a decision on CPAP purchasing. A systematic review found that there is no previous study evaluated role of chatbot in CPAP purchasing in patients with OSA. This study aimed to evaluate if chatbot can be a helpful tool on a decision on CPAP purchasing.

Materials and Methods

This was an intervention study conducted at Sleep clinic, Srinagarind Hospital, Khon Kaen University, Khon Kaen, Thailand. The inclusion criteria were adult patients diagnosed as OSA and had an experience on CPAP trial. The CPAP trial was undergone either at home or at the sleep lab. Those who pregnant or had any contraindication for CPAP therapy were excluded. The study period was between April 2022 and July 2022. The present study was approved by Ethics Committee, Faculty of Medicine, Khon Kaen University (HE641649).

Eligible patients were requested to have a conversation with the chatbot of OSA which is set up on line application. It can be accessed via smartphone or other online devices such as computer or IPAD. There are 12 items on the first page of chatbot of OSA including definition of OSA, causes of OSA, consequences of OSA, treatments of OSA, details of CPAP, advantages of CPAP, principles of using CPAP, cleaning of CPAP, side effects of CPAP, reimbursement of CPAP, and types of CPAP and its price. These details are made to educate patients with OSA according to common questions of previous patients to the physicians. The patients were asked to communicate with chatbot of OSA without time limitations.

Baseline characteristics, co-morbid diseases, symptoms of OSA, perceptions of chatbot, chatbot visits in each category, and time used for chatbot were assessed. The perceptions of chatbot were given in a Likert scale from 1 to 5; 1 indicating strongly disagreed and 5 indicating strongly agree. Chatbot visits were summation of count number in each chatbot item from all patients.

The primary outcome of the study was a decision on CPAP purchasing after chatbot intervention. A decision of CPAP purchasing was also reported by each patient prior to chatbot intervention as purchase, did not purchase, or deciding. A need to see doctor after chatbot intervention was also assessed as well as duration of chatbot visit.

Statistical analyses. All patients were categorized into

two groups after chatbot intervention: purchased CPAP and did not purchase CPAP. Studied factors were calculated and reported as mean (SD) for numerical factors and number (percentage) for categorical factors. Differences between both groups were executed by Wilcoxon rank sum test for numerical factors and Fisher Exact test for categorical factors. All statistical analyses were performed by STATA software (College Station, Texas, USA).

Results

There were 29 patients with OSA participated in the study. Of those, 6 patients (20.69%) decided to purchase CPAP. Regarding baseline characteristics (Table 1), those who purchased CPAP had younger age (33.67 vs. 42.17; $p=0.100$) and higher proportion of male sex (66.67% vs. 56.52%, $p=0.999$) than those who did not purchase CPAP.

Table 1. Baseline characteristics of patients with obstructive sleep apnea (OSA) who participated in the chatbot study categorized by a decision of continuous positive airway pressure machine (CPAP) purchasing

Factors	Purchased, n=6	Did not purchase, n=23	p-value
Age, years	33.67 (11.27)	42.17 (12.22)	0.100
Male sex	4 (66.67)	13 (56.52)	0.999
Education, college	2 (33.33)	16 (69.57)	0.164
Marital status, single	5 (83.33)	8 (36.36)	0.093
Occupation, civil	4 (66.67)	11 (47.83)	0.999
Income, 10,001 to 15,000 Baht/month	3 (50.00)	3 (13.04)	0.584
Co-morbid diseases			
Diabetes mellitus	1 (20.00)	6 (35.29)	0.999
Hypertension	0	9 (52.94)	0.104
Coronary artery disease	0	1 (5.88)	0.999
Stroke	0	2 (11.76)	0.999
Arrhythmia	0	1 (5.88)	0.999
Depression	1 (20.00)	1 (5.88)	0.411
Symptoms of OSA			
Snoring	6 (100)	20 (90.91)	0.999
Insomnia	2 (33.33)	8 (36.36)	0.999
Unrefreshed sleep	2 (33.33)	11 (50.00)	0.655
Fatigue	1 (16.67)	8 (36.36)	0.630
EDS	1 (16.67)	13 (59.09)	0.165
Palpitation	0	8 (36.36)	0.141
Headache	1 (16.67)	5 (22.73)	0.999
Dyspnea	2 (33.33)	3 (13.64)	0.285
Nocturia	5 (83.33)	16 (69.57)	0.647
Know CPAP			
Flyer	0	1 (4.76)	0.999
Physician	5 (83.33)	19 (90.48)	0.545
Friends/colleagues	2 (33.33)	1 (4.76)	0.115
Know chatbot	1 (16.67)	3 (14.29)	0.999

Note: Data presented as mean (SD) or number (percentage).

There were comparable results in terms of co-morbid diseases, symptoms of OSA, proportions of patients who know CPAP, and a proportion of patients who know chatbot between the groups who purchased and did not purchase CPAP.

Patients in both groups had comparable perceptions about chatbot and chatbot on a decision of CPAP purchasing (Table 2). The patients who purchased CPAP rated higher scores on the items of chatbot can help to make a decision on CPAP purchasing faster than seeing the doctor (4.0 vs. 3.5; $p=0.332$) and chatbot can assist you regarding CPAP purchasing (4.0 vs. 3.2; $p=0.143$) than those who did not purchase CPAP.

The CPAP purchasing group had higher visits on chatbot than the non-purchasing group on the following items (Table 3): Treatment of OSA, What is CPAP?, reimbursement of CPAP, types of CPAP and price. The CPAP purchasing group also spent more times in chatbot than the non-purchasing group (3.83 vs. 3.30 minutes; $p=0.678$). After chatbot intervention (Table 4), 2 patients (33.33%) changed a decision of CPAP purchasing from deciding to purchased, while 3 patients who wanted to purchase a CPAP changed their minds (13.04%). These differences were significantly different ($p=0.029$). There were 6 patients (20.69%) who did not need to see a doctor after chatbot intervention; mostly in the group who did not purchase CPAP (5 patients; 83.33%) with a p value of 0.999 (Table 4).

Discussion

The CPAP purchasing rate in the present study was quite low compared with previous studies (20.69% vs. 32%). This lower rate may explain by study population. First, the age group in the present study was quite young compared

with previous studies. The meta-analysis found that the average age of those who purchased CPAP was 56.04 years, while the average age in this study was quite young at 33.67 years (Table 1). The average age of all patients was 40.41 years (SD 12.34). Those young patients may have limited financial status leading to low purchasing rate compared with those older patients. Additionally, symptoms of OSA were reported not frequently such as daytime sleepiness (48.27%), or unrefreshed sleep (44.82%). The low rate of symptoms may lead to low awareness of OSA.

According to the current concepts of consumption of consumer behaviors, the ICABS framework is modified for the digital era⁽¹⁸⁾. The ICABS stands for information (I), cognition (C), affect (A), behavior (B), and satisfaction (S).

Table 3. Chatbot visits in patients with obstructive sleep apnea (OSA) who participated in the chatbot study categorized by a decision of continuous positive airway pressure machine (CPAP) purchasing

Factors	Purchased n=6	Did not purchase n=23	p-value
What is OSA?	3 (50.00)	16 (76.19)	0.319
Causes of OSA	2 (33.33)	14 (66.67)	0.187
Consequences of OSA	2 (33.33)	9 (42.86)	0.999
Treatments of OSA	4 (66.67)	11 (52.38)	0.662
What is CPAP?	3 (50.00)	9 (42.86)	0.999
Advantages of CPAP	1 (16.67)	6 (28.57)	0.999
Principles of using CPAP	0	7 (33.33)	0.155
Cleaning of CPAP	0	4 (19.05)	0.545
Side effects of CPAP	2 (33.33)	8 (38.10)	0.999
Reimbursement of CPAP	5 (83.33)	10 (47.62)	0.182
Types of CPAP and price	3 (50.00)	8 (38.10)	0.662
Times in chatbot	3.83 (3.25)	3.30 (2.32)	0.678

Note. Data presented as number (percentage).

Table 2. Perception of chatbot in patients with obstructive sleep apnea (OSA) who participated in the chatbot study categorized by a decision of continuous positive airway pressure machine (CPAP) purchasing

Factors	Purchased n=6	Did not purchase n=23	p-value
Chatbot can answer and responses to any interesting questions	4.2 (0.5)	3.8 (0.7)	0.262
Chatbot can give information regarding OSA and treatment before seeing the doctor at the hospital	4.0 (0)	4.0 (0.9)	0.720
Chatbot tells you about OSA	3.4 (0.9)	3.7 (0.7)	0.509
Chatbot tells you about OSA treatment	3.4 (0.9)	3.6 (0.9)	0.808
Chatbot gives information easily and conveniently	4.2 (0.4)	3.7 (0.8)	0.215
Chatbot gives fast information than other methods	4.4 (0.4)	4.0 (0.9)	0.488
Chatbot gives the right point of interest quickly	3.8 (0.8)	3.9 (0.7)	0.637
Chatbot gives interesting information	4.2 (0.4)	3.8 (0.7)	0.214
Chatbot is a preference way of searching data	3.8 (0.4)	3.8 (0.8)	0.876
Chatbot provides information about health for you and your beloved ones	4.4 (0.5)	3.7 (0.9)	0.167
Chatbot can help you to make a decision on CPAP purchasing faster than seeing the doctor	4.0 (1.0)	3.5 (0.8)	0.332
Chatbot can assist you regarding CPAP purchasing	4.0 (1.0)	3.2 (0.8)	0.143

Note. Data presented as mean (SD) out of 5; 5 indicating strongly agreed and 1 indicating strongly disagreed

Table 4. Decision of continuous positive airway pressure machine (CPAP) purchasing and a need to see doctor in patients with obstructive sleep apnea (OSA) before participated in the chatbot study categorized by a decision of CPAP purchasing

Factors	Purchased CPAP after chatbot intervention, n=6	Did not purchase CPAP after chatbot intervention, n=23	p-value
Decision of CPAP purchasing prior to chatbot intervention			0.029
Purchased	4 (66.67)	3 (13.64)	
Did not purchase	0	5 (21.74)	
Deciding	2 (33.33)	15 (65.22)	
Need to see doctor after chatbot intervention	5 (83.33)	18 (78.26)	0.999

Note. Data presented as number (percentage).

These factors are adapted due to advance digital platform. Chatbot is one of digital technology that can provide information (I) for patients with satisfaction (S) without time limitation as seen in the physician office. Chatbot can also have impact on cognitions (C) and behaviors (B) of patients with OSA to study on the disease (OSA) and treatment (CPAP).

There were five patients (17.24%) who changed their minds after chatbot intervention; 2 patients from “deciding” to “purchase” and 3 patients from “purchased” to “did not purchase/deciding”. These results may imply that chatbot may be able to assist the patients to find the right answer for them regarding a decision on CPAP purchasing. Additionally, 6 patients (20.69%) did not want to see a doctor. These results may indicate that chatbot may be effectively as doctor. In other words, chatbot may be helpful or save the doctor’s time. As previously reported, chatbot is generally acceptable and provide knowledge and cognitive/behavior therapy via conversation messages. Chatbot is acceptable by children with asthma showed by acceptance score of 8 by 11-point Likert scale⁽¹⁹⁾. Another study in children with asthma and their family member found that chatbot can improve cognitive skill with a completion rate of 75.5%⁽²⁰⁾. Therefore, chatbot may improve knowledge and cognitive skill in patients with OSA leading to appropriate decision on CPAP purchasing for each individual.

A previous study on consumer’s purchase in Malaysian retail market found that social media may affect consumer decisions⁽²¹⁾. However, it was not statistically significant in the final model with a coefficient of -0.165 (p=0.125). The most important factor associated with consumer decision was perceived value of the product (coefficient 0.593; p<0.05). These results may imply for the purchasing of CPAP that perceived of CPAP value may increase chance of purchasing. Chatbot may be one helpful tool to improve knowledge and perception as it provide CPAP information for those who purchased and did not purchase CPAP (Likert scale of 4.0/5.0 in both groups) as shown in Table 2.

This may be the first study of chatbot on a decision of CPAP purchasing in patients with OSA. However, there are some limitations in the study. First, there is no intervention

related to CPAP purchasing or compliance⁽²²⁻²⁴⁾. Second, no related personal factor or systematic study design were studied or performed⁽²⁵⁻²⁷⁾. Finally, the study population may be specifically to adult patients with limited sample size; no predictor analysis.

In conclusion, chatbot is a helpful tool to provide knowledge or cognitive ability on CPAP and may improve a decision of CPAP purchasing.

What is already known on this topic?

Predictors of CPAP purchasing included age, education, income, or smoking.

No previous study on chatbot and CPAP purchasing.

What this study adds?

Chatbot may be a tool to assist patients with OSA to decide if they would like to purchase CPAP or not.

Acknowledgements

The authors thank the Department of Medicine, Faculty of Medicine, Khon Kaen University for publication support.

Conflicts of interest

The authors declare no conflict of interest.

References

1. Senaratna CV, Perret JL, Lodge CJ, Lowe AJ, Campbell BE, Matheson MC, et al. Prevalence of obstructive sleep apnea in the general population: A systematic review. *Sleep Med Rev* 2017;34:70-81.
2. Khamsai S, Mahawarakorn P, Limpawattana P, Chindapasirt J, Sukeepaisarnjaroen W, Silaruks S, et al. Prevalence and factors correlated with hypertension secondary from obstructive sleep apnea. *Multidiscip Respir Med* 2021;16:777.
3. Khamsai S, Kachenchart S, Sawunyavisuth B, Limpawattana P, Chindapasirt J, Senthong V, et al. Prevalence and risk factors of obstructive sleep apnea in hypertensive emergency. *J Emerg Trauma Shock* 2021;14:104-7.
4. Khamsai S, Chotrakool A, Limpawattana P, Chindapasirt J, Sukeepaisarnjaroen W, Chotmongkol

- V, et al. Hypertensive crisis in patients with obstructive sleep apnea-induced hypertension. *BMC Cardiovasc Disord* 2021;21:310.
5. Soontornrungsun B, Khamsai S, Sawunyavisuth B, Limpawattana P, Chindaprasirt J, Senthong V, et al. Obstructive sleep apnea in patients with diabetes less than 40 years of age. *Diabetes Metab Syndr* 2020;14:1859-63.
 6. Singh P, Chopra M, Vardhan V. Detection of obstructive sleep apnea in young patients suffering from coronary artery disease by performing portable polysomnography studies. *Med J Armed Forces India* 2022;78:394-9.
 7. Sanlung T, Sawanyawisuth K, Silaruks S, Chattakul P, Limpawattana P, Chindaprasirt J, et al. Clinical characteristics and complications of obstructive sleep apnea in srinagarind hospital. *J Med Assoc Thai* 2020;103 Suppl 1:36-9.
 8. Del Campo F, Arroyo CA, Zamarrón C, Álvarez D. Diagnosis of obstructive sleep apnea in patients with associated comorbidity. *Adv Exp Med Biol* 2022;1384:43-61.
 9. Højager A, Schoos MM, Tingsgaard PK, Bock TG, Homøe P. Prevalence of silent atrial fibrillation and cardiovascular disease in patients with obstructive sleep apnea. *Sleep Med* 2022;100:534-41.
 10. Sawunyavisuth B. What are predictors for a continuous positive airway pressure machine purchasing in obstructive sleep apnea patients? *Asia Pac J Sci Technol* 2018;23:APST-23-03-10.
 11. Sawunyavisuth B, Ngamjarus C, Sawanyawisuth K. A meta-analysis to identify factors associated with CPAP machine purchasing in patients with obstructive sleep apnea. *Biomed Rep* 2022;16:45.
 12. Pistol L, Bucea-Manea RȚ. The „7Ps”&”1G” that rule in the digital world the marketing mix. *Proc Int Conf Bus Excell.* 2017;11:759–69.
 13. Kaczorowska-Spychalska D. How chatbots influence marketing. *Management.* 2019;23:251–70.
 14. Wilson L, Marasoiu M. The Development and Use of Chatbots in Public Health: Scoping Review. *JMIR Hum Factors.* 2022;9:e35882.
 15. Schick A, Feine J, Morana S, Maedche A, Reininghaus U. Validity of Chatbot Use for Mental Health Assessment: Experimental Study. *JMIR Mhealth Uhealth.* 2022;10:e28082.
 16. Ludin N, Holt-Quick C, Hopkins S, Stasiak K, Hetrick S, Warren J, et al. A chatbot to support New Zealand young people during the COVID-19 pandemic: Evaluation of a real world roll out of an open trial. *J Med Internet Res.* 2022.
 17. Liu Y-L, Yan W, Hu B, Li Z, Lai YL. Effects of personalization and source expertise on users' health beliefs and usage intention toward health chatbots: Evidence from an online experiment. *Digit Health.* 2022;8:20552076221129720.
 18. Malter MS, Holbrook MB, Kahn BE, Parker JR, Lehmann DR. The past, present, and future of consumer research. *Mark Lett.* 2020;31:137–49.
 19. Kadariya D, Venkataramanan R, Yip HY, Kalra M, Thirunarayanan K, Sheth A. kBot: Knowledge-enabled Personalized Chatbot for Asthma Self-Management. *Proc Int Conf Smart Comput SMARTCOMP.* 2019;2019:138–43.
 20. Kowatsch T, Schachner T, Harperink S, Barata F, Dittler U, Xiao G, et al. Conversational Agents as Mediating Social Actors in Chronic Disease Management Involving Health Care Professionals, Patients, and Family Members: Multisite Single-Arm Feasibility Study. *J Med Internet Res.* 2021;23:e25060.
 21. Hanaysha JR. An examination of the factors affecting consumer's purchase decision in the Malaysian retail market. *PSU Research Review.* Emerald Publishing Limited; 2018;2:7–23.
 22. Sawunyavisuth B. What personal experiences of CPAP use affect CPAP adherence and duration of CPAP use in OSA patients? *J Med Assoc Thai.* 2018;101:S245–9.
 23. Sawunyavisuth B, Ngamjarus C, Sawanyawisuth K. Any Effective Intervention to Improve CPAP Adherence in Children with Obstructive Sleep Apnea: A Systematic Review. *Glob Pediatr Health.* 2021;8:2333794X211019884.
 24. Kaewkes C, Sawanyawisuth K, Sawunyavisuth B. Are symptoms of obstructive sleep apnoea related to good continuous positive airway pressure compliance? *ERJ Open Research.* 2020;6:1–4.
 25. Manasirisuk P, Chainirun N, Tiamkao S, Lertsinudom S, Phunikhom K, Sawunyavisuth B, et al. Efficacy of generic atorvastatin in a real-world setting. *Clin Pharmacol.* 2021;13:45–51.
 26. Jeerasuwannakul B, Sawunyavisuth B, Khamsai S, Sawanyawisuth K. Prevalence and risk factors of proteinuria in patients with type 2 diabetes mellitus. *Asia Pac J Sci Technol.* 2021;26:APST-26-04-02.
 27. Namwaing P, Ngamjarus C, Sakaew W, Sawunyavisuth B, Sawanyawisuth K, Khamsai S, et al. Chest Physical Therapy and Outcomes in Primary Spontaneous Pneumothorax: A Systematic Review. *J Med Assoc Thai.* 2021;104:S165–8.