



Important Things to Know About Snoring

- You snore because of vibrations in a part of the throat called the pharynx.
- Being overweight increases your risk of snoring.
- Middle aged people snore the most.
- Men have a higher risk than women.
- Alcohol and some medications also raise your risk.
- You'll snore more if you sleep on your back.
- Breathing through your mouth (maybe because of a blocked nose) raises your risk.
- There is a link between snoring and a more serious problem called [sleep apnoea](#).
- There are a number of treatments available.

Why do people snore?

You snore when some parts of your throat vibrate. This only happens when you're asleep. The part of your throat that vibrates is called the pharynx. It is right behind the tongue. Several small muscles hold it open. But when you sleep, these muscles relax. This makes it vibrate more easily. It also becomes narrower. When you breathe in, it will vibrate and make a noise. The narrower it is, the more easily it will vibrate and the louder you will snore.

How common is snoring?

About 40% of men have at least mild snoring, on at least some nights. This number is smaller for women (around 30%). About 15% of people snore on most nights. People of any age can snore. Even some children have a problem with snoring (see [Childhood Snoring and Sleep Apnoea](#)). But the age group with most risk are middle aged people.

What can raise my risk of snoring?

- Being overweight or obese will mean you have more fat around the neck. This will make your throat narrower and it will vibrate more easily.

- Drinking alcohol will relax the muscles in your throat. This will mean more vibration and more sound.
- People who breathe through the mouth are more likely to snore. This is because the walls of your throat at the back of the mouth vibrate easily. Walls at the back of your nose do not vibrate as easily.
- A blocked nose will mean that you have to breathe through the mouth. This will raise your risk of snoring. It also makes a vacuum inside the throat. This may pull the walls of your throat closer together.
- Sleeping on your back makes your tongue fall directly back. This can get in the way of your airflow. Snoring is almost always worse on the back.
- Some people snore because of narrowing caused by nasal polyps, a large tongue or thyroid swellings. These narrow the airway. Often children snore because of large tonsils and adenoids.
- Allergies, hay fever and smoking can make snoring worse. This is because they make it harder for air to flow in and out.
- Some medications make your throat muscles relax e.g. sleeping tablets, anaesthetic drugs, oral steroids and epilepsy drugs.
- Some people are born with a smaller airway than normal. These people will have a higher chance of snoring.

- Snoring is more likely in pregnancy (see [Pregnancy and Sleep](#))

How does it affect people?

For a lot of families snoring is a big problem. Often, the snorer has to sleep alone in another room. If not, then his or her family will have trouble getting a good night's sleep. The family might be more tired during the day. This can mean that they can't focus as well on work or study. Some snorers also have a condition known as [sleep apnoea](#). Over 10% of regular snorers have it to a significant degree. Sleep apnoea is linked to high blood pressure, heart attacks and strokes.

How is snoring treated?

One treatment is called a Mandibular Advancement Splint. It looks a bit like a mouthguard. You wear it between your teeth while you sleep. It pushes your lower jaw forward. This gives you a wider airway. It needs to be specially fitted to you. You will need to see a dentist or oral surgeon for this. This is because different people have different mouth shapes. It works for some people but not for others. (See [Oral Appliances](#)).

Some treatments stiffen the roof of your mouth. This makes it vibrate less. This can be done using lasers, microwave rays or injections. Laser surgery on the throat may work for some people. But it can be painful. Only an Ear, Nose and Throat surgeon can do this.

For children who snore, it is common to take out the tonsils as tonsillar enlargement is a common cause. This often succeeds. (see [Childhood Snoring and Sleep Apnoea](#)) For adults with large tonsils, the same thing can also be done.

Some people snore because of the shape of their tongue or the roof of their mouth. Others snore because their nose is blocked. In all of these cases, surgery in the

problem area can help. A type of surgery called uvulopalatopharyngoplasty (UPPP) used to be common. Here, the surgeon operates on the back of the throat to make it wider. But it only ever worked for some people and has a low success rate in the long term.

Positional therapies to encourage you to sleep on your side can be helpful, but are often ineffective in keeping you on your side throughout sleep.

Herbal or enzyme treatments might help with allergies. If this is why you snore, then they might help. But if you're snoring for another reason, then they will do nothing.

Nasal dilator strips can unblock your nose. But by themselves they won't stop snoring.

What might your doctor do?

A GP can refer you to a [sleep specialist](#). They will consider the issue and the other problems it might cause for your health. They will probably want you to do a [sleep study](#). This is done to check if you have anything more serious like [sleep apnoea](#).

What could you do?

If you are overweight, losing weight might help. Try and avoid alcohol for at least four hours before sleeping. If your snoring is made worse by an allergy, try and stay away from whatever sets it off.

Where and when should you seek help?

Get help if your snoring is bothering you or your household. If you see a doctor about snoring, you might want to bring your partner with you, if you have one. This is so that they can talk to the doctor about what happens when you're asleep.

Where can I find out more?

<http://www.nlm.nih.gov/medlineplus/snoring.html>

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