

# Obstructive sleep apnea

In **obstructive sleep apnea (OSA)** there are pauses in breathing due to the obstruction of the upper airway. Interrupted snoring appears that is caused by breathing pauses.

### What consequences can it have?

Sleep is not restorative and leads to daytime drowsiness and excessive fatigue.

The person may fall asleep in normal daily life situations such as eating, talking, or watching a movie, or in high-risk situations, such as at work or while driving, which increases the risk of accidents.

The drop of oxygen during sleep can have long-term consequences on the heart, blood pressure, circulation, memory, and mood.

#### How can I know if I have OSA?

If someone has told you that you pause in breathing while sleeping or if you experience excessive sleep during the day, consult with your primary care team—they will conduct an examination and a sleep study.

Tests for diagnosis include:

- Polysomnography: The patient sleeps overnight at the hospital for recording and studying sleep patterns.
- 2. Respiratory polygraphy: Can be performed at home or in the hospital, depending on the case.

#### How is it treated?

The key is to adopt healthy lifestyle habits and follow recommendations:

 If overweight, losing weight may resolve the issue. Your primary care team will help you. • Sleep on your side. Apneas are more frequent when sleeping on your back.



- Ensure an adequate amount of **sleep** and maintain a **regular schedule**.
- Wait two hours after dinner before going to bed.
- Quit **smoking**: it inflames the airways and contributes to snoring and apneas.



- Avoid alcohol and stimulants as they worsen the problem.
- If possible, avoid sleep medication.
- In more severe cases, in addition to these recommendations, the treatment involves using a device while sleeping that provides a continuous air pressure, preventing the closure of the airway. It is called *Continuous Positive Airway Pressure*, **CPAP**.

## What follow-up checks should be done?

Follow-up should be conducted in primary care and pulmonology, focusing on sleep quality, discomfort, weight control, and other recommendations. If using CPAP, compliance and adverse effects should be monitored. The equipment supplier is responsible for maintenance.

Authors: Rosa Villafàfila, Marta Villanueva, Pepi Valverde, Anna M. Pedro, Montserrat Mas Pujol, Àngels Santos and CAMFiC Respiratory Diseases Group Scientific review: CAMFiC Respiratory Diseases Group Editorial Review: CAMFIC Health Education Group