## Five Steps to Better Sleep Health

**1** Recognise your sleep problem

e.g. snoring, holding your breath when sleeping, feeling tired during the day

**2** Your referral to the Woolcock

Your GP or dentist can refer you for a specialist consultation at the Woolcock Clinic

**3** See a Woolcock specialist

Your sleep specialist or ENT will discuss your problems and recommend tests

**4** Your sleep diagnosis

Come in for an overnight sleep study or other sleep testing or ENT assessment

**5** Your treatment plan

Specialist consultation to organise further diagnostic tests and/or create a treatment plan with the Woolcock's team of clinicians

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If you are interested in further information about becoming involved in our research studies or making a donation, please visit our website www.woolcock.org.au.

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# Sleep Surgery in adults

WOOLCOCK
LEADERS IN BREATHING & SLEEP RESEARCH

## IF I SNORE, DO I HAVE OBSTRUCTIVE SLEEP APNEA (OSA)?

Snoring is a common sign of obstructive sleep apnea (OSA). However, it is important to remember that not everyone who snores has OSA.

Only an overnight sleep study (polysomnography) can detect and confirm the presence of OSA. You should speak to your GP if you have any symptoms that bother you or your partner.

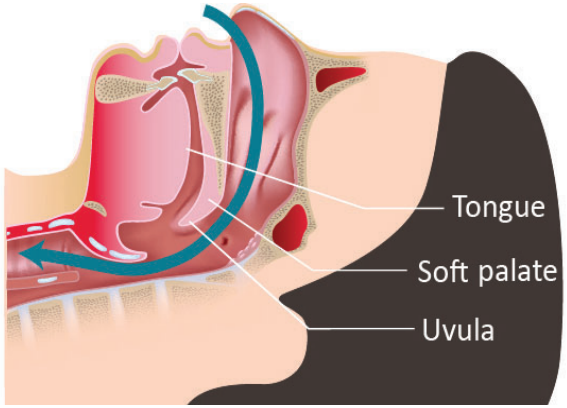
## DO I NEED SURGERY?

Surgery is usually considered after other measures have failed. It can include nasal surgery or mouth/throat surgery or both.

## HOW DOES SURGERY TREAT OSA?

Structural abnormalities of your upper airway can cause narrowing which you may not be aware of when you are awake.

During sleep, the soft parts of the airway may become floppy and collapse, leading to further narrowing and partial obstruction of your upper airway. Surgery for snoring or OSA aims to widen and stabilise the airway. It usually involves multiple sites and surgery may be required more than once.

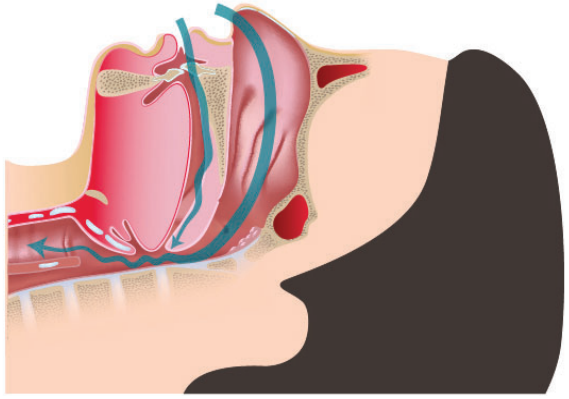



**NORMAL BREATHING** - Upper airway unobstructed

## WHAT ARE THE DIFFERENT SURGICAL OPTIONS FOR SNORING AND OSA?

Overall, multi-level upper airway surgery for OSA has similar quality of life outcomes to CPAP.

- Nasal surgery may reduce CPAP pressure requirements and increase a patient's ability to tolerate CPAP, which can often be uncomfortable. In selected cases, it can reduce snoring.
- Removal of tonsils and adenoids (adenotonsillectomy) can reduce snoring or the severity of OSA significantly in a select minority of adults.
- Modified uvulopalatopharyngoplasty (modUPPP) is a procedure that repositions tissues in the throat to widen the airway and is only considered in selected cases. ModUPPP can improve OSA in up to 80 percent of cases and may be predicted by examining the tonsil size, palate position and obesity.
- New techniques of tongue base reduction and lingual tonsillectomy using coblation technology have also shown improvements in the quality of life and severity of OSA. Other contemporary surgeries may include transpalatal advancement, variations of tongue and neck surgery, and surgery to the upper and lower jaws.



**SNORING** - Partial obstruction of upper airway

## HOW DO I KNOW WHICH TREATMENT TO CHOOSE?

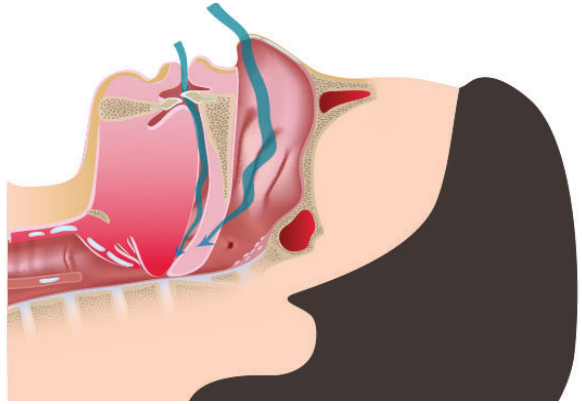
Ultimately, the decision about non-operative versus surgical treatments is based on individual factors. Customising the right treatment for your specific needs is vital to a successful outcome. The sleep specialists at the Woolcock Clinic will assist you in making the most appropriate decisions for your sleep health issues.

## OTHER TREATMENT OPTIONS?

- Continuous positive airway pressure (CPAP) therapy uses a mask worn during sleep which pumps air through the nose to keep the upper airway open
- Dental devices (Mandibular Advancement Splints) hold the jaw forward
- Lifestyle changes such as weight loss

Newer surgical options to implant a hypoglossal nerve stimulator are currently only available in a research setting. This promising new treatment involves an operation to implant a device into a patient's neck. The device is activated at night, to cause the tongue to move forward and enlarge the air passage of the throat.

To find out more, go to www.woolcock.org.au/clinic.



**OSA** - Complete obstruction of upper airway