

## **Snoring, Upper Airway Resistance Syndrome & Sleep Apnoea**

Upper airway resistance syndrome, snoring and sleep apnoea are related conditions. However, the consequences of each are different.

*Snoring* is the noise produced by vibrating tissue as air goes through the throat while someone is asleep.

*Upper Airway Resistance Syndrome (UARS)* is a condition halfway between pure snoring and sleep apnoea. A person with UARS needs to make an extra effort to breathe because of narrow airways. This extra effort during sleep often makes the person feel tired the next day.

*Apnoea* means stopping breathing.

*Sleep Apnoea* refers to a condition which involves snoring and stopping breathing regularly while the person is asleep. The oxygen levels in the body may drop because the person is not breathing properly.

"It is a delicious moment, certainly, that of being well-nestled in bed and feeling that you shall drop gently to sleep. The good is to come, not past; the limbs are tired enough to render the remaining in one posture delightful; the labor of the day is gone."

Leigh Hunt

# Snoring



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## *Snoring*

Snoring is very common. *Habitual snoring* (snoring which occurs almost every night) is found in approximately 20% of the population. This means that about 1 out of every 5 people snore almost every night. Snoring is more common in men (1 in 4) than in women (1 in 6).

Snoring tends to increase after the age of 30 up to approximately 65 years of age. However, it tends to diminish after 65 years of age.

*Factors which make snoring more likely to occur.*

Being overweight, large tonsils, a small receding chin, drinking alcohol in the evening, having a blocked nose, sleeping tablets and sleeping on your back all make snoring more likely to occur.

*Does snoring lead to other medical conditions?*

In most cases snoring does not cause ill health. High blood pressure is more common amongst snorers than non-snorers, however, it is not known if snoring actually causes high blood pressure.

In some heavy snorers the noise itself can lead to disrupted sleep and the person feels tired the next day.

# *Treatment for Snoring*

**From a practical point of view, snoring does not bring about ill health. It is often only a problem when it is a nuisance for the people around the snorer. As snoring is not really a health problem, the person may decide to do nothing about it. Weight reduction, avoidance of alcohol in the hours before going to bed and not sleeping on your back are steps which can help reduce snoring.**

**Alternatively a surgical treatment for snoring can be undertaken. It is important to understand that surgery is treatment for snoring and not for sleep apnoea. In our unit surgery is considered an option for the 'noise making' of snoring, not for the stopping breathing which occurs in sleep apnoea.**

**There are two similar techniques at present which are widely used by ear, nose and throat (ENT) surgeons (the specialists who do the surgery). These have complex names: “uvulopalatopharyngoplasty” (UPPP) and *laser uvulopalatopharyngoplasty*. UPPP is a technique which requires a general anaesthetic and a few days in hospital. The surgeon removes the tonsils, if present, and reshapes the palate reducing the amount of soft tissue in the throat.**

***Laser uvulopalatopharyngoplasty* or *laser treatment* is usually performed under general anaesthetic. A strip of soft palate is treated with a laser beam which causes inflammation and scarring. This usually makes the floppy part of the throat stiffer which reduces snoring. The laser treatment can be painful for a few days after treatment.**

**There is a small risk that the treatment will not be successful. It is also possible that as time passes by, there may be a recurrence of snoring after treatment. As far as *laser treatment* is concerned the technique is relatively recent and long term side effects of the treatment are not well known.**

