

How the VA Rates Sleep Apnea (Secondary to PTSD, Weight Gain, or Meds)

Regulatory Source: 38 CFR § 4.97 – Diagnostic Code 6847

VA Source: <https://ecfr.gov>

Summary:

Sleep apnea can be rated as secondary to PTSD (via stress-induced weight gain), medications (sedatives), or anatomical changes. A sleep study is required for all VA ratings, and CPAP use typically results in a 50% rating.

VA Rating Table:

Rating	Explanation
0%	Sleep apnea diagnosed but without symptoms or functional impact. No CPAP required.
30%	Daytime hypersomnolence or poor sleep quality due to sleep apnea. CPAP not yet prescribed.
50%	Use of CPAP or other breathing assistance device. Most common rating after diagnosis confirmed via sleep study.
100%	Chronic respiratory failure with CO2 retention, cor pulmonale, or tracheostomy. Extremely rare and severe cases.

Required Evidence:

- Diagnosis of obstructive sleep apnea confirmed by sleep study
- Use of CPAP machine (documented in medical records)
- Medical link between weight gain/PTSD or medication use and OSA
- C&P; exam describing daytime fatigue or disrupted sleep
- Buddy statements or spouse observation of symptoms (e.g., snoring, apnea)

Pro Tip:

Even if you were not diagnosed in service, if your PTSD caused weight gain or you use sedatives, a strong nexus letter can win your secondary claim. Always get a sleep study before filing.