

SLEEP APNEA

Apnea means to quit breathing. Obstructive sleep apnea occurs when you quit breathing during sleep because your airway closes/obstructs. When you are awake, you are able to breathe – your airway is open and air flows freely into and out of your lungs. With sleep apnea, as you drift off to sleep, the tone in the muscles that keep your airway open decreases, allowing your airway to narrow and eventually close. Your brain continues to send signals to your lungs telling them to take a breath, but air cannot flow into the lungs because your airway is closed/obstructed.

Eventually your brain realizes that you are not breathing, because your airway is closed, and sends a signal to wake you up. The muscle tone of your airway increases, the airway opens, and air flows to your lungs. Return of airflow is often associated with loud snoring and a change in body position. You wake up but are usually not aware that you have awakened and almost immediately return to sleep.

You cycle through these sleep-wake episodes multiple times throughout the night and as a result, you do not experience deep stages of restful sleep. You may notice that when you wake up in the morning that you are just as tired as when you went to sleep. Other common complaints include:

- Difficulty waking up in the morning
- Dry mouth in the morning on awakening
- Morning headaches
- Falling asleep during the day at work or while driving
- Difficulty concentrating during the day

The underlying problem is airway collapse during sleep. The solution is to open the airway. The easiest most effective way to do this is by using a device called CPAP:

C - Continuous

P - Positive

A – Airway

P - Pressure

CPAP is a device that delivers a column of air under pressure that keeps your airway open. Using CPAP when sleeping prevents airway collapse, allowing you to breathe continuously without waking frequently. As a result, you experience deep stages of restful, rejuvenating sleep and wake feeling refreshed in the morning.

If your examination/history indicates the possibility of you having sleep apnea, an overnight sleep study will probably be recommended. Should this study confirm the diagnosis of obstructed sleep apnea, you will need to undergo a second sleep study, on a second night, at which time you will be fitted with CPAP. Following your sleep study, our office will arrange for you to be fitted with a CPAP device and a follow up visit with Dr. Guillory will be scheduled approximately four weeks later.