



Community Health Connections

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Fact Sheet

Sleep Apnea

What Is Sleep Apnea? Sleep apnea (AP-ne-ah) is a common sleep disrupting disorder in which there are pauses in breathing or very shallow breathing during sleep. The pauses can last from a few seconds to minutes. They often occur 5-30 times or more per hour. Normal breathing then starts again, frequently with a snort or choking sound. When this occurs, the oxygen level in the blood goes down.

Often the person moves out of deep sleep and into light sleep when breathing pauses or becomes shallow. Obstructive sleep apnea (OSA) is the most common type. Central sleep apnea is less commonly seen. Sleep apnea means that the airway collapses or is blocked during sleep. The blockage causes shallow breathing or breathing pauses. This results in poor sleep quality and the person is tired during the day. It is important to know that untreated sleep apnea can have very serious health consequences.

Warning signs of Sleep Apnea In OSA the chest walls and abdomen continue to move but breathing does not occur due to collapsed airway. In Central Sleep Apnea abdomen and chest movement is not seen but breathing does not occur. Some warning signs include morning headaches, memory and/or learning difficulty, irritability, personality changes, dry throat when awakening, nighttime urinations, and difficulty concentrating.

Effects of Sleep Apnea are serious The effects of sleep apnea are very serious. According to the National Institute of Health, untreated sleep apnea can increase the risk of heart failure, high blood pressure, heart attack, stroke, obesity, diabetes, and arrhythmias (irregular heartbeats). Beyond increasing the risk for heart failure, if a person already has heart failure, sleep apnea can make it worse. Heart failure is a condition in which the heart can't pump enough blood to meet the body's needs. Another concern is that research is showing that there is a connection between sleep apnea and problematic seizure control. Many people do not realize they have sleep apnea but it can have devastating effects. According to the National Commission on Sleep Disorders Research, approximately 38,000 deaths occur on an annual basis that relate to cardiovascular problems that in one way or another are connected to sleep apnea.

Diagnosis of Sleep Apnea When doctors suspect someone might have sleep apnea they send them for a sleep study. Sleep studies measure how much and how well you sleep. They also help show whether you have breathing problems during sleep and how severe they are. They can be done in the hospital or an outpatient facility where the person spends the night. The **STOP/BANG** Questionnaire gives the physician information that helps them decide if the person might benefit from a sleep study.

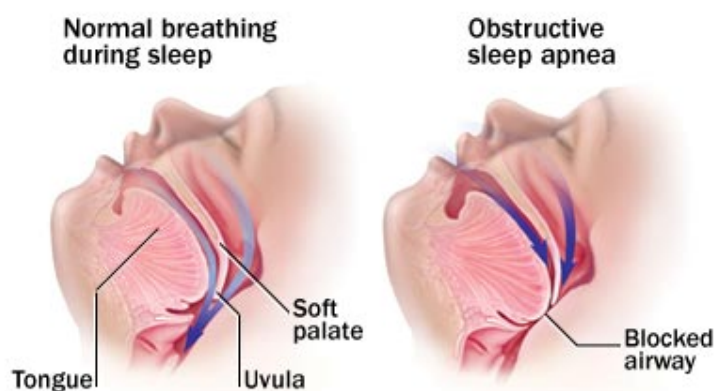
S=snore (does the person snore loudly)
T=tired (how often tired or sleepy in daytime)
O=observed (has anyone observed breathing stopping during sleep)
P=pressure (high blood pressure)

B=BMI (over 35—relates to being overweight)
A=age (over 50 years old)
N=neck (circumference greater than 16 inches for women and 17 inches for men)
G=gender (male or female)

If you know or provide care for someone who exhibits some of the concerns listed above (especially cessation of breathing during sleep) it is important to report what is noted to the physician.

Treatment of Sleep Apnea Lifestyle changes, mouthpieces, breathing devices, and surgery are used to treat sleep apnea. Examples are losing weight, sleeping on the side rather than back, as well as breathing devices like C-PAPs and surgery. It is not just a matter of treating the disorder—but also monitoring for other problems associated with it.

Sleep apnea is prevalent in as many as an estimated 18 million Americans alone. It is thought to occur in at least 40% of children and adults with Down syndrome causing problems such as failure to thrive, cognitive decline, high blood pressure, heart disease, and accident due to day sleepiness.



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