

Patient information from BMJ

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Sleep apnoea in adults (obstructive)

Sleep apnoea affects your breathing at night and disturbs your sleep. During the day you might feel drowsy and struggle to concentrate. Treatment can relieve the symptoms for many people.

You can use this leaflet to talk to your doctor and decide which treatments are best for you.

What is sleep apnoea?

There are several types of sleep apnoea. The one we cover here is a common kind called **obstructive sleep apnoea, or OSA** for short.

If you have obstructive sleep apnoea there are times during the night when you stop breathing for a few seconds. It happens because the muscles in your throat relax and block the flow of air.

After a few seconds your brain recognises the problem and makes your body start breathing again. You may wake up with a choking or gasping sound. This can happen several times an hour, all night, so you can't stay in a deep sleep and get the rest you need.

What causes some people to get sleep apnoea?

Sleep apnoea more often affects people who are older. But it has been linked with other factors, including:

- Obesity
- A large neck
- Other family members who have sleep apnoea
- Certain characteristics of the jaw, mouth and throat that make narrowing of your throat more likely. For example, an overbite, or very large tonsils
- Smoking
- Sleeping on your back.

What are the symptoms?

The main symptoms include loud snoring, gasping during sleep, stopping breathing during sleep, and waking often during sleep. You may not be aware of some things such as snoring or gasping in your sleep yourself. It may be your partner or another family member who notices the signs first.

You may feel drowsy during the day, find it hard to concentrate, or feel extremely tired when you wake up. If you have severe sleep apnoea you get a powerful urge to fall asleep in situations where you need to be fully awake.

There are many things that can upset your sleep. You should see your doctor to try to find out what is causing your problems.

What treatments work?

Obstructive sleep apnoea won't get better on its own. So it's important to get treatment. There are things you can try yourself that may help. For example stopping smoking, and limiting or stopping use of alcohol, or stopping use of medicines that make you drowsy (such as sleeping tablets) can be helpful.

Sleeping on your side may also help.

Continuous positive airway pressure

The main treatment for most people with obstructive sleep apnoea is called **continuous positive airway pressure** (CPAP). With this treatment you wear a special mask to bed. The mask is connected to an air pump by a flexible tube. The pump blows a steady, gentle flow of air into your nose (or nose and mouth). The flow of air helps keep your airway open.

You will be shown how to use the CPAP equipment. If you find CPAP difficult or awkward to use you may be able to have extra support and training to help you get used to it.

CPAP can improve your sleep and make you feel much less tired during the day, especially if you have severe sleep apnoea. It may also help with some of the other effects associated with sleep apnoea, such as if you have a low mood, or high blood pressure. But the mask can cause side effects in some people, including a dry mouth, skin irritation, sneezing, and a runny nose. You might find wearing the mask uncomfortable.

There are different types of mask available to try and help with these side effects. You can talk to your doctor about the type of CPAP that is right for you.

Using a mouthpiece

People with less-severe symptoms, or who don't want to use CPAP, can try wearing a special mouthpiece while sleeping. Some mouthpieces work by pushing your lower jaw forward to keep your airway open. The mouthpiece fits round your teeth and looks a bit like a gum shield used for sport.

Mouthpieces are sometimes used to stop people snoring. Mouthpieces can help reduce sleep apnoea symptoms, but they don't work as well as CPAP.

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They can cause side effects, including dry mouth, gum irritation, or dribbling. But these problems seem to be temporary.

Losing weight

If you're overweight your doctor is likely to advise you to try to lose weight. Losing weight can help reduce sleep apnoea symptoms, especially in those who are very overweight to begin with. Generally, the more weight people lose, the more their symptoms improve. But symptoms can get worse again in people who regain weight they have lost.

Surgery

Some people with severe sleep apnoea have surgery to try to relieve their symptoms. Usually surgery is only used when there is something about the structure of your throat and airway that may be giving you sleep apnoea. For example, people with very large tonsils and adenoids (glands at the back of the throat) sometimes get sleep apnoea. An operation to remove their tonsils and adenoids may help. Another operation can widen your airway by removing some tissue from the top of your throat.

Although surgery may help some people, it's not usually recommended. This is because, for many people, sleep apnoea comes back after surgery. Also, like most kinds of surgery, operations for sleep apnoea carry risks, including infections, bleeding, and pain.

Other treatments

A new implant treatment is now used in some countries and might become more common. A small sensor is inserted under the skin on your chest. It works on the nerve that controls the movement of your tongue and other muscles around your airway, to help keep your airway open while you are asleep. This type of treatment won't be suitable for everybody. And where it is available it is mainly used for people whose sleep apnoea is not too severe and who are otherwise healthy.

You may be offered other treatments to help reduce sleepiness. Some medicines can help if your sleep apnoea is being treated but you are still extremely sleepy when you shouldn't be. But the sleep apnoea needs to be treated first.

You may get advice on making changes that can reduce sleep apnoea. For example, advice on sleeping positions. For some people the position they sleep in affects their airway and breathing. You could try using a special pillow or vibrating device to help you sleep on your side.

What will happen to me?

If it's not treated sleep apnoea can affect how much you enjoy life. And if you're sleepy during the day you may have problems doing your job. Your memory may be affected. It can also affect your driving. If you have sleep apnoea you should tell the relevant authority (for example, in the UK this is the Driver and Vehicle Licensing Agency [DVLA]) and your car insurance company.

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People with severe sleep apnoea may also be more likely to get other health problems, such as heart disease and depression. So it's important to get treatment.

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