Most of us don’t think of snoring as something to be overly concerned about unless our bed partner is disrupting our sleep!

But frequent, loud snoring may be a sign of sleep apnea, a common and potentially serious disorder in which breathing repeatedly stops and starts as you sleep.

Although sleep apnea is treatable, it often goes unrecognized. Untreated sleep apnea can be dangerous and detrimental to your health, so it’s important to see a doctor if you suspect that you or a loved one might have it. Read on to learn the warning signs of sleep apnea, how to distinguish it from normal snoring, the medical treatments available, and what you can do to help yourself.
WHAT IS SLEEP APNEA?

Sleep apnea affects the way you breathe when you’re sleeping. In untreated sleep apnea, breathing is briefly interrupted or becomes very shallow during sleep. These breathing pauses typically last between 10 to 20 seconds and can occur up to hundreds of times a night.

Untreated sleep apnea prevents you from getting a good night’s sleep. When breathing is paused, you’re jolted out of your natural sleep rhythm. As a consequence, you spend more time in light sleep and less time in the deep, restorative sleep you need to be energetic, mentally sharp, and productive the next day.

This chronic sleep deprivation results in daytime sleepiness, slow reflexes, poor concentration, and an increased risk of accidents. Sleep apnea can also lead to serious health problems over time, including diabetes, high blood pressure, heart disease, stroke, and weight gain. But with treatment, you can control the symptoms, get your sleep back on track, and start enjoying what it’s like to be refreshed and alert every day.
TYPES OF SLEEP APNEA

- **Obstructive sleep apnea** is the most common type of sleep apnea. It occurs when the soft tissue in the back of your throat relaxes during sleep, causing a blockage of the airway (as well as loud snoring).
- **Central sleep apnea** is a much less common type of sleep apnea that involves the central nervous system, rather than an airway obstruction. It occurs when the brain fails to signal the muscles that control breathing. People with central sleep apnea seldom snore.
- **Complex sleep apnea** is a combination of obstructive sleep apnea and central sleep apnea.

ANATOMY OF A SLEEP APNEA EPISODE

As air flow stops during a sleep apnea episode, the oxygen level in your blood drops. Your brain responds by briefly disturbing your sleep enough to kickstart breathing—which often resumes with a gasp or a choking sound. If you have obstructive sleep apnea, you probably won’t remember these awakenings. Most of the time, you’ll stir just enough to tighten your throat muscles and open your windpipe. In central sleep apnea, you may be conscious of your awakenings.
SLEEP APNEA SIGNS AND SYMPTOMS

It can be tough to identify sleep apnea on your own, since the most prominent symptoms only occur when you’re asleep. But you can get around this difficulty by asking a bed partner to observe your sleep habits or recording yourself during sleep.

**Major signs and symptoms of sleep apnea**

- Loud and chronic snoring
- Choking, snorting, or gasping during sleep
- Long pauses in breathing
- Daytime sleepiness, no matter how much time you spend in bed

**Other common signs and symptoms of sleep apnea include:**

- Waking up with a dry mouth or sore throat
- Morning headaches
- Restless or fitful sleep
- Insomnia or nighttime awakenings
- Going to the bathroom frequently during the night
- Waking up feeling out of breath
- Forgetfulness and difficulty concentrating
- Moodiness, irritability, or depression

**SEE A DOCTOR IF YOU SUSPECT SLEEP APNEA**

If you spot the warning signs of sleep apnea, see a doctor right away—preferably a sleep specialist. An official diagnosis of sleep apnea requires an overnight stay at a sleep clinic.
IS IT JUST SNORING OR IS IT SLEEP APNEA?

Not everyone who snores has sleep apnea, and not everyone who has sleep apnea snores. So how do you tell the difference between garden variety snoring and a more serious case of sleep apnea?

The biggest telltale sign is how you feel during the day. Normal snoring doesn’t interfere with the quality of your sleep as much as sleep apnea does, so you’re less likely to suffer from extreme fatigue and sleepiness during the day.

WHAT’S YOUR SNORE SCORE?

Your answers to this quiz will help you decide whether you may suffer from sleep apnea:

- Are you a loud and/or regular snorer?
- Have you ever been observed to gasp or stop breathing during sleep?
- Do you feel tired or groggy upon awakening, or do you awaken with a headache?
- Are you often tired or fatigued during the wake time hours?
- Do you fall asleep sitting, reading, watching TV or driving?
- Do you often have problems with memory or concentration?

If you have one or more of these symptoms you are at higher risk for having obstructive sleep apnea.
SLEEP APNEA CAUSES AND RISK FACTORS

Anyone can have sleep apnea—young, old, male, female, and even children can suffer. However, certain risk factors have been associated with obstructive and central sleep apnea.
RISK FACTORS FOR OBSTRUCTIVE SLEEP APNEA

You have a higher risk for obstructive sleep apnea if you are:
- overweight
- male
- over the age of 65
- black, Hispanic, or a Pacific Islander
- related to someone who has sleep apnea
- a smoker

Other risk factors for obstructive sleep apnea include certain physical attributes, such as having a thick neck, deviated septum, receding chin, or enlarged tonsils or adenoids. Allergies or other medical conditions that cause to nasal congestion and blockage can also contribute to sleep apnea.

RISK FACTORS FOR CENTRAL SLEEP APNEA

Like obstructive sleep apnea, central sleep apnea is more common in males and people over the age of 65. However, unlike obstructive sleep apnea, central sleep apnea is often associated with serious illness, such as heart disease, stroke, neurological disease, or spinal or brainstem injury.

SELF-HELP TREATMENT FOR SLEEP APNEA

While a diagnosis of sleep apnea can be scary, it is a treatable condition. In fact, there are many things you can do on your own to help, particularly for mild to moderate sleep apnea. Home remedies and lifestyle modifications can go a long way in reducing sleep apnea symptoms.

Lifestyle changes that can help sleep apnea

- **Lose weight.** Even a small amount of weight loss can open up your throat and improve sleep apnea symptoms.
- **Quit smoking.** Smoking is believed to contribute to sleep apnea by increasing inflammation and fluid retention in your throat and upper airway.
- **Avoid alcohol, sleeping pills, and sedatives,** especially before bedtime, because they relax the muscles in the throat and interfere with breathing.
- **Avoid caffeine and heavy meals** within two hours of going to bed.
- **Maintain regular sleep hours.** Sticking to a steady sleep schedule will help you relax and sleep better. Apnea episodes decrease when you get plenty of sleep.
Bedtime tips for preventing sleep apnea

- **Sleep on your side.** Avoid sleeping on your back, as gravity makes it more likely for your tongue and soft tissues to drop and obstruct your airway.
- **Try the tennis ball trick.** In order to keep yourself from rolling onto your back while you sleep, sew a tennis ball into a pocket on the back of your pajama top. Or wedge a pillow stuffed with tennis balls behind your back.
- **Prop your head up.** Elevate the head of your bed by 4 to 6 inches or elevate your body from the waist up by using a foam wedge. You can also use a special cervical pillow.
- **Open your nasal passages.** Try to keep your nasal passages open at night using nasal dilators, saline spray, breathing strips, or a neti pot.

Throat exercises to reduce sleep apnea

Studies show that throat exercises may reduce the severity of sleep apnea by strengthening the muscles in airway, making them less likely to collapse.

- Press tongue flat against the floor of mouth and brush top and sides with toothbrush. Repeat brushing movement 5 times, 3 times a day.
- Press length of tongue to roof of mouth and hold for 3 minutes a day.
- Place finger into one side of mouth. Hold finger against cheek while pulling cheek muscle in at same time. Repeat 10 times then rest and alternate sides. Repeat sequence 3 times.
- Purse lips as if to kiss. Hold lips tightly together and move them up and to the right the up and to the left 10 times. Repeat sequence 3 times.
- Place lips on a balloon. Take a deep breath through your nose then blow out through your mouth to inflate balloon as much as possible. Repeat 5 times without removing balloon from mouth.

Medical treatment for sleep apnea

If your sleep apnea is moderate to severe, or you’ve tried self-help strategies and lifestyle changes without success, it’s important to see a sleep doctor. A sleep specialist can evaluate your symptoms and help you find an effective treatment.

Treatment for sleep apnea has come a long way in recent times, so take some time to explore the new options. Even if you were unhappy with sleep apnea treatment in the past, chances are you can find something that works and feels comfortable to you.
Continuous Positive Airflow Pressure (CPAP) for sleep apnea

Continuous Positive Airflow Pressure, or CPAP for short, is the gold standard treatment for moderate to severe obstructive sleep apnea. In many cases, you’ll experience immediate symptom relief and a huge boost in your mental and physical energy. The CPAP device is a mask-like machine that provides a constant stream of air which keeps your breathing passages open while you sleep. Most CPAP devices are the size of a tissue box.

If you’ve given up on sleep apnea machines in the past because of discomfort, you owe it to yourself to give them a second look. CPAP technology is constantly being updated and improved. The new CPAP devices are lighter, quieter, and more comfortable, so make sure your sleep apnea device is up to date.

CPAP tips and troubleshooting

Having trouble with your new sleep apnea device? It can take some time to get accustomed to sleeping while wearing a CPAP device. It’s natural to miss sleeping the “old way,” but there are things you can to do make the adjustment easier.

- **Make sure your CPAP device fits correctly.** A correct fit makes a huge difference. Make sure the straps are not too tight or too loose and that the mask seals completely over your nose and mouth. Schedule regular appointments with your doctor to check the fit and evaluate your treatment progress.
- **Ease into it.** Start by using your CPAP device for short periods during the day. Use the “ramp” setting to gradually increase air pressure. It’s normal to need several months to get used to sleeping this way.
- **Upgrade your CPAP device with customized options.** Customize the mask, tubing and straps to find the right fit. Ask your doctor about soft pads to reduce skin irritation, nasal pillows for nose discomfort, and chin-straps to keep your mouth closed and reduce throat irritation.

- **Use a humidifier** to decrease dryness and skin irritation. Try a special face moisturizer for dry skin. Many CPAP devices now come with a built-in humidifier.

- **Try a saline nasal spray** or a nasal decongestant for nasal congestion.

- **Keep your mask, tubing and headgear clean.** To ensure maximum comfort and benefit, replace CPAP and humidifier filters regularly and keep the unit clean.

- **Mask the sound of the CPAP machine.** If the sound of the CPAP machine bothers you, place it beneath the bed reduce the noise. You can also try using a sound machine or white noise machine help you sleep.

**Dental devices for sleep apnea**

If you’ve tried CPAP and self-help tips and your sleep apnea persist, you may benefit from a dental device or surgical treatment.

Most dental devices are acrylic and fit inside your mouth, much like an athletic mouth guard. Others fit around your head and chin to adjust the position of your lower jaw. Two common oral devices are the **mandibular repositioning device** and the **tongue retaining device**. These devices open your airway by bringing your lower jaw or your tongue forward during sleep.

Dental devices are only effective for mild to moderate sleep apnea. There are also a number of troubling side effects from using this type of treatment, including soreness, saliva build-up, nausea, and damage or permanent change in position of the jaw, teeth, and mouth.

It is very important to get fitted by a dentist specializing in sleep apnea, and to see the dentist on a regular basis for any dental problems that may occur.
Surgery as treatment for sleep apnea

If you have exhausted other apnea treatment options, you may want to discuss surgical options with your doctor or sleep specialist. Surgery can increase the size of your airway, thus reducing your episodes of sleep apnea.

The surgeon may remove tonsils, adenoids, or excess tissue at the back of the throat or inside the nose. Or, the surgeon may reconstruct the jaw to enlarge the upper airway. Surgery carries risks of complications and infections, and in some rare cases, symptoms can become worse after surgery.

GIVE US A CALL AT BEL-RED SLEEP DIAGNOSTIC CENTER WE CAN HELP!

(425) 451-8417