



Sleep Apnea

Sleep apnea is a common disorder that often goes undiagnosed. It is characterized by repeated pauses in breathing or shallow breaths while you sleep. An apnea, which is the period of time when breathing stops or is reduced, can occur anywhere from a few seconds to minutes. After a pause, normal breathing starts again, usually with a snort or choking sounds. Sleep apnea is an ongoing (or chronic) disease that disrupts your sleep three or more times per week.

Why does sleep apnea occur?

There are three types of sleep apnea: central sleep apnea (CSA), obstructive sleep apnea (OSA) and a combination of CSA and OSA called mixed sleep apnea. The most common form of sleep apnea is obstructive sleep apnea (OSA). If you have OSA, there is a block in the airflow (called an obstruction) that can be caused by a collapse of the muscles in back of the throat. For people with CSA, the brain does not send a signal to the muscles to take a breath during sleep, as most people's do.

What are the symptoms of sleep apnea?

The most common signs and symptoms include:

- Excessive daytime sleepiness
- Fatigue
- Loud snoring
- Breathing pauses and gasping during sleep
- Sudden awakenings followed by a shortness of breath
- Waking up with a dry mouth or sore throat
- Morning headaches
- Difficulty concentrating

Usually, the awakenings are so brief that you don't even remember them, so you might not even realize your sleep is disrupted unless you are sleeping with someone who notices.

Who gets sleep apnea?

More than 12 million adults in the United States have sleep apnea. Although sleep apnea can occur in anyone, it is more common in men and older people. Risk factors include: being overweight, smoking, alcohol, sedative and tranquilizer use, high blood pressure, large tonsils and tongue in comparison to throat size and neck circumference.

How is sleep apnea diagnosed?

Your health care provider will diagnose sleep apnea based on medical history, physical exams and sleep studies. To understand your sleeping patterns, your health care provider will often ask family members to report abnormal gasping and snoring while sleeping. Your health care provider will check your throat, nose and mouth for large tissues. A sleep study, during which sleep activities are recorded for several hours, is the most accurate test for sleep apnea, and it may require an overnight stay.

How is sleep apnea treated?

Sleep apnea can be treated to restore normal breathing and relieve symptoms. Treatment will depend on how severe the symptoms are. Mild sleep apnea treatments include lifestyle changes such as weight-loss, quitting smoking, avoiding alcohol and sleeping on your side. Oral appliances that hold the jaw and tongue forward can be helpful for treating mild sleep apnea in people who are not overweight.

The most common treatment for moderate to severe OSA is using a continuous positive airway pressure (CPAP) machine. The CPAP delivers a stream of compressed air through a mask that is worn while you sleep. The compressed air helps keep the airway open. In severe cases, surgery on the specific area that causes the obstruction might be the most effective treatment.