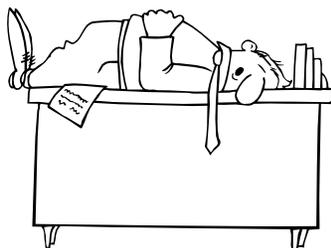


What Can You Do To Decrease Snoring?

- ◆ Try weight loss and muscle toning
- ◆ Avoid Smoking
- ◆ Avoid tranquilizers and sleeping pills before going to bed
- ◆ Avoid alcohol 3 hours before bedtime
- ◆ Avoid eating heavy meals 5 hours before sleeping
- ◆ Sleep on your side, not on your back
- ◆ Raise the head of the bed

Habitual snorers should receive a thorough examination of the nose and throat to determine the cause of snoring and the best way to treat it.



SNORING *Causes & Cures*

If you snore, you've probably heard the comments, the complaints and the jokes. Maybe you've even made a few yourself. But did you know that snoring can be a warning sign of a serious medical condition known as obstructive sleep apnea? It can affect your daytime performance, your job, and your health. BUT there are effective treatments that can reduce or even stop your snoring.

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Who Snores, and Why?

It is estimated that 45% of normal adults snore occasionally - but 25% are habitual snorers. Heavy snoring is more common in males and overweight persons, and the problem usually grows worse with age.

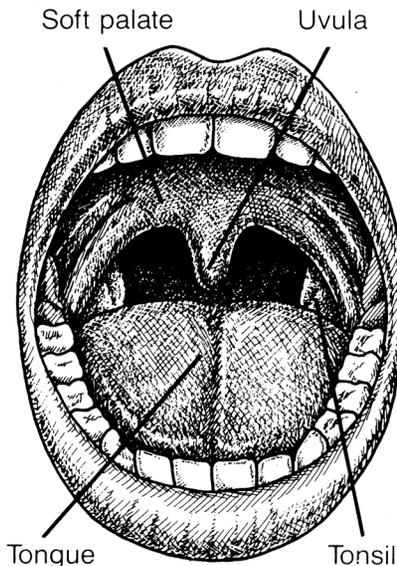
Contrary to common belief, snoring is not simply a habit that a person can be trained to give up, but is caused by a partial obstruction in the back of the throat and nose. The characteristic “rattling” sound is the vibration of the soft palate and uvula or other structures in the upper airway. This is a result of the airway being constricted by one or more of the following conditions:

- ◆ Poor muscle tone in the soft palate. This may even worsen when muscles are relaxed by consumption of alcohol, some medications or by smoking.
- ◆ Enlarged tonsils and adenoids
- ◆ A large uvula
- ◆ Blocked nasal air passages, common with a cold or allergy
- ◆ Obstructed nasal airways, caused by polyps, cysts, or a deviated septum
- ◆ Excessive weight, causing tissues in the neck to be bulky and flaccid
- ◆ Hypothyroidism and other “glandular” disorders

What Is Obstructive Sleep Apnea?

Snoring can range from irritating, to problematic, to life threatening. When you snore, you may merely annoy those in the same room, depriving them of sleep. You may also be awakened by your own snoring pattern, interrupting your sleep cycle and causing chronic fatigue. Or you may experience the problem in its most exaggerated form, known as obstructive sleep apnea.

Obstructive sleep apnea is an unsuccessful attempt to breathe through the nose and mouth caused by obstruction which may involve the soft palate, uvula, nose, tonsils, adenoids or base of tongue.



Obstructive sleep apnea can deprive the snorer of oxygen. If you suffer from obstructive sleep apnea, you are probably also being deprived of the “deep” sleep stages you need. You may stay sleepy much of the day, and may even fall asleep while driving, or on the job. Researchers have also associated the condition with high blood pressure, heart attack, and stroke.

Since you as the snorer cannot determine whether sleep apnea is a problem, your doctor may recommend a sleep test. The solution may be as simple as managing nasal allergy or infection, or reshaping the soft palate by means of a new surgical treatment.

How Can Snoring Be Treated Surgically?

Procedures can be performed to correct physical abnormalities of the nose and throat that compromise breathing during sleep. A surgeon may perform procedures such as UPPP (Uvulopalatopharyngoplasty) or LAUP (using laser), to remove excess tissue at the back of the throat that may be blocking the airway. Sites of narrowing within the nasal airway may also be enlarged.

Other treatments can include CPAP (Continuous Positive Airway Pressure). A mask is worn over the nose producing a continuous airflow through the nasal passage to hold the airway open.