

# Sleep Apnea and the Dental Office

## I want to breathe!!

Presented by:

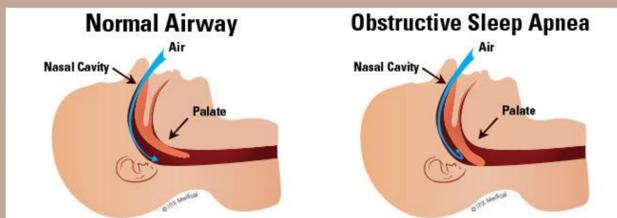
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### Obstructive Sleep Apnea (OSA)

One of the most common sleeping disorders that occurs when the collapse of the airway causes the airflow coming into the body to decrease or stop. This apnea can last anywhere from 10 seconds to minutes.



During this time, the individual's oxygen level drops resulting in hypoxemia (insufficient oxygen in the blood) and sleep disruption.

<http://www.weightlossny.com/obesity-risks/understanding-sleep-apnea>

### Treatment

#### CPAP

☆ A machine that increases air pressure in the throat.

☆ Ensures airway doesn't collapse when breathing in.

#### Oral application therapy

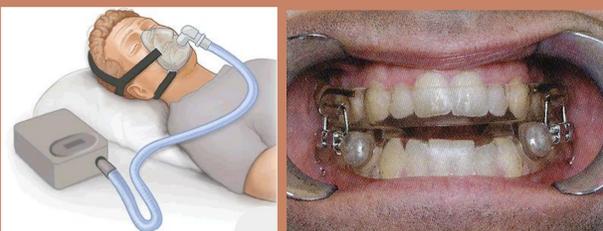
☆ Repositioning the lower jaw, tongue, soft palate and uvula.

☆ Increasing the muscle tone of the tongue.

#### Surgery

☆ Different types of surgeries focus on removing the part that is affecting the airway: part of tongue, uvula, soft palate, tonsils, base of tongue, etc...

☆ Craniofacial surgery-- breaking and repositioning the upper and lower jaws to create a larger airway.



<http://umm.edu/health/medical/reports/articles/obstructive-sleep-apnea>  
[http://en.wikipedia.org/wiki/Positive\\_airway\\_pressure](http://en.wikipedia.org/wiki/Positive_airway_pressure)  
Dental Management of Sleep Disorders by R. Attanasio and D.R. Bailey

### Signs and Symptoms

Nighttime symptoms may include the following:

- ✓ Snoring, usually loud, habitual, and bothersome to others
- ✓ Witnessed apneas, which often interrupt the snoring and end with a snort
- ✓ Gasping and choking sensations that arouse the person from sleep, though in a very low proportion relative to the number of apneas they experience
- ✓ Insomnia; restless sleep, with experiencing frequent arousals and tossing or turning during the night



Daytime symptoms may include the following:

- ✓ Waking up as tired as if you never slept
- ✓ Morning headache, dry or sore throat
- ✓ Excessive daytime sleepiness
- ✓ Daytime fatigue/tiredness
- ✓ Memory and intellectual impairment (short-term memory, concentration)
- ✓ Personality and mood changes, including depression and anxiety
- ✓ Gastroesophageal reflux
- ✓ Hypertension



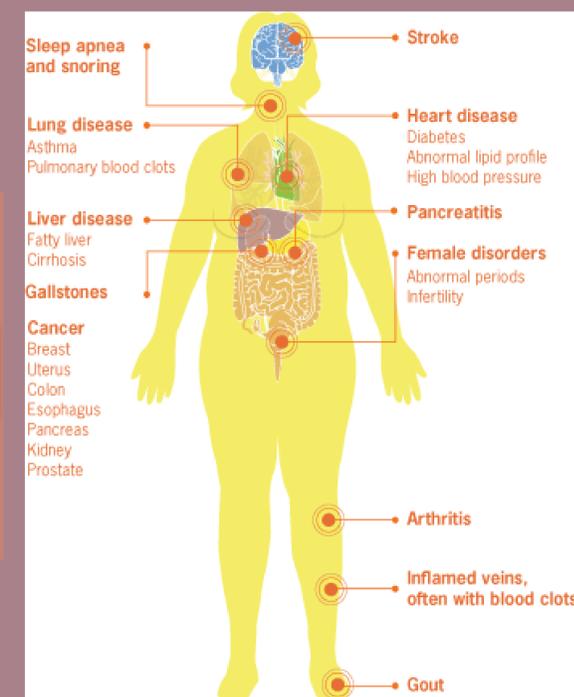
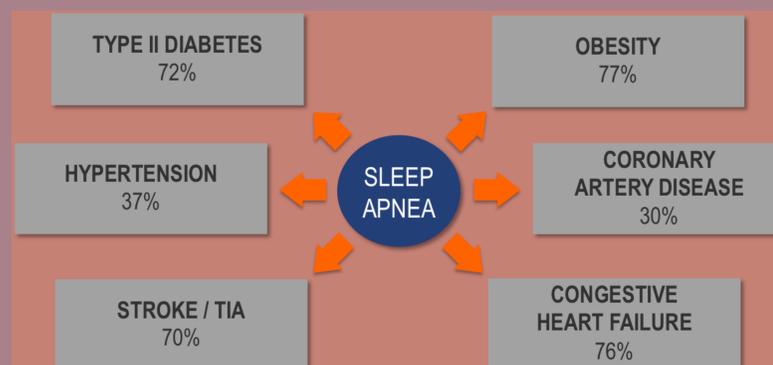
Many people don't think of snoring as a sign of something potentially serious, and not everyone who has sleep apnea snores.

[http://www.helpguide.org/life/sleep\\_apnea.htm#signs](http://www.helpguide.org/life/sleep_apnea.htm#signs)  
<http://www.mayoclinic.org/diseases-conditions/sleep-apnea/basics/symptoms/con-20020286>

<http://imatter.silvercross.org/wp-content/uploads/2013/03/Snoring.jpg>

<http://www.montway.com/transportation/sleep-apnea-bill/>  
<http://emedicine.medscape.com/article/295807-overview>

### Diseases



**Sleep apnea is a treatable condition that requires long-term management**

<http://www.nhlbi.nih.gov/health/health-topics/topics/sleepapnea/>

<http://www.fusionhealth.com/wp-content/uploads/2013/09/Sleep-Apnea-and-Chronic-Disease.png>

### The Role of the Dental Hygienist

Dental hygienists see patients frequently and routinely, so they are often the first to observe variation in the oral cavity.

Dental hygienists can make assessments by:

- Review patient's medical history.
- Dental hygienists can ask questions about sleep habits.
- Inspecting patient's airways.
- Observe irritation of oral tissues (snoring produces dryness).
- Dental hygienists can educate the patient about the importance of diagnosing and treating OSA.
- Refer patient to a specialist/sleep center



<http://www.citytowninfo.com/images/education-articles/dental-hygienist-education-requirements-2.jpg>  
The Role of the Dental Team in the Management of the Patient with Sleep Apnea by Nancy M. Costa-Larson, RDH, BS, MHA

### OSA Screening Questionnaire

(To assess risk of Obstructive Sleep Apnea)

Use the following scale to choose the most appropriate number for each situation:

0 = would never doze  
1 = Slight chance of dozing  
2 = Moderate chance of dozing  
3 = High chance of dozing

Situation	Chance of dozing
Sitting and reading	<input type="checkbox"/>
Watching TV	<input type="checkbox"/>
Sitting, inactive in a public place (e.g. a theatre or a meeting)	<input type="checkbox"/>
As a passenger in a car for an hour without a break	<input type="checkbox"/>
Lying down to rest in the afternoon when circumstances permit	<input type="checkbox"/>
Sitting and talking to someone	<input type="checkbox"/>
Sitting quietly after a lunch without alcohol	<input type="checkbox"/>
In a car, while stopped for a few minutes in the traffic	<input type="checkbox"/>
Total	<input type="checkbox"/>

Score:  
0-10 Normal range  
10-12 Borderline  
12-24 Abnormal

<http://www.docstoc.com/docs/107323575/Epworth-Sleepiness-Scale-THE-EPWORTH-SLEEPINESS-SCALE>

For more info contact:

American Academy of Sleep Medicine

<http://www.aasmnet.org/>

<http://www.sleepapnea.org/>

<http://sleepfoundation.org/sleep-disorders-problems/obstructive-sleep-apnea-and-sleep>

<http://www.1800snoring.com/>