



by **Todd C. Morehouse, MD**

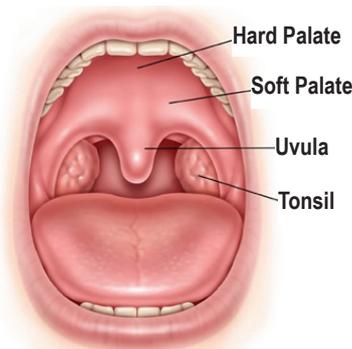
Tossing. Turning. Pillow over your head. Wishing you could get back to sleep, but that noise has been keeping you awake for hours. At some point in our lives, we have all experienced the effects of “second hand” snoring. Perhaps your spouse snores, or a travel mate on a trip made you tired for the big meeting the next day. Whoever is snoring, it is clearly a very disruptive and difficult problem to live with. Despite the fact that snoring is often joked about, the reality is, snoring is a very serious problem for many people, causing separate bedrooms, embarrassment when traveling, and a tremendous source of frustration and resentment. In addition to the strain snoring can put on relationships, it can also be a sign of a serious medical problem, obstructive sleep apnea (OSA).

Causes of snoring

There are two main causes of snoring: vibration and blockage (obstruction). When you hear someone snore, one possible source can be vibration of the soft palate and the uvula. The uvula is the structure that looks like a punching bag hanging in the back of the throat. The tissue on either side of the uvula is called the *soft palate*.

When the uvula is

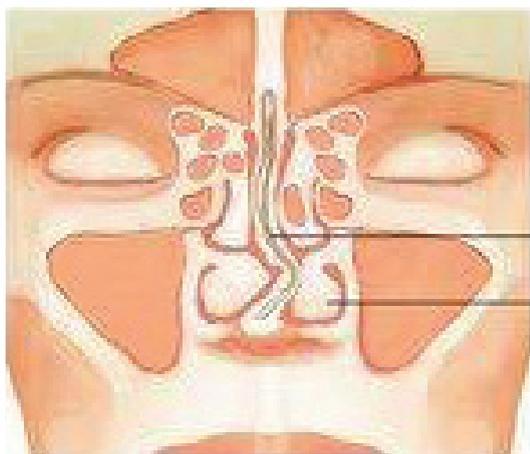
Snoring: What to Do About It



Dr Sonia S V

excessively long, or the soft palate is loose (a condition sometimes referred to as a redundant palate and uvula), these tissues can vibrate as air rushes past during mouth-breathing sleep. This vibration causes the audible noises associated with snoring.

Another cause for snoring is obstruction. This can occur at several different levels. The nasal cavity can be the source, in the form of a deviated nasal septum. This is a condition where the divider of the internal nasal cavity is crooked, causing a narrowing of one or both sides of the nose. People often have long histories of stuffy nose and, sometimes, allergy symptoms.



Deviated Nasal Septum
Inferior Turbinate Hypertrophy

Another factor that can contribute to nasal obstruction is enlargement of the turbinates, tissues that serve to humidify and warm incoming air. When they are too large, they can contribute to obstruction. Obstruction can also occur at the level of the

tonsils, or when the tongue is too large. All of these factors alone or in combination can cause snoring.

2 types of snorers

Snorers can be classified into two groups: those who snore and have sleep apnea (slowing down or stopping breathing while asleep), and those who simply snore and do not have sleep apnea (primary snoring). All people who snore do not necessarily have sleep apnea and, conversely, all people with sleep apnea do not always snore. Testing can be done to determine whether a patient has sleep apnea, or primary snoring.

Obstructive sleep apnea (OSA) when untreated, can cause high blood pressure, irregular heart rhythms, strokes, and car accidents (falling asleep at the wheel).

Common signs and symptoms of OSA are snoring, gasping for breath, awakening to a choking sensation, restless sleep, daytime fatigue, and morning headaches. Bed partners often no-

tice a stoppage in respiration that is very frightening.

OSA is usually treated in one of two ways: medically or surgically. Both approaches can be highly effective in reducing or eliminating OSA, and restoring restful sleep.

People who have snoring

without OSA (primary snoring) are treated mostly with surgical approaches. There are some oral appliances that can help with snoring; however, they must be worn nightly to be effective. The procedures for snoring are minimally invasive and, in some cases, can be performed in the office under local anesthesia. The outpatient and in-office procedures include surgeries to address a redundant palate and uvula as well as the deviated septum.

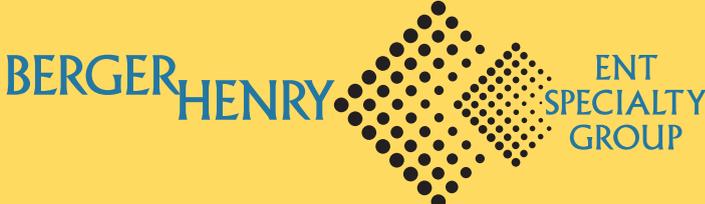
Where to get help

Consult with an otolaryngologist (Ear Nose and Throat specialist, or ENT). An ENT can ask questions to establish suspicion for snoring or sleep apnea. A thorough examination of the head and

neck can assess the presence or absence of possible anatomic causes of snoring. Medications can be given. Appropriate testing can then be ordered. Upon follow-up, further recommendations can be made based on a comprehensive history, physical examination, and interpretation of test results.

Snoring is really no laughing matter. It is a severe strain on many relationships. It can also be a sign of serious underlying medical conditions. Whether it is primary snoring, or OSA, snoring is not something anyone has to live with. If you or someone you know snores, schedule an appointment and get checked out. Restful sleep does not have to be a dream anymore.

Dr. Todd C. Morehouse is a Board Certified Otolaryngologist and an attending surgeon at Abington Surgical Center, Blue Bell Surgical Center, Chestnut Hill, Mercy Suburban, Montgomery and Roxborough Memorial Hospitals. He is also an affiliate staff member at Abington Memorial Hospital. He graduated from Muhlenberg College where he established and served as president of the Muhlenberg Premedical Society. Upon completing his residency at Philadelphia College of Osteopathic Medicine, Dr. Morehouse received an award for excellence from the American Osteopathic College of Otolaryngology. He trained in all aspects of general and pediatric otolaryngology, including endoscopic sinus, otologic, head and neck, and facial plastic surgeries.



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