

ENT Services

Information for Patients with Obstructive Sleep Apnoea Syndrome (OSA)

What is Obstructive Sleep Apnoea?

Obstructive sleep apnoea or OSA is a condition which interrupts breathing during sleep. These periods of lost breath may last anywhere between 5 and 60 seconds and may be frequent or infrequent; often causing the sufferer to wake up momentarily.

The repeating sleeping and waking pattern means the sufferer will often not get enough sleep leading to problems such as day time sleepiness, poor concentration, morning headaches, decreased libido and irritability.

What Causes OSA?

OSA is caused when the airway temporarily closes off. This may be as a result of a problem caused in the nose, throat, or larynx. Although conditions such as Hypothyroidism and obstructions to the nose such as polyps may cause OSA, most cases are caused by lifestyle factors.

The majority of cases of obstructive sleep apnoea are aggravated by one or more of the following:

- Smoking
- Being overweight or Obesity
- Drinking Alcohol
- Sleeping on your back



How Is OSA Described?

Obstructive sleep apnoea can be described in 1 of 3 ways:

1. Mild

This is defined as disturbance to sleep caused by temporary blockage of the airway, up to 14 times per hour

2. Moderate

This is defined as disturbance to sleep caused by temporary blockage of the airway, between 15 and 30 times per hour

3. Severe

This is defined as disturbance to sleep caused by temporary blockage of the airway, more than 30 times per hour

People who have a moderate to severe sleep apnoea are most likely to notice effects such as morning headaches, loud snoring, day time sleepiness, loss of libido and poor concentration and physical performance.

What are the health risks associated with OSA?

Although OSA is often related only with the symptoms and signs already mentioned, there are a few associated health risks such as:

- High blood pressure
- Depression
- Increased risk of respiratory failure
- Increased risk of accidents

Driving and operating machinery

Due to these associated health risks, especially that of accidents, it is important to know that if you hold a UK driving licence it is your responsibility to contact DVLA (Driver and Vehicle Licensing Agency) to

Patient Information

inform them if you have been diagnosed with OSA. This could result in your licence being revoked.

Check the DVLA website for more information at www.gov.uk/dvla or alternatively contact them directly on 0300 790 6801.

You may also be at risk if you work with heavy machinery. Ask your consultant for more information.

How Is OSA Diagnosed?

Before you can be officially diagnosed with OSA you will have to undertake a sleep study.

This test involves sleeping under observation attached to monitors which record various data over the period of one nights sleep. You may be asked to have this as an inpatient (in hospital) or at home. In either case, your consultant will give you all the necessary information to make the test run smoothly.

What Treatments are Available for OSA?

Depending on the severity of the condition; different treatments will be advised by your doctor. It is important to know however, that different treatments work well for different people and that you may need a combination of 2 or more of these treatments to relieve your symptoms.

Weight Loss

If your BMI (Body Mass Index) value is above 25; you should consider losing some weight. Your doctor should have told you your BMI value when you visited the hospital however, this calculation can be easily done, your height in centimetres divided by your weight in kilograms squared (weight[kg] x weight [kg]) **Or use a BMI calculator:**
<http://www.nhsdirect.nhs.uk/magazine/interactive/bmi/index.aspx>

Weight loss is often the most difficult factor to control in any weight related condition because losing weight takes a lot of time and effort. However, In the case of OSA or simple snoring; losing weight is the single most

Patient Information

important factor. Some research has shown that a 10% weight loss can result in a 50% improvement in symptoms.

Other health benefits from losing weight or keeping a BMI of 20-25 are decreased risk of diabetes, coronary heart disease, high blood pressure, stroke, heart attack and some cancers.

If you would like some more information on ways in which to lose weight, the practice nurse at your local GP surgery should be able to help.

Remember, there is no perfect way to losing weight. However, diet and exercise combined have been proved to be more effective in weight reduction than when either is used alone.

Quit Smoking

Aside from the added health benefits of stopping smoking, quitting has been shown to relieve the symptoms of OSA. When we smoke, the passages of the upper airway (nose, throat and windpipe) become blocked or furred up. Combined with the relaxed muscles during sleep this will cause the airway to block during sleep causing OSA symptoms. Aside from not adding to the blockages, quitting smoking will over time get rid of the materials clogging your upper airways.

For more information on ways in which to quit smoking you could visit:

- your GP
- practice nurse
- local pharmacy

Contact the Smoking Cessation Service, Coventry 024 7624 6093;

Visit the NHS Stopping Smoking website at <http://www.gosmokefree.co.uk>;

Or telephone the stop smoking helpline 0800 169 0 169 24 hours a day.

Reduce/ Stop Drinking Alcohol

Alcohol is a mild muscle relaxant. When consumed before bed, the muscles at the back of the throat are relaxed. This combined with the added relaxant effect of sleep may cause the airway to block producing the

Patient Information

snoring effect often associated with sleep after alcohol. In some people this may develop into more serious OSA symptoms.

If you do not want to stop drinking alcohol, make sure that you do not consume it for at least 4 hours before bed and stay within the recommended limits of no more than 3 units per day for men and 2 units per day for women. Make sure that you consume no more than 14 units per week. One unit is half a pint of normal strength lager or one 25ml of 40% spirit.

Change your sleeping position

Sleeping on your back will cause the tongue to relax back onto the throat and the palate at the roof of your mouth to relax back onto the tongue; this will cause a narrowing of the airway, often producing snoring and OSA symptoms. By sleeping on your side or front the airway is opened and the snoring noise and OSA symptoms may be relieved. This technique will most likely help people who suffer with mild to moderate OSA.

Mandible Advancement Devices (MAD)

Although these devices are not normally available on the NHS, many people find them to be beneficial if they can be tolerated. The gum shield-like device fits into the mouth while you sleep bringing the jaw forward. This will open the airway at the back of the throat stopping the vibratory noises that cause snoring and OSA symptoms.

These can be bought without a prescription.

Continuous Positive Airway Pressure (CPAP)

CPAP is a machine that is attached before sleep. The idea behind the machine is that air is delivered into the mouth by a mask which fits onto the person while asleep. This constant stream of air will force the airway to open larger, therefore stopping snoring and OSA symptoms. This device is widely considered to be one of the best treatments for OSA.

This treatment can be difficult to tolerate by some people, others will find it very beneficial. You will need to ask your consultant about this treatment but it is unlikely that this will be the first treatment offered, or that it will be

Patient Information

offered without adequately attempting other treatments mentioned above such as weight loss and stopping smoking.

Other Treatments

Other treatments may be offered by your consultant and these will be discussed with you at length. These could include nasal or oral sprays, and surgery.

In the event of any interventions your consultant will inform you of all your available choices and agree them with you before starting treatment.

Further Information

If you need any further information, please contact Ward 23 (ENT) on 024 7696 7007.

The Trust has access to interpreting and translation services. If you need this information in another language or format, we will do our best to meet your needs. Please contact the Department on 024 7696 7007.

The Trust operates a smoke free policy.

To give feedback on this leaflet please email feedback@uhcw.nhs.uk

Document History

Department:	ENT
Contact:	27007
Updated:	November 2021
Review:	November 2023
Version:	5.2
Reference:	HIC/LFT/581/07