TREATMENT OPTIONS FOR OBSTRUCTIVE SLEEP APNEA (OSA)

- As the causes of sleep apnea vary there is no single treatment that works for everyone.
-Deciding which treatment is most appropriate is best done by talking to your doctor.
- Weight loss is advisable in anyone who is overweight.
- Reduction of alcohol consumption, avoidance of sleep on your back, and the use of nasal sprays can be helpful in some cases.
- When the sleep apnea is mild, treatment may be optional and a range of options may be considered.
- When the sleep apnea is moderate or severe, the use of CPAP is generally recommended.
- Oral appliances generally work best in mild to moderate sleep apnea.
- Surgery may be considered where there is a distinct obstruction to the nose and/or throat.

Note: All words that are underlined relate to topics in the Sleep Health Foundation Information Library at www.sleephealthfoundation.org.au

What is sleep apnea and how is it diagnosed?

Obstructive sleep apnea (OSA) is present when the airway at the back of the throat is repeatedly blocked, partly or completely, during sleep. Snoring, obesity, observed apneas and sleepiness in the day may suggest that a person has sleep apnea. See our OSA link. The best way to be really sure about an OSA diagnosis is with an overnight sleep study and a clinical assessment by your doctor.

What are the treatment options?

Once a diagnosis of OSA is established, talk with your doctor about the need for treatment and the options available for you. The circumstances often vary from person to person, since the underlying causes may be different. Generally speaking, the options can include one or more of the following:
1 Weight loss
For anyone who is overweight, losing weight is recommended. While this may not necessarily cure the OSA, it usually improves snoring and OSA, and can help other treatments work more effectively. It also provides general health benefits.

2 Reduce alcohol consumption
Alcohol usually worsens snoring and OSA due to the throat muscles relaxing. For some people drinking alcohol makes their OSA worse. If this is the case for you then less or no alcohol may be a useful treatment.

3 Body position during sleep
Snoring and OSA are usually worse when lying on the back. This is because of the effects of gravity on the tongue. Avoiding sleep in this position can improve OSA. In some people it can completely control the problem. This is best achieved by wearing a device that makes it uncomfortable to sleep on your back. Some such devices can be purchased or it can be as simple as sleeping with a tennis ball sewn into a pocket on the back of your pajamas.

4 Managing blocked nose
A blocked nose causes mouth breathing, which can lead to snoring and OSA. The blocked nose can be due to different problems, such as allergies, sinus disease, and a deviated septum. Your doctor can assess and provide treatment, depending on the problem. This may involve the use of nasal sprays to relieve congestion. Sometimes surgery is required to correct anatomical problems.

5 CPAP (Continuous Positive Airways Pressure)
This is generally considered to be the most effective way to treat OSA. It involves the use of a special machine during sleep, connected to a nose or face mask via tubing. The machine gently increases air pressure in your throat holding it open, thus preventing snoring and OSA. See our CPAP link.

6 Oral Appliances
These are specially made dental plates that are worn during sleep. They push your lower jaw forwards so that your throat opens up, reducing the risk that it will vibrate (snore) or obstruct. The appliances have various names such as Mandibular Advancement Splints (MAS) or Mandibular Advancement Devices (MAD) or Mandibular Repositioning Appliances (MRA). Your suitability for this form of treatment is best discussed with your sleep physician, who will then refer you to a trained dentist. See our Oral Appliances link.

7 Surgery
Surgery may help in cases of OSA caused by a discrete blockage of some part of the nose or throat. There are many types of operations depending on where in your nose and/or throat the problem lies. The decision about whether surgery is right for you may require the expert input of an ENT surgeon. The risks and benefits need to be weighed up in each case. In adults, surgery is often the last resort, after other treatments have been tried first. Nasal surgery may be useful to help CPAP treatment by allowing nasal masks once the nasal blockage is repaired. In children with OSA, surgery to remove tonsils and adenoids is quite commonly done and is often very helpful.

Where can I find out more about treatment options for OSA?
www.mayoclinic.com/health/sleep-apnea/DS00148/DSECTION=treatments-and-drugs