



PHONE: 910-480-4890

FAX: 910-480-4893

EMAIL: patientcare@carolinaoral.com

Sleep Apnea Can Cause...



4 TIMES more likely to have a stroke



3 TIMES more likely to have heart disease
(38,000 cardiovascular deaths tied to sleep apnea annually)



6 TIMES more likely to be in a fatal car crash



OTHER RISKS: diabetes, depression, worsening of ADHD symptoms

Snoring and Sleep Apnea Current Concepts

By PBHS

Snoring can be more than just bothersome to the rest of us trying to sleep; it can also be a sign of a more serious condition: sleep apnea. Sleep apnea, or Obstructive Sleep Apnea Syndrome (OSAS) as it is more correctly termed, is a condition generally characterized by significant snoring, excessive daytime sleepiness, and obstructive breathing episodes during sleep.

People witnessing these breathing pauses often note that the afflicted person appears to be trying to inhale with subtle inspiratory efforts, and then they appear to wake up gasping. In actuality, they are obstructing and unable to inhale without partial awakening from sleep to inspire harder, thus opening the airway. During these non-breathing apneic episodes, the patient's blood oxygen saturation can fall to shockingly low levels, depriving the brain and heart of needed oxygen. Additionally, the increased effort required to breathe through the airway obstruction disrupts sleep and leaves the patient sleepy and tired during the daytime.



The chronically low oxygen saturations and disrupted sleep lead to a myriad of health problems including, but not limited to, hypertension, pulmonary hypertension, heart disease, irregular heart beats, heart attack, increased risk of stroke, dementia, poor concentration, increased rate of accidents (including motor vehicle accidents), accidental death, and early mortality.

15 years ago, the prevalence of OSAS was 4% in the general U.S. population. Today that figure stands at 6.62%, affecting 18 million Americans. The major reason for this alarming increase in OSAS has to do with the alarming increase in weight gain among Americans. Currently 2/3 of Americans meet clinical criteria for being obese, being more than 20% over already generous ideal body weight standards for their height. Thus, we in our practices already have a significant population of snorers and OSAS patients.

Diagnosis of sleep apnea is most accurately made by a formal sleep study. This is typically carried out in a certified sleep laboratory, generally furnished as a comfortable bedroom. Via cameras, the patient can be observed by a laboratory technician. Data recorded includes blood oxygen saturation, EEG, EKG, different levels of sleep including amount of time spent in REM sleep, the number of breathing pauses lasting 10 seconds or longer, and the number of hours spent sleeping. From this data, an apnea index can be calculated, and severity of OSAS can be determined.

www.carolinaoral.com

[Continue reading by clicking here.](#)

Richard C. Adams, DDS

413 Owen Drive, Suite 102 | Fayetteville, North Carolina | 28304