

Sleep Apnea

What is it?

Sleep apnea is a condition in which air flow is temporarily obstructed (blocked) during sleep. Airflow obstruction occurs when the tongue and the soft palate (located on the roof and at the back of the mouth) fall backward and partially or completely obstruct (block) the airway. The obstruction may last from 10 seconds to as long as 2 minutes.

What medicines will I be taking?

You may be given prescriptions for medicines that stimulate the respiratory system (e.g. Medroxy progesterone), or reduce daytime drowsiness (e.g. protriptyline). Drug therapy, however, is not effective.

How will this condition affect my life? (What can I do and what can't I do?)

You may wake up often at night, have insomnia (unable to sleep) and excessive daytime sleepiness. Snoring is common. Other symptoms may include morning headaches, personality changes, irritability or impotence (unable to get or keep an erection). Family life and the ability to keep a job may be affected, and may lead to depression.

The most effective management for sleep apnea involves the use of nasal CPAP (continuous positive airway pressure). This applied by means of a mask that fits tightly over the nose, and is used while you are sleeping. This may cause nasal dryness, burning or congestion which can be treated by the use of a humidifier.

When should I call the doctor?

Call the doctor if you develop:

- an upper respiratory illness
- a change in the amount or color of sputum (grey, green, yellow, blood specked)
- fever of 101.5°F or chills

How can I stay well?

- Avoid driving until symptoms are under control.
- Use a humidifier if it is “okayed” by your doctor or respiratory therapist.
- If you are overweight, recognize that this is contributing to your illness. Talk with your doctor about changing your diet or eating habits and setting realistic goals for weight reduction.
- Avoid alcohol.
- Avoid self-medicating.