

INFORMATION FOR SLEEP APNOEA AND SNORING DISORDERS

WHAT IS SNORING?

The main cause of snoring is due to the partial closure of the airway during sleep. During sleep muscles in the neck relax and for some people the soft tissue in the upper throat vibrate, which makes the sound we know as snoring. Now you know about snoring do you know about Sleep Apnoea?

WHAT IS OBSTRUCTIVE SLEEP APNOEA?

Obstructive Sleep Apnoea (OSA) is a serious medical condition that is more widespread than initially thought. In the UK Obstructive Sleep Apnoea occurs on a similar frequency as Diabetes and double that of severe Asthma.

Obstructive Sleep Apnoea (OSA) occurs when a person stops breathing while asleep, which can be up to 50 to 60 times per hour. These breathing interruptions, know as 'Sleep Apnoea' occur when the airway narrows so much that it closes. If we compare Obstructive Sleep Apnoea to simple snoring, simple snoring is the vibration of the soft tissue in the throat caused by a partial closure of the airway, whereas OSA is caused by the complete closure of the airway.

The closure of the airway causes breathing to stop, which in turn reduces the oxygen level in the blood. The brain reacts to cause a partial waking. The snorer will often not be aware of this partial waking during the night. As a result of this sleep fragmentation, many sufferers have excessive daytime sleepiness, resulting in their inability to concentrate, experience marital disharmony and fall asleep at unexpected and inappropriate times. Obstructive Sleep Apnoea makes them at least twice as likely to have a motor accident if they are driving. However, this is not the worst news. Research has demonstrated that the repeated falls in oxygen levels in the blood caused by OSA are linked to the development of high blood pressure, heart disease, strokes and diabetes. The reality is that untreated OSA is a killer and needs to be taken seriously and there are many snorers who simply don't even know how serious their condition might be.

An OSA sufferer will snore loudly, their partner may tell them that they also stop breathing during sleep and both could find that proper sleep becomes impossible leading to sleepiness and other problems during the day.

SNORING TREATMENT

The four clinically proven options are Mandibular Advancement Splint therapy, Continuous Positive Airways Pressure, Weight loss and Surgery:

- **Mandibular Advancement Splints** (*generic name*)

Mandibular Advancement Splints (MAS) are customised mouth pieces made for each patient to be worn at night time to treat snoring and obstructive sleep apnoea. Modern devices permit the lower jaw to be advanced in a gradual manner and so not only improve their action but also help the patient to adapt more gradually to them. They are now nationally and internationally recognised in the management of obstructive sleep apnoea.

Such appliances can be made by Dr Johal.

Dr Johal is regarded as a National and International expert in the field of Mandibular Advancement Splints, having completed a PhD in the field.

He is an invited lecturer both nationally and internationally and has been awarded numerous research and clinical prizes for his work.

- **Continuous Positive Airway Pressure** (*CPAP products*)

CPAP is the gold standard for sufferers of **severe** obstructive sleep apnoea. There are many types of CPAP equipment and a number of CPAP products.

CPAP treatment is not recommended for the treatment of simple snoring.

- **Losing weight**

Loss of weight can reduce or stop snoring and there are numerous other health benefits but it is a gradual process.

- **Snoring Surgery**

Surgery can be used to treat snoring but is not always successful and can be extremely painful. It is not regarded as an option for the treatment of obstructive sleep apnoea.

For more information on the Management of Obstructive Sleep Apnoea visit
www.sign.ac.uk