



Patient Information



Waking Up With Sleep Apnea

Sleep apnea (AP-ne-ah) is a disorder that pauses your breathing during sleep. You may experience shallow breaths or breathing pauses that last from a few seconds to minutes. Sleep apnea causes you to move out of deep sleep and into light sleep, disrupting your sleep pattern and causing you to become tired during the day.

The 2 kinds of sleep apnea are called obstructive and central. Obstructive sleep apnea is the most common and occurs because the airway has collapsed or is blocked. It is particularly more common in people who are overweight, but it can affect anyone. The muscles in the back of your throat relax, causing your airways to narrow and close, ultimately stopping breathing momentarily. The brain is alerted that the oxygen level in the blood is low, and you are awakened briefly.

Central sleep apnea, although less common, occurs when the area of your brain that controls breathing does not send signals to the breathing muscles. This results in brief periods with no breathing. One of the most common causes of central sleep apnea is heart disease.

How do I know if I'm at risk?

Anyone, young or old, men or women, can experience sleep apnea. Although it is more common in adults, with 1 in 10 people older than 65 years affected, it is possible for children to develop the disorder. However, certain risk factors may cause you to become more prone to developing the disorder.

Obstructive sleep apnea is more common in those who are overweight, have high blood pressure, and/or have a family history of the disorder. Using alcohol, sedatives, or tranquilizers relaxes the muscles in your throat and, thus, should be avoided.

Central sleep apnea is more common in men and people older than 65 years of age, especially if they have other risk factors. Heart disorders, such as atrial fibrillation or congestive heart failure, also put you at a higher risk of central sleep apnea.

What are the warning signs?

Most people who have sleep apnea aren't aware they have it, because it occurs during sleep; however, a bed partner may notice the signs. The most common warning sign is loud snoring. Awakening with a dry mouth or sore throat, chronic morning headaches, or shortness of breath are also warning signs of sleep apnea.

If your snoring is loud enough to disturb the sleep of others, or yourself, it is important to contact your doctor. Excessive daytime drowsiness, sometimes causing you to fall asleep during your daily activities, is also a warning sign that professional assistance is needed.

Fighting drowsiness during the day, at work, or while driving, is a common sign of sleep apnea. The lack of sleep can also make you feel irritable or depressed, or cause you to have mood swings.

What tests do I need?

In order to diagnose sleep apnea, doctors will look at your medical and family history,



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perform a physical exam, and order a sleep study. After your doctor evaluates your symptoms, he or she will determine if you need to see a sleep specialist.

A physical examination may show what is causing the sleep apnea. However, a sleep study may be necessary for diagnosis. A polysomnogram (poly-SOM-nogram), or PSG, is a test that your doctor may recommend. A PSG examines your breathing patterns during sleep with a home-based portable monitor. It records brain activity, eye and other muscle activity, amount of oxygen in the blood, and how much air moves in and out of your lungs during sleep.

The process is painless, and you should sleep as usual, except you will have sensors on your scalp, face, chest, limbs, and fingers to monitor the activity in your body.

How can I avoid the problem?

Sleeping on your side, rather than on your back, can help prevent the symptoms of sleep apnea. It is also important to stay away from stimulants, such as alcohol, when bedtime is approaching. Stimulants relax the muscles and will worsen the unwanted effects of sleep apnea.

Because obesity can cause complications with sleep apnea, living a healthy lifestyle is important. The excess soft fat tissue thickens the walls of the windpipe and causes the inside opening to become narrow, making it harder to keep open.

A mouth piece, or an oral appliance, may also help you breathe better while sleeping. A dentist or orthodontist can customize a plastic mouthpiece that will lower your jaw and tongue, keeping airways open.

How is it treated?

Lifestyle changes, such as losing weight or smoking cessation, may be recommended for milder cases of sleep apnea. It is also recommended that you avoid sleeping on your back. This may cause your tongue and soft palate to block your airway. Using a saline nasal spray will keep your nasal passages open, allowing more oxygen to reach your lungs and preventing snoring. However, this is only recommended for short-term use.

If these changes do not improve your signs and symptoms, your case may be more severe. Other treatments, such as therapy or, in some cases, surgery, may be necessary.

Continuous positive airway pressure, or CPAP, is one of the most beneficial therapies for sleep apnea. A machine administers air pressure through a mask that is placed over your nose during sleeping hours. The pressure of the air is slightly more intense than normal breathing, but it is the right amount to keep your airway passages open to prevent sleep apnea or snoring.

For more information on sleep apnea, visit the American Sleep Apnea Association's Web site at <http://www.sleepapnea.org/> ●

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