Getting It Fixed

Treatment and Management of OSA

Obstructive Sleep Apnoea (OSA) has a close association to snoring, so it tends to be overlooked as a minor issue. However it can in fact, cause a fatal build-up of pressure in the lungs or heart. Since OSA-induced oxygen deprivation can affect patients in a myriad of ways, it is important to know what treatment is right for you.

Moderate to Severe OSA

The most standard treatment is using a Continuous Positive Air Pressure (CPAP) machine to treat moderate to severe levels of OSA and sometimes a Bi-level Positive Air Pressure (BPAP) machine for more severe cases. A patient must wear a mask attached to the machine which delivers air pressure to the nose and mouth while they sleep. Positive air pressure can reduce the number of respiratory events as they sleep, thus regulating their oxygen levels and reducing daytime lethargy.

With CPAP machine, the air pressure will be pushed in the airway to release obstruction and keep airway open while sleeping. However, a Bi-level machine utilises a different type of positive airway pressure, by controlling the amount of pressure a patient inhales, and setting a different level of pressure when they exhale.

The machines serve to help the impaired laryngeal and oropharyngeal muscles in the throat that cause this condition. Patients should use the CPAP machine while they sleep, for at least 25-27 days in a month, as it can avert complications that come from a lack of oxygen at night. If the patient reduces the number of days the symptoms will start to reoccur.

If the OSA is severe enough to become life-threatening, then the patient may require a tracheostomy - a surgical opening in the neck where a metal or plastic tube is inserted which allows air to pass in and out of the lungs.

People with mild sleep apnoea can try various home remedies that focus on changing lifestyles, so they can relieve the physical condition of obstructive snoring while they sleep.

Exercise:
Strength training and aerobic exercises like walking, swimming, running or cycling can help improve OSA at home, especially if you exercise most days of the week.

Sleep on the side or stomach:
When you sleep on your back, the tongue and soft palate will rest against the back of the throat and block the airway.

Avoid alcohol and sleeping pills:
These substances can induce sleepiness and worsen OSA in the long-term.

Keep the nasal passages open when sleeping:
Using a nasal spray at night can help with congestion, and keep the nasal passages open. Ask your doctor about whether nasal decongestants or antihistamines could be right for you.

Diagnosing Sleep disorder

A sleep study, also known as polysomnography (PSG), is used to diagnose sleep disorders. Patients will usually have an overnight stay in the sleep laboratory where their brain waves, heart rate, oxygen levels and breathing are monitored.

A Level 1 PSG is the most accurate method of diagnosing sleep disorders, which consists of advanced monitoring systems and a good sleep technician. This technology detects the sleep architecture of the patient's brain, including the pattern of their brain waves, and each respiratory event that occurs while they are sleeping.

Regardless of their treatment option, patients at IJN are monitored anywhere between 3 months to a year depending on their healing process. Improvements can usually be seen within 6 months, as their symptoms get better - no headaches, no lethargy, reduced body weight, more energy in the day. That is the strength of a good night's sleep.

If you suspect you have OSA, contact our Wellness Center at **03 2600 6421 / 6423** for an appointment.
For more information, you can visit our website **www.ijn.com.my**

Contact us