



Snoring and Sleep Apnea

Snoring is no laughing matter-as any snorer or snorer's mate will tell you. According to the American Academy of Otolaryngology-Head and Neck Surgery, the national society of doctors who treat ear, nose, throat and related areas of the head and neck, snoring can be disruptive, annoying, and in some cases, a symptom of a more serious illness. Forty-five percent of adults snore at least occasionally, and of these, 25 percent are habitual snorers. Males and overweight people are more likely to snore, and the problem usually worsens with age.

Snoring occurs when there is an obstruction to the free flow of air through the passages at the back of the mouth or nose. This can be caused by:

- Poor muscle tone in the tongue and throat.
- Excessive bulk in the throat and neck tissues - large tonsils and an adenoids can cause this.
- Excessive length of the soft palate and uvula.
- Obstructed nasal airways (often caused by colds, allergies, sinus infections, or deformities of the nose and nasal septum.)

The most serious form of snoring is known as obstructive sleep apnea, that is, loud snoring interrupted by frequent periods when all airflow stops. A snorer should be suspected of having sleep apnea if:

- There is a disrupted breathing pattern, with frequent pauses in breathing, and apparent breath holding. This is serious if these episodes last over 10 seconds each and occur more than seven times per hour
- Sleep is fragmented and inefficient.
- There is no dreaming.
- The snorer suffers from fatigue and daytime sleepiness, not relieved by extending sleep hours.
- The snorer has a collar size over 18 inches.

For mild or occasional snorers, try the following self-help remedies:

- Exercise daily.
- Avoid alcohol tranquilizers, sleeping pills, and antihistamines before bedtime.
- Avoid sleeping on the back . . . sew a pocket on the pajamas back to hold a tennis ball.
- Tilt the head of the bed upwards.
- Allow the non-snoring roommate to get to sleep first.

When snoring becomes disruptive to the life of the snorer or family, medical advice should be sought. Sometimes treatment is as simple as managing a nasal allergy or infection, taking out tonsils or correcting a nasal deformity. If a sleep apnea problem is suspected, your physician may recommend a laboratory sleep study and/or surgery to tighten up flabby tissues in the throat or palate. There are medical devices which are worn during sleep to reverse the obstruction and restore rest full sleep.

If the snoring is determined not to be a threat to your health, there are simple office procedures which can be performed to quiet the noise. These are done under local anesthesia in the doctor's office, similar in scope to a dental procedure. These treatments are not covered by standard medical insurance, but are often a good investment for a peaceful night's sleep.