

Fact Sheet

Sleep Apnea

Description

Sleep apnea (AP-ne-ah) is a common disorder in which you have one or more pauses in breathing, or shallow breaths while you sleep. Breathing pauses can last from a few seconds to minutes. Typically, normal breathing then starts again, sometimes with a loud snort or choking sound. The most common type of sleep apnea is obstructive sleep apnea. In this condition, the airway collapses or becomes blocked during sleep. When you try to breathe, any air that squeezes past the blockage can cause loud snoring. Not enough air flows into your lungs, and this can cause a drop in your blood oxygen level. Obstructive sleep apnea is more common in people who are overweight, but it can affect anyone. Sleep apnea usually is an ongoing condition.

When your breathing pauses or becomes shallow, you'll often move out of deep sleep and into light sleep. As a result, the quality of your sleep is poor, which makes you tired during the day. Sleep apnea is a leading cause of excessive daytime sleepiness. Frequent drops in your blood oxygen level and reduced sleep quality can trigger the release of stress hormones. These hormones raise your heart rate and increase your risk for high blood pressure, heart attack, stroke, and arrhythmias (irregular heartbeats). The hormones can also raise your risk for, or worsen, heart failure. Untreated sleep apnea can also lead to changes in how your body uses energy. These changes increase your risk for obesity and diabetes.

When you're awake, throat muscles help keep your airway stiff and open so air can flow into your lungs. When you sleep, these muscles relax, which narrows your throat. Normally, this narrowing doesn't prevent air from flowing into and out of your lungs. But if you have a smaller than normal airway, it can become partially or fully blocked, causing sleep apnea. If you are overweight, the extra soft fat tissue can thicken the wall of the windpipe and narrow the airway. If the oxygen drops to a dangerous level, it triggers your brain to disturb your sleep. This helps tighten the upper airway muscles and open your windpipe. Normal breathing then starts again, often with a loud snort or choking sound.

Signs and Symptoms

One of the most common signs of obstructive sleep apnea is loud and chronic (ongoing) snoring. Pauses may occur in the snoring. Choking or gasping may follow the pauses. The snoring usually is loudest when you sleep on your back; it might be less noisy when you turn on your side. You might not snore every night, but over time the snoring can happen more often and get louder. Not everyone who snores has sleep apnea. Here are some other common signs and symptoms of sleep apnea:

- Fighting sleepiness during the day. You may find yourself rapidly falling asleep during the quiet moments of the day when you're not active.
- Memory or learning problems and not being able to concentrate
- Morning headaches
- Feeling irritable, depressed, or having mood swings or personality changes
- Waking up frequently to urinate
- Dry mouth or sore throat when you wake up

Test and Diagnosis

Most people who have sleep apnea don't know they have it because it only occurs during sleep. Accurate diagnosis can only be made by a sleep specialist. Learn more about assessment of sleep disorders here.

Treatment

Sleep apnea is commonly treated with continuous positive airway pressure (CPAP). Often, sleep specialists also suggest other ways to reduce the severity of symptoms like sleeping on your side, and/or reducing use of certain medications that could make your muscles near your airway more lax, and therefore more likely to obstruct the airway.