Snore Centre Patient eNewsletter

January 2013

SLEEPING DISORDERS CENTRE
Sleep, the best Medicine!

Snoring Association Seeks Participants For Nationwide Sleep Apnoea Survey

The British Snoring and Sleep Apnoea Association is launching a UK-wide survey into public awareness of the condition, with the aim of testing public knowledge about signs, symptoms and health risks associated with sleep apnoea.

To make it the most comprehensive survey yet, the association is looking for adult participants from all walks of life, saying participation will be valuable whether people have the condition or think they may have it, know somebody who has it, or even know nothing at all about it.

Marianne Davey, Msc, director of the British Snoring and Sleep Apnoea Association, said around half the UK population snores, or is directly affected by a snorer:

"Sleep apnoea is an everyday condition that no-one has ever heard of. Quite a few of us suffer it and many of us come across it in friends and family members, yet so few of us know what it is or even what it's called. So we're now launching a UK-wide public survey into public awareness of sleep apnoea, what it is and how to deal with it, which will help us tackle the problem. We welcome a wide range of participants, from those who know they suffer from sleep apnoea to those who've never even come across it."

The survey will run until the end of January and the results will be published during National Stop Snoring Week, which will run from April 22 to 27.

The survey can be found on the front page of the association's web site at:

www.britishsnoring.co.uk

SDC @ 150 Harley Street

Michael Oko has established a Sleeping Disorders Centre clinic at London's most respected medical address to cater for private patients in need of diagnosis and treatment for sleep apnoea and other sleep disorders

Clinics on Fridays and Saturdays
Call 0203 0753 150 to arrange an appointment
Or book online at: www.150harleyst.com/michael-oko

ENT at 150, 150 Harley Street, London W1G 7LQ

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CPAP Therapy During Preganancy May Increase Fetal Well-Being

A new study suggests that treatment of mild sleep-disordered breathing with continuous positive airway pressure (CPAP) therapy in pregnant women with preeclampsia improves fetal activity levels, a marker of fetal well-being.

Results show that the average number of fetal movements increased from 319 during a night without CPAP treatment to 592 during the subsequent night with CPAP therapy. During the course of the night without CPAP treatment, the number of fetal movements decreased steadily by 7.4 movements per hour. In contrast, the number of fetal movements increased by 12.6 per hour during the night with CPAP therapy.

"What would otherwise have been considered clinically unimportant or minor 'snoring' likely has major effects on the blood supply to the fetus, and that fetus in turn protects itself by reducing movements," said Colin Sullivan, PhD, the study's principal investigator. "This can be treated with readily available positive airway pressure therapy and suggests that measurement of fetal activity during a mother's sleep may be an important and practical method of assessing fetal well-being."

The three-part study, appearing in the January issue of the journal SLEEP, began with the validation of a fetal activity monitor against ultrasound in 20 normal, third-trimester pregnant women. The next phase of the study measured fetal movement overnight in 20 women with moderate to severe preeclampsia and 20 matched control subjects. Results show that the number of fetal movements during maternal sleep was significantly lower in the preeclampsia group (289) than the control group (689).

In the final phase of the study, fetal movement was measured on consecutive nights in 10 women with moderate to severe preeclampsia, the first night without treatment and the second night with nasal CPAP therapy. The women had mild sleep-disordered breathing with an apnea/hypopnea index of 7.0 breathing pauses per hour of sleep. A minimal mean CPAP pressure of 7 cm H2O was needed to eliminate upper airway obstruction and airflow limitation.

"Maternal SDB represents a unique opportunity to study the effect of in utero exposures on postnatal development and future risk. This has major implications for public health," Louise M. O'Brien, PhD, MS, associate professor at the University of Michigan, wrote in a commentary on the study. "It raises the possibility that a simple, noninvasive therapy for SDB may improve fetal well-being."

According to the authors, preeclampsia affects about five percent of pregnancies and is dangerous for the mother as well as a risk factor for fetal growth restriction. It involves the onset of high blood pressure and protein in the urine after the 20th week of pregnancy.

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