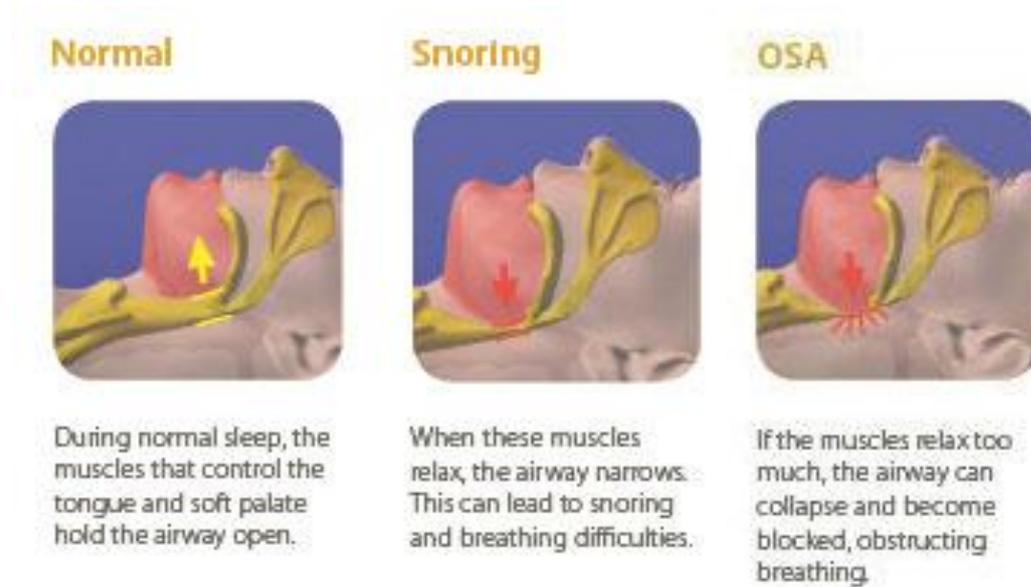


SNORING AND OBSTRUCTIVE SLEEP APNOEA

Snoring can disrupt a good night's sleep but can also be a sign of a more serious problem, obstructive sleep apnoea (OSA).

When we are asleep the pharyngeal muscles (muscles at the back of the throat) lose their tone and relax. This causes a partial or complete blockage of the airway.



It is important to make a distinction between heavy snoring and OSA, as the health effects of OSA can be significant. It's also important to recognise the symptoms of OSA. Some people don't realise they have OSA or just assume that the noise from snoring is the only problem.

Patients with moderate to severe OSA are more likely to have high blood pressure, cardiac disease, strokes and depression.



Signs of Obstructive Sleep Apnoea

- Witnessed apnoeas (episodes of breathing stopping) by bed partner
- Awakening with choking sensation
- Vivid or strange dreams
- Waking feeling unrefreshed
- Daytime sleepiness
- Lack of concentration when working or driving
- Changes in mood and lack of motivation

Health Problems Associated With OSA

- High blood pressure
- Cardiac arrhythmias (irregular heart beat)
- Cerebrovascular disease (higher risk of strokes)
- Kidney disease
- Type 2 diabetes
- Depression

Snoring and mild to moderate OSA can be successfully managed with a mandibular advancement splint (MAS) by Somnomed.

This appliance holds the lower jaw forward during sleep thus keeping the airway open. Moderate to severe OSA needs careful management as MAS becomes less effective at improving air flow as the degree of OSA increases.

OSA is measured as the number of episodes per hour of complete breathing cessation (apnoea) or partial breathing reduction (hypopnoea) both of which result in arousal during sleep.



The Apnoea/Hypopnoea Index (AHI) and OSA

- Normal = less than 5 per hour
- Mild OSA = 5-15 per hour
- Moderate OSA = 15-30 per hour
- Severe OSA = over 30 per hour

The difference between heavy snoring and OSA, or the severity of the OSA, can be detected via a sleep study. If you haven't yet had a sleep study done, we can easily refer you for one. We can then assess the results and decide on a course of action from there.

If you have already had one done or have a referral from a sleep physician, please bring it with you at the consultation appointment.

If you think you might benefit from treatment with a Somnodent MAS, please contact us **((07) 3870 7617)** for further information and to make an appointment.