



## How are sleep and anaesthesia the same? How do they differ?

Sleep is natural. When you have met the need for it, it will finish by itself. Anaesthesia is caused by drugs. It will only finish when the drugs wear off. These drugs work by acting on the same parts of the brain that control sleep. Both anaesthesia and sleep cause your muscles to relax. They also reduce your drive to breathe. There is therefore a risk of not breathing enough and / or blocking the throat.

## What problems can OSA cause during anaesthesia? What about after?

People with OSA have a risk of their throat blocking when sedated or under anaesthesia. There is still a risk of this even after the anaesthetic has worn off. Anaesthesia interferes with the ability to respond by arousing or waking up if this happens. The anaesthetist can best avoid this situation if they know you have, or may have, OSA. There are many options to deal with it such as special anaesthesia methods, keeping a close eye on you after surgery and using CPAP when sedated or asleep. Your anaesthetist will be with you throughout your operation. This is to make sure that you have no trouble breathing.

## Important Things to Know About Nocturia and Sleep

- Anaesthesia and sleep are the same in many ways, including their effects on breathing and upper airway function.
- Patients with obstructive sleep apnea (OSA) have trouble breathing when they sleep. When they are under anaesthesia or as they recover from it, they can have trouble as well.
- If you have OSA, you must let your anaesthetist know.
- Your anaesthetist will be with you throughout your operation. They will look after your breathing and make sure no problems develop.
- He or she will set up special care for you after surgery. This is to reduce the risk of problems after the surgery.
- If you use CPAP or another sleep apnea treatment at home, you must take your pump and mask or other treatment with you to hospital.

## What should I tell my anaesthetist prior to the surgery?

Anaesthesia and surgery affect your whole body. Thus your anaesthetist needs to know about any health issues which could affect your wellbeing when you have surgery. You will meet them before the surgery to discuss these things.

Obstructive sleep apnoea creates special problems. If you have OSA, or think that you might have it, be sure to let your anaesthetist know before your surgery.

There are other things that you normally talk about before the surgery e.g. previous illnesses (such as recent problems with your lungs or throat), smoking, any drugs you may be taking (both legal and illicit, as well as herbal and alternative treatments), how much alcohol you drink, allergies (to drugs and dressings), previous problems with anaesthesia (including postoperative nausea and vomiting and postoperative pain), a family history of anaesthesia problems and pregnancy or the possibility of it.

## How do I get ready for surgery?

You should learn about the surgery you are having. You need to know what it will do for you, as well as the risks. This includes the care plan for after the operation, including pain relief. Unless it is an emergency, you should fast before the surgery. Small amounts of clear fluid are OK until two hours before the surgery. Other drinks and food need longer to clear your stomach. Not doing this raises the risk of reflux of stomach contents. The danger here is that it might then go into your lungs.

## What should I do about my CPAP therapy?

If you use CPAP or other treatment for sleep apnoea, you must let your anaesthetist know. If you are using CPAP, your familiarity with it is helpful as it makes it easier to apply during post-operative care. Bring your device with you on the day of your admission. You should know your pressure settings and mask type. This is in case hospital equipment needs to be used.

## Where can I find out more?

[www.sleepapnea.org/about-asaa/position-statements/sleep-apnea-and-same-day-surgery.html](http://www.sleepapnea.org/about-asaa/position-statements/sleep-apnea-and-same-day-surgery.html)

[www.sleepapnea.org/about-asaa/position-statements/sleep-apnea-and-same-day-surgery.html](http://www.sleepapnea.org/about-asaa/position-statements/sleep-apnea-and-same-day-surgery.html)

[www.anesthesiologynews.com/download/osa\\_angam11.pdf](http://www.anesthesiologynews.com/download/osa_angam11.pdf)

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A national organisation devoted to education, advocacy and supporting research into sleep and its disorders

### **Sleep Disorders Australia**

ABN 98 075 427 459

[www.sleepoz.org.au](http://www.sleepoz.org.au)

A voluntary group offering assistance and support to people and their families living with sleep disorders

### **Australasian Sleep Association**

ABN 32 172 170 561

[www.sleep.org.au](http://www.sleep.org.au)

The peak national association of clinicians and scientists devoted to investigation of sleep and its disorders

Disclaimer - Information provided here is general in nature and should not be seen as a substitute for professional medical advice.

Ongoing concerns about sleep or other medical conditions should be discussed with your local doctor.

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