

How is OSA diagnosed?

OSA is diagnosed by an unattended in-home sleep study (polygraphy) that involves recording the measurement of different physiological parameters of the person while they sleep.

Several functions are recorded:

- ⊗ Heart rate
- ⊗ Oxygen levels in the blood
- ⊗ How fast you are breathing, snoring, etc.

How is OSA treated?

- ⊗ Advice to change particular habits, weight, and lifestyle (exclusively doing this may only work in patients with mild OSA, although it is needed in all cases).
- ⊗ Surgery this is only justified in patients with anatomical abnormalities, i.e. micrognathia, maxillofacial deformities, tonsillar hypertrophy, etc.
- ⊗ CPAP (Continuous Positive Airway Pressure System device) is the most common and effective treatment. A CPAP-delivering device is a machine that keeps open the respiratory airway comfortably, supplying pressurised air. There is robust evidence that CPAP improves the quality of life and sleep of the patient and their bed partners. OSA can be eradicated with CPAP. People on CPAP can lose weight, prevent, improve, or solve, cardiovascular, metabolic, and psychosocial problems, among other conditions (including erectile dysfunction).



SLEEPCARE Clinic of Sleep and Respiratory Medicine has the solution for this problem. We can offer you the following:

- ✔ Free screening.
- ✔ Specialised medical consultation.
- ✔ At home sleep studies.
- ✔ If OSA is diagnosed and a CPAP device is needed, the patient’s clinical, lifestyle, and preferences will be evaluated to choose, between a wide range of equipment and costs, the appropriate device for the patient (whether it is yourself or your relative).
- ✔ Education on OSA, its causes, complications, and treatment.
- ✔ Education on the use, care, and resolution of basic problems of your CPAP device.



SLEEPCARE Clinic of Sleep and Respiratory Medicine

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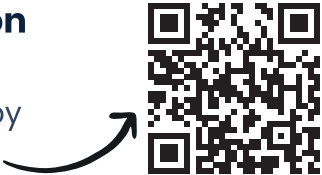


Do you snore?
Do you wake up tired?
Do you fall asleep during working hours?

YOU MAY BE SUFFERING FROM OBSTRUCTIVE SLEEP APNOEA.

Then, this information is for you!

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Save the Earth for future generations! Please don't throw it away; pass this flyer on!

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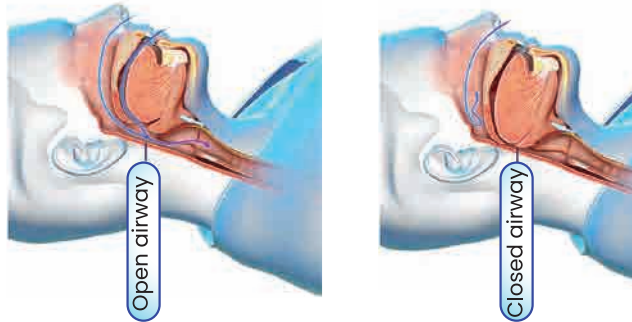


What is Obstructive Sleep Apnoea (OSA)?

It is a severe condition characterised by pauses in your breathing whilst you sleep, accompanied by asphyxiation. The events ceased by the person unconsciously waking up, interrupting their sleep.

Why does OSA occur?

Because the muscles of the throat and tongue relax during sleep, they obstruct (block) the airway.



Obstructive Sleep Apnoea (OSA)

Because too much fatty tissue (i.e. overweight) reduces the size of the airway.



Alcohol, smoking, and sleeping pills consumption.



What are the consequences of OSA?

If a person suffers from asphyxiation and does not enjoy a restful sleep, they may also suffer from:

Excessive daytime sleepiness.



Difficulty in learning and remembering tasks.



Depression, moodiness



Low sexual drive (libido)

Traffic and occupational accidents



Hypertension, heart attacks, arrhythmias, strokes, heart failure, diabetes, obesity, sudden death, dementia, cancer, etc.



OSA's typical symptoms are:

- ⊗ Loud snoring
- ⊗ Excessive daytime sleepiness
- ⊗ Witnessed episodes of pauses in breathing during sleep (apnoeas)
- ⊗ Restless sleep
- ⊗ High blood pressure
- ⊗ Falling asleep while doing daily life activities such as driving, watching TV, or attending meetings
- ⊗ Passing water several times during the night
- ⊗ Headaches, palpitations, obesity, low mood, low sexual drive, complex social relationships, memory loss, etc.

OSA may occur in people with anatomical abnormalities (tonsillar hypertrophy or adenoids, maxillofacial deformities, tumours of the pharynx and throat, etc.); or brain or neurological conditions that can generate difficulty breathing such as stroke, cerebral palsy, Down's syndrome, dementia, etc.