

Sleep Apnea Treatment: Patient FAQ

At the practice of Dr. Zachary Hodgins, our team has researched and compiled information from **SomnoMed** and other leading organizations on the forefront of sleep health. This information can help determine if you or someone you know is suffering from these conditions... and how to improve these conditions, so you can start enjoying a good night of sleep, night after night.

What causes OSA?

Obstructive Sleep Apnea (OSA) is a breathing disorder, which occurs during sleep, due to the narrowing or total closure of the airway.

OSA is when the airway becomes completely blocked and breathing stops. The brain then detects the lack of oxygen and prompts a momentary arousal to draw breath. Although OSA sufferers may experience hundreds of apnea episodes per night, they are unlikely to remember any of them. In fact, if the sufferer lives alone or sleeps separately they may not be aware of their condition, even after many years.

Snoring can be a symptom of OSA and is a noise created by the partial blocking of the airway. When you fall asleep your muscles relax, including those that control the tongue and throat. The soft tissue at the back of your throat can sag, narrowing the airway. Incoming air then makes the tissue at the rear roof of the mouth (the soft palate), the flap of skin hanging from the palate (uvula) and the throat vibrate – a sound we know as snoring.

Snoring is often no greater problem than the noise itself. However, loud snoring may be a sign of a more serious problem – OSA.



OSA



If the muscles relax too much, the airway can collapse and become blocked, obstructing breathing.

Normal



During normal sleep, the muscles that control the tongue and soft palate hold the airway open.

Snoring



When these muscles relax, the airway narrows. This can lead to snoring and breathing difficulties.

To download and print an informational brochure, [click here](#).

Do you suffer from OSA?

OSA is notoriously under-diagnosed with less than 25% of cases in the community being identified ¹.

- Do you and your partner sleep in separate rooms due to loud snoring?
- Do you doze off unintentionally during the day?
- Do you often wake up feeling tired or having a headache?
- Do you have problems concentrating for long periods of time?

If you answer yes to any of these questions, you may be suffering from sleep apnea and it is essential that you

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seek the right treatment option.

To download and print an informational brochure, [click here](#).



Did you know? Health Impacts of OSA:

- Regular snorers have a 33% increased risk of cardiovascular disease. ¹
- Patients with OSA are four times more likely to have a heart attack. ²
- 40-80% of stroke sufferers also suffer from OSA. ²

OSA is a serious medical condition that can have a significant impact on quality of life, placing unnecessary strain on relationships between bed partners, family and the work place.

If you have been heard to gasp for breath at night, are excessively sleepy during the day, or display symptoms of OSA you should consult your general practitioner, sleep specialist or ENT surgeon.

Some of these symptoms are:

- Loud snoring
- Excessive daytime sleepiness
- Depression
- Fatigue
- Reduced resistance to infection.



Is it right for me?

Is the SomnoDent[®] MAS the right treatment option for me?



FLEX



EDENTULOUS



ACRYLIC

If you suffer from obstructive sleep apnea (OSA) or snore, the SomnoDent[®] MAS should benefit you. It will

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almost certainly put an end to your snoring and will most likely eliminate or significantly reduce your OSA. For your bed partner this means peace and quiet again and a better night's sleep. For you, it will mean better quality sleep. As a result, you will be less likely to suffer from headaches and daytime sleepiness and your ability to concentrate will improve.

If you have tried **CPAP** and found it uncomfortable, wake up to a brilliant alternative treatment for OSA. The difference in comfort and tolerance will astound you.

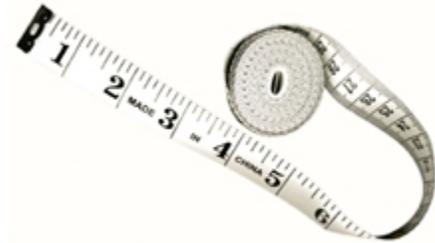
A study conducted by Dr Edmund Rose at the University of Freilberg 2004 proposed that the ideal patient for MAS therapy is one with a AHI < 25 and BMI < 30 with good dentition. ¹ Therefore, when identifying how effective the SomnoDent device is going to be for you, we recommend looking at 3 key areas:

1. Severity of OSA.

The American Academy of Sleep Medicine recommend the use of oral devices such as the SomnoDent[®] MAS for mild-to-moderate OSA (AHI < 25), or for patients with severe OSA who are either unable to tolerate CPAP or refuse treatment with CPAP.

2. Body Mass Index.

If BMI is below 30 (which means that a person is not obese) the probability that the device will work is higher. To calculate your BMI please use this [chart](#).



3. Your dentition.

SomnoMed defines good dentition as at least 6 teeth on the lower mandible with no periodontal disease.

These three indicators offer a good guide to screening patients for oral device therapy and may increase the efficacy outcome of the treatment.

To download and print an informational brochure, [click here](#).

The Development of the SomnoDent[®] MAS

SomnoMed was formed in 2004 to commercialize its mandibular advancement splint, the SomnoDent[®] MAS. SomnoMed wholly owns all intellectual property rights to the MAS, which was originally developed by orthodontist, Dr. Richard Palmisano.

Currently, there are three MAS gold standard treatments which have been developed, each with different clinical indications catering for the varied needs of OSA sufferers. These include the SomnoDent[®] MAS Acrylic, SomnoDent[®] MAS Flex, and SomnoDent[®] MAS Edentulous.

[Click here](#) to visit the SomnoDent[®] Product Guide.

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Do You Have a Sleep Disorder?

Under diagnosed and frequently dismissed simply as harmless yet annoying snoring, “obstructive sleep apnea” (OSA) is a very dangerous condition.

If you or a loved one snore loudly at night, please have a sleep study done to rule out this potentially fatal condition.

Do I have a Sleep Disorder?

I have been told that I snore

I have been told that I stop breathing when I sleep, although I may have no recollection of this

I am always sleepy during the day, even if I sleep throughout the night, and get 7 or more hours of sleep

I have high blood pressure

I have been told that I sleep restlessly. I am always tossing and turning while asleep

I frequently awaken with headaches in the morning

I tend to fall asleep during inappropriate situations

Others and/or I have noticed a recent change in my personality

I am overweight

*If three or more of these apply to you, there may be cause for concern.
Please let us know so that we can discuss this further.*

We encourage you to read additional patient brochures for more information. Other online patient brochures provide detailed information about how the body works, the effects of a lack of oxygen during sleep, and how the various SomnoMed options provide comfortable alternatives to sleep disorder treatment. ■