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Obstructive Sleep Apnea: The Disease That Hurts You While You Sleep

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What is Sleep Apnea? Sleep apnea is a sleep-breathing disorder that affects roughly twelve million Americans each year. However, this medical condition often goes undiagnosed, and thus untreated. Many adults have undiagnosed sleep apnea and, due to the health-related problems associated with untreated sleep apnea, medical providers now have it on their radar and are doing more to screen their patients.

There are three subtypes of sleep apnea: obstructive sleep apnea (OSA), central sleep apnea (CSA), and mixed (CSA and OSA). OSA is the most common subtype of sleep apnea, and the easiest to treat. OSA is caused by complete or partial obstruction of the upper airway and is characterized by recurring episodes of shallow or paused breathing during sleep (usually lasting 20-40 seconds), despite the effort to breathe.

In OSA, the muscles in the back of the throat relax causing the airway to narrow or close as one inhales, making it difficulty to get adequate oxygen. The brain senses this inability to breathe and briefly rouses you from



sleep to reopen the airway, which is usually a very brief awakening. Individuals often make a snorting, choking or gasping sound.

This pattern can repeat itself throughout the course of the night. These disruptions leave those untreated feeling sleepy during waking hours and with other complaints outlined below. People with obstructive sleep apnea are not always aware that their sleep was interrupted and some people with OSA think that they sleep quite well. Depending on the severity of the condition, which can vary from mild to severe, treatment can vary from making simple positional adjustments to requiring positive airway pressure or, in some cases, surgery.

In the case of CSA, there is a problem with the brain's respiratory control centers, which fail to give the signal to inhale, causing the individual to miss one or more cycles of breathing. Mixed CSA and OSA is a combination of both disorders. As these conditions are less common, they are not the focus of this article.

Associated Health Problems

Obstructive sleep apnea is associated with other health problems including insomnia, (continued on page 2)

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high blood pressure, heart disease, stroke, and diabetes. Untreated sleep apnea can be fatal.

Signs and Symptoms

- Loud snoring
- Episodes of breathing cessation during sleep witnessed by another person
- Abrupt awakenings accompanied by shortness of breath
- Awakening with a dry mouth or sore throat
- Morning headache
- Difficulty staying asleep (insomnia)
- Excessive daytime sleepiness (hypersomnia)
- Attention problems
- Irritability, depression

Who is at Risk?

Those at risk for developing OSA include people who smoke tobacco or drink alcohol and men who are overweight or obese and have a large neck size (>16 inches). However, due to the increased prevalence of OSA, individuals who do not fit this profile are being more frequently diagnosed with the disorder. Having a family member who has OSA is also a risk factor, as OSA often runs in families.

How is it Diagnosed?

OSA is diagnosed from a polysomnography, also known as a "sleep study." If your primary care doctor suspects you have OSA, you will be referred for a sleep study at a sleep disorder center or your local hospital. During the sleep study, you will be hooked up to monitoring equipment that assesses your heart, lung and brain activity, breathing patterns, arm and leg movements, and blood oxygen levels while you sleep.

These tests can be performed in a sleep lab or you may be given a portable device to use at home while you sleep. If you have sleep apnea, the test results will show drops in your oxygen level during apneas and subsequent rises with awakenings.

How is it Treated?

There are many effective treatments for obstructive sleep apnea, which vary depending on the severity of the disorder. Lifestyle changes such as quitting smoking or losing weight can often resolve a mild case of sleep apnea. Other forms of treatment such as positional adjustments (e.g., sleeping on your side or using an extra pillow) can also be effective.

For moderate to severe cases of obstructive sleep apnea, Positive Airway Pressure (PAP) devices are an effective treatment. This device includes a mask that you wear on your face that delivers air into your nose and mouth at the unique pressure you require while you sleep.

Self-Screening Test for OSA

- Do you snore loudly?
- Do you often feel tired, fatigued or sleepy during the daytime?
- Has anyone observed that you stop breathing or choke/gasp during your sleep?
- Do you have high blood pressure?

If you answered "yes" to two or more of these questions, you are considered to be at risk for obstructive sleep apnea and should talk with your doctor about a referral to a sleep disorder specialist.

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