



Help Me, Doctor— My Husband's Snoring Is Ruining Our Marriage!

Does this sentiment sound familiar? If so, you're not alone. About 12 million Americans suffer from a condition called sleep apnea, which literally means that they stop breathing for short periods while they are asleep. These episodes of apnea may last as long as 1 minute and may occur several hundred times during the night. While not all people who snore have sleep apnea, many of them do. Since it is a treatable condition, if you or a loved one snores, it may be worth it to investigate further.

What causes sleep apnea?

Sleep apnea occurs when a person's upper airway structures—primarily the soft palate and the back of the tongue—collapse while the person is sleeping, blocking the passage of air into the throat. During the day muscles hold these structures open. But at night, when a person goes to sleep, those muscles relax, allowing the structures to close. When the body senses that it's not getting enough air, it signals the person to wake up, which helps reopen the airway. This process may repeat many times throughout the night. Because of these repeated awakenings, the person never enters the deepest stages of sleep, and may be very tired during the day.

What are sleep apnea's symptoms?

Patients with sleep apnea usually report daytime sleepiness, unrefreshing sleep, loud snoring, or a history of gasping while asleep. Other symptoms include high blood pressure, morning headaches, and depression.

What problems are associated with sleep apnea?

Sleep apnea causes daytime fatigue, which may harm a person's work performance and lead to car accidents. Sleep apnea has also been shown to contribute to a variety of serious medical problems, such as high blood pressure, heart disease, and stroke.

What are the risk factors for sleep apnea?

There are several risk factors for sleep apnea. Being overweight or obese is the most important risk factor, because as excess fat is stored around the upper airway structures, they are more likely to collapse during sleep. People over 40 are also at increased risk, for a similar reason, because as we age, muscle mass in our neck is replaced with fat.

One study found that people with sleep apnea are 7 times more likely to be in a car accident than people without sleep apnea.

Drinking alcohol or using other sedative drugs can also contribute to sleep apnea. Cigarette smoking can irritate the airway, leading to obstruction. Other sleep apnea risk factors include low thyroid, nasal congestion, and family history. Sleep apnea occurs in both women and men, but men are about twice as likely to be afflicted.

How can sleep apnea be treated?

People with sleep apnea can improve their symptoms by losing weight, avoiding alcohol and other sedatives, and sleeping on their sides instead of their backs. Sometimes, however, making these behavioral changes may not be enough to eliminate the sleep apnea. In those cases, a different treatment may be appropriate.

What other therapies are available?

One of the most effective treatments for sleep apnea is continuous positive airway pressure, or "CPAP." To use CPAP, a person wears a mask over his nose and mouth while sleeping. The mask is connected to a machine that blows a stream of air into the person's throat as he sleeps, keeping the upper airway from collapsing. Studies consistently show that patients with sleep apnea who are treated with CPAP are more alert during the day, have improved emotional well being, and have better health outcomes.



Sleeping soundly
with CPAP.

What are the side effects of CPAP?

CPAP's most common side effects are nasal congestion, dryness, or runny nose. Some patients may also report skin irritation from the mask, but this is unusual. Serious complications are extremely rare.

How much does CPAP cost?

CPAP machines typically cost about \$1,000. They weigh approximately 5 lbs, fit easily on a bedside stand, and run on household current. Whether CPAP is covered by insurance depends on your insurance plan.

How does CPAP affect patients' bed partners?

Because many patients with sleep apnea snore and/or sleep restlessly, they often disturb their bed partners' sleep. According to the results of one study, the bed partners of patients who used CPAP slept better and had improved emotional well being after their partners started using CPAP.

Are there any other therapies for sleep apnea besides CPAP?

CPAP is considered the first-line therapy for sleep apnea. Special mouthpieces are also available that hold patients' mouths partially open as they sleep, preventing their airways from collapsing. These mouthpieces are usually not as effective as CPAP, but may be appropriate for patients with mild disease. Patients with very severe sleep apnea may benefit from surgery, but this is usually a last resort.

I think I may know someone who has sleep apnea. What should I do?

If you suspect that you or someone you love suffers from sleep apnea, speak with your physician. He or she can evaluate the symptoms and may recommend a sleep study to confirm the diagnosis and help select an appropriate therapy.

For more information on sleep apnea, visit the American Sleep Apnea Association web page at <http://www.sleepapnea.org>.