



5 STEPS TO BETTER SLEEP HEALTH

STEP 1: Recognise sleep problem *e.g.* snoring, holding your breath when sleeping, feeling tired during the day

STEP 2: GP or Dentist referral for specialist consultation at the Woolcock Clinic

STEP 3: Specialist consultation at the Woolcock Clinic

STEP 4: Overnight sleep study or other sleep testing

STEP 5: Specialist consultation to organise diagnostic and/or treatment plan with Woolcock's team of clinicians



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OSA

Obstructive Sleep Apnea



WHAT IS OBSTRUCTIVE SLEEP APNEA (OSA)?

Obstructive Sleep Apnea (OSA) is a disorder where your breathing is interrupted during sleep. The reduced airflow limits oxygen supply to your body and disrupts your quality of sleep. Similarly to snoring, OSA results from the relaxation of the muscles in the throat. However, in OSA the collapse is complete and leads to additional health problems including higher blood pressure, heart attacks, strokes and diabetes.

Nearly 5% of the Australian adult population experiences symptoms of OSA.

TYPICAL SYMPTOMS OF OSA

- Loud snoring
- Waking up feeling un-refreshed
- Have a dry mouth, sore throat or headache in the morning
- Experience sleepiness and fatigue when awake
- Being overweight

Overnight symptoms are often more likely to be noticed by a partner. A person with OSA will snore and then there will be a pause in breathing which may last between 10 - 60 seconds. After each pause in breathing there will be a deep gasping or snoring noise which will be followed by a brief awakening as the person struggles to breathe. These awakenings are generally not remembered, but some people may remember waking with the sensation of choking. This cycle repeats itself, sometimes hundreds of times a night.

Often the person with untreated OSA wakes up feeling like they are 'hung over'. They may also feel sleepy during the day which can make it difficult to concentrate and function. Forgetfulness, irritability, anxiety, depression and other personality changes are all common conditions associated with OSA. Other symptoms may include impotence or reduced libido, excessive perspiration during sleep, and increased frequency of urination at night.

IF I SNORE, DO I HAVE OSA?

Snoring is a common sign of OSA, however it is important to remember that not everyone who snores has OSA. Only an overnight sleep study (polysomnography) can detect and confirm the presence of OSA. You should speak to your GP if you have any symptoms that bother you or your partner.

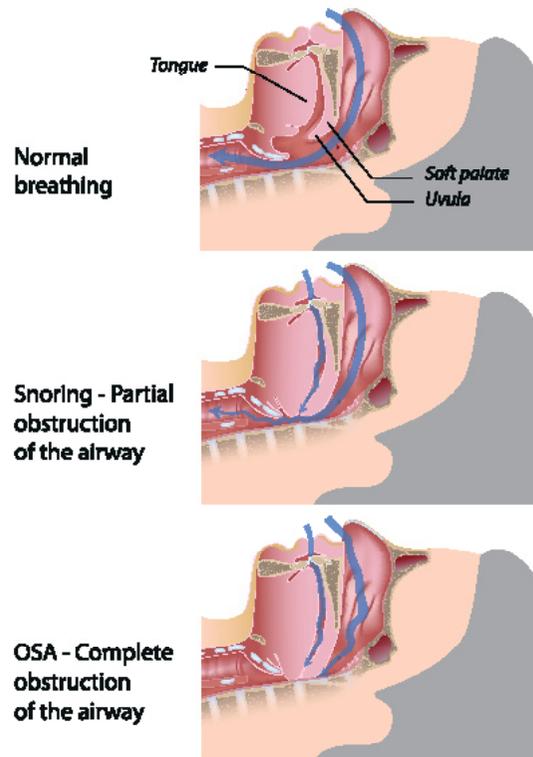
WHO GETS OBSTRUCTIVE SLEEP APNEA (OSA)?

OSA can occur in people of all ages but most commonly in middle-aged males. It is strongly linked to being overweight, particularly in people with large necks and stomachs. In people who are not overweight, it is likely that they have been born with a narrow airway or facial structure which leads to a narrow airway.

In women the incidence of OSA particularly increases after menopause. Daytime problems are typically tiredness rather than severe sleepiness.

In childhood, OSA most commonly occurs as a result of obesity, enlarged tonsils or adenoids, or from some facial bone abnormality.

In certain ethnic groups such as people from Asian backgrounds, it is more linked to facial structure than obesity. Snoring and OSA is also strongly linked to family history - a snorer is likely to have parents who were snorers.



WHY IS IT IMPORTANT TO TREAT OSA?

OSA can have dangerous consequences. Because the person is fatigued in the daytime, it is easy to fall asleep or lose concentration while driving or using heavy machinery.

Research has shown that people with untreated OSA are two to five times more likely to have a motor vehicle accident than someone without OSA. OSA also reduces work productivity and can impair clear thinking and memory.

HOW DO YOU TREAT OSA?

Once you have had an overnight sleep study and your sleep specialist confirms you have OSA, there are a variety of treatment options which may be used individually or in combination:

- Continuous positive airway pressure (CPAP) therapy uses a mask worn during sleep which pumps air through the nose to keep the upper airway open
- Dental devices (Mandibular Advancement Splints) to hold the jaw forward
- Surgery to widen or stiffen the airway
- Lifestyle changes such as weight loss

HOW WE CAN HELP YOU

If you are concerned about your sleep, speak to your doctor who will be able to refer you to our expert clinicians.

At the Woolcock Clinic we can make an appointment for you to see a sleep specialist, have a sleep study, or learn more about the best treatment to suit your needs.

The Woolcock Institute of Medical Research is a not-for-profit organisation.

If you are interested in further information about becoming involved in our research studies or donations, please visit our website www.woolcock.org.au.

Your contribution will make a difference.
Thank you for your support.

