

Snoring: Not So Silent Night

By Rachel Stern
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Bedtime is supposed to be a time of peace and quiet, but for those who sleep with someone who snores, it can be a nightmare of exhausting cacophony instead. According to the National Institutes of Health, nearly 35 percent of Americans - or nearly 70 million - suffer from a sleep-related problem. Around 40 million have a chronic sleep disorder and another 20-30 million have suffered occasionally. Sleep problems cost the U.S. economy more than \$100 billion a year in lost productivity, medical expenses, sick leave, and property and environmental damage, according to a Stanford University study and the U.S. Surgeon General's Office. In addition, nearly 100,000 motor vehicle accidents are caused by sleepy drivers every year.

Certain disorders, like snoring, are classic joke fodder, but snoring is no laughing matter. In addition to causing health problems, even severe ones, according to the Sleep Disorders Center at Rush University Medical Center in Chicago, snoring contributes significantly to many divorces.

More ominous still, most people with a sleep disorder are not diagnosed, and even fewer are treated for their conditions.

Snorers don't just suffer embarrassment and marital woes - it is well-established that some snoring (though not all) is an indication of a dangerous medical condition called Obstructive Sleep Apnea.

"Apnea" means "no air." Sleep apnea is dangerous because the condition is one in which patients totally stop breathing, sometimes for as long as 10 seconds or more during sleep.

These periods interrupt the sleep of the sufferer, which can lead to other problems, according to the National Institutes of Health. In addition to excess fatigue stemming from sleep deprivation, complications from sleep apnea can include hypertension, heart disease including abnormal heart rhythm (arrhythmia) and even partial heart failure, excessive carbon dioxide levels in the blood and stroke.

Sleep apnea has many causes, including being overweight, having excess fleshy tissue in the throat and an abnormally narrow throat. Treatment - with the goal to keep the airway open during sleep - varies based on the cause of the obstruction.

Use of alcohol or sedatives may predispose vulnerable people to episodes of apnea, as these substances relax the airway.

The classic picture of obstructive sleep apnea includes episodes of heavy snoring that begin soon after falling asleep.

The snoring proceeds at a regular pace for a period of time, often becoming louder, but is then interrupted by a long silent period during which no breathing is taking place (apnea).

The apnea is interrupted by loud snorts and gasps (while the sufferer regains the ability to breathe), and then the snoring returns to its regular pace. This behavior recurs frequently throughout the night. During the apneas, the oxygen level in the blood falls, which can cause many of the daytime symptoms. In severe cases, pulmonary hypertension may develop leading to heart failure.

CPAP stands for Continuous Positive Airway Pressure. A CPAP machine pushes air into the nose or nose and mouth via a mask.

"CPAP is the 'gold standard' treatment for sleep apnea," said Dr. C. Philip Amoils of Santa Clarita Ear Nose and Throat Associates. "But many patients cannot tolerate wearing the mask in bed."

For the people who find they are unable to tolerate the CPAP machine, dental appliances - mechanical devices that resemble teeth grinding guards - are worn in the mouth at night to keep the jaw forward.

Dr. Dell Ariel Goodrick diagnoses and treats sleep apnea with dental devices. Primarily a cosmetic dentist, he has practices in the Santa Clarita Valley, Hollywood, Beverly Hills and other Los Angeles areas.

"These are custom-made appliances that advance the lower jaw to create more space for the tongue," said Goodrick. "It's the same idea as when you position someone's head for administering CPR: you tilt the head back and raise the chin."

Though helpful for mild sleep apnea, dental appliances are not usually sufficient for severe cases.

Surgery is sometimes indicated to remove excess fleshy tissue at the back of the throat. Sometimes this is the uvula, sometimes adenoids and/or tonsils, and sometimes it's just a particularly fleshy soft palate.

"The uvula is like a rear windshield wiper," said Amoils. Usually a laser uvulopalatopharyngoplasty, or UPPP, is indicated, though in some cases removal of the enlarged tonsils or adenoids (tonsillectomy, adenoidectomy), or tracheostomy is a better course.

In the tracheostomy, an opening in the trachea is created to bypass the obstructed airway during sleep. A tonsillectomy may be all that is necessary for children.

"The doctor can see the problem if it's an issue of the tonsils or adenoids," said Goodrick. "But you can't see it if it's a deviated septum, for instance."

The "married couples sleep study" is an ongoing evaluation of couples in which the male has been diagnosed with obstructive snoring. The study, being conducted at Rush University, is unique in that both the snorer and the "snoree" are studied in a sleep lab to determine to what degree the non-snorer's sleep is being disturbed. They found that the non-snorer wakes up as many as eight times in hour in some cases, severely disrupting his or her sleep.

A study by the American College of Oral and Maxillofacial Surgeons found that sleep deprivation can have negative effects on a couple's sex and personal life and can even lead to divorce.

They found, in fact, that more than 80 percent of snoring couples sleep in separate bedrooms.

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