BY COLLEEN MULLARKEY

Uncovering OSA in Women

The demands of work and family life can be exhausting, but a potentially deadly condition could be another reason why some women feel as if they're running a marathon day after day.

Two percent of women in the U.S. aren't getting enough shut-eye because of obstructive sleep apnea (OSA). Not only does it disrupt your beauty sleep, but it could contribute to serious health problems such as heart failure, stroke, high blood pressure, and diabetes.

Don't lose any more sleep worrying about the risks; visit your doctor who can recommend sleep testing and treatment so you can get the rest you deserve.

TOM WHALEN

What is OSA?

OSA is a sleep disorder which interrupts breathing briefly and repeatedly during sleep. People with OSA awake several times a night because their airways collapse or get blocked, causing them to stop breathing. Other symptoms include feelings of choking and loud, habitual snoring. People with OSA may experience daytime sleepiness, fatigue, and morning headaches as a result.

Many women and doctors overlook OSA as a potential problem because some women don't exhibit the typical symptoms. For example, women with OSA are less likely than men to report pauses in breathing or loud snoring. Instead, they're more likely to have a history of depression or a problem with insomnia.

Hormonal Havoc

These symptoms may appear or worsen if you're experiencing hormonal changes, such as pregnancy or menopause. One-third of women who have never snored will begin snoring during pregnancy. Some of these women will develop OSA as the pregnancy progresses. The condition is more likely to surface if you had a high body mass index (BMI) before the pregnancy. It's imperative to seek treatment because severe sleep apnea can decrease oxygen levels and affect your baby's growth.

Even long after the pitter-patter of little feet, OSA can arise. The rate of OSA is three times higher in postmenopausal women. Some doctors suggest postmenopausal weight gain may be a factor, but many also think it's connected to lower estrogen levels.

Pay attention

Don't ignore your sleep deprivation. Evidence indicates that women tend to underreport their symptoms, which contributes to underdiagnosis. If you experience any OSA warning signs — whether you're welcoming a new baby, experiencing menopause, or anywhere in between — bring them to your physician's attention.

He or she will most likely refer you for a sleep study, which is called a polysomnogram. Sleep specialists will use this test to observe your sleep patterns overnight with equipment to monitor your breathing and other vital signs.

If you have OSA, many treatment options can help ease your symptoms. The most common and well-established treatment is a continuous positive airway pressure device, also known as CPAP. You will use a mask over your nose or mouth to gently blow air into your airways to keep them open at night.

Other treatment options include oral surgery which removes excess tissue in the throat or mouth to widen the airway. You also could consider wearing oral devices nightly. Similar to an orthodontic retainer, these small appliances reposition your jaw or tongue to help prevent your soft throat tissues from collapsing.

Maintaining a fit lifestyle is another key treatment component. Cigarette smoking, alcohol use, obesity, and weight gain can contribute to or hasten OSA. Eliminating these factors will put you on the path to good health and a good night's sleep. ■

Adapted from http://sleepeducation.com *and the Trover Health System.*

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notes

Your doctor or therapist has given you this patient education handout to further explain or remind you about an issue related to your health. This handout is a general guide only. If you have specific questions, discuss them with your doctor or therapist.