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The Disruptive Consequences of Sleep Apnea



A lot of us know how sleep quality affects both mental and physical health. It enables our body and brain to recover during the night and ensures the physical well-being of many complex systems in the body including our heart, growth, etc. Yet we often sacrifice sleep for work or enjoyment.

Over the last couple of decades, the universal importance of sleep has been accepted, but sleep-associated medical conditions are on the rise – especially a condition called Obstructive Sleep Apnea (OSA).

We often encounter people who snore, and rarely realise this is one of the most common signs of OSA, a potentially debilitating and occasionally fatal condition.

So how big of a problem is it? A recently published¹ medical research suggested that the prevalence in the Indian population is 32.5%. This means, nearly 1 in 3 Indians suffers from sleep apnea.

What is sleep apnea?

Sleep apnea is a condition that occurs when we get frequent obstruction in our upper breathing passage, (> 5 times/hour) giving rise to episodes of choking, lack of oxygen, breaks in our sleep, daytime tiredness, and often a variety of more sinister conditions.

Am I more prone to getting sleep apnea?

Sleep apnea can happen to anyone, ranging from infants and children to older adults. Obstructive sleep apnea is more common in certain circumstances and groups of people:

- Males up to the age of 50
- After 50 in both sexes (due to poor muscle tone causing the airway to collapse)
- Overweight or obese patients (in all age groups)
- Children - with large tonsil and adenoid glands
- Patients with severe allergies and nose blocks

When should we suspect sleep apnea and see a specialist?

As this problem occurs while sleeping, it is often the partner who notices a problem. The first is snoring.

Snoring occurs due to the turbulent flow of air through a narrowed breathing passage and should never be ignored. There are some other red flags that we should pay attention to

- If you notice pauses in the breathing pattern
- Choking or gasping episodes while sleeping
- Poor quality of sleep
- Daytime tiredness or sleepiness



Are children also prone to OSA and what are the symptoms?

Sleep apnea in children can happen in slightly different ways

- Hyperactivity or trouble focusing (often similar to symptoms of ADHD)
- Snoring
- Bedwetting
- Sleep with neck extended or restless sleep movements



What are the risks of sleep apnea?

Although snoring is a social problem, sleep apnea can give rise to a variety of medical complications. In fact many times, it is these medical complications that first bring the condition to our notice.

1. Daytime fatigue and sleepiness - patients may fall asleep at work, or even when driving. This can put them at higher risk of work-related accidents
2. Children – may do poorly at school, behavioural changes, and face the inability to adjust
3. Cardiac problems - greater risk of coronary artery disease, heart attack, heart failure, and stroke
4. Sudden cardiac death
5. Increased chances of diabetes

Are there any tests we should do?

There are two types of tests required to assess patients with suspected sleep apnea:

1. Sleep study (polysomnography): This is a simple test that monitors various parameters of our body function while we sleep (e.g. heart rate, respiration, muscle and brain function, etc.). This helps us diagnose if one has sleep apnea, and if so, then its severity too. This can be done in various ways at home or in a hospital sleep lab
2. Evaluation of airway: Usually an ENT specialist will use some instruments to assess the upper airway (nose, oral cavity, and throat) to identify the location of obstruction

Are there any lifestyle changes that can help?

- Obesity is a significant risk factor for OSA, so modifying lifestyle can often be helpful
 - Limiting alcohol
 - Quitting smoking
 - Managing weight – exercise and low-carb diet
- Sleep position: sleeping on the side (or even on the stomach) can decrease the collapse of loose tissues into the airway – and this can decrease the severity of sleep apnea

How is it treated?

The method of treatment depends on

- Severity of the problem
- Location of the obstruction
- Demographics of the patient

1. CPAP machine: This device keeps the airway open by gently providing a constant stream of positive pressure air through a mask. This treatment is preferred in older patients, and patients with multiple areas of tissue collapse
2. Surgery:
 - Surgery for static obstruction
 - Often, architectural blocks e.g. deviated nasal septum, or very bulky tonsils may be the cause of a static obstruction – such patients respond very well to corrective surgeries
 - Surgery for dynamic obstruction
 - Bulky muscles in certain parts of the throat may be collapsing into the airway, and customised surgeries to pull the loose tissues out of the air passage can be helpful.
 - These procedures are often preferred in patients not responding to or tolerating the use of CPAP machines
3. Treatment of underlying problems
 - Treating allergies is very helpful in removing nasal obstruction

To conclude, sleep apnea is a silent and often non-silent killer. We notice snoring and other hints that might suggest that there is a sleep disturbance. Many times, the solutions are simple – we just have to pay attention to the problem.

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