



Sleepy?

Treatment can help put the spark back in your life

FOR YEARS, being tired was a normal part of Dave Hargett's life. He woke up tired and went to bed tired. He often fell asleep riding the train home from work, coughing and gasping as he awoke with a jolt.

After awhile, the constant fatigue began to take a physical and emotional toll. Hargett had headaches, especially in the morning, and he had trouble concentrating. He felt as if he was living in a mental fog.

Deciding something must be wrong—a healthy person should not feel that tired all the time—Hargett finally sought medical help. The diagnosis: sleep apnea, a potentially dangerous disorder that can lead to serious health problems if not treated.

THE PROBLEM

When a person has obstructive sleep apnea (OSA)—the most common type of apnea—soft tissue at the back of the throat can collapse, restricting or shutting off the airway during sleep.

With OSA, a person tries to breathe, but the lungs can't get enough air. As the blood gets less oxygen and more carbon dioxide, the brain rouses the sleeper enough to breathe—jarring the person from sleep to wakefulness again and again. OSA can cause a person to stop breathing for 10 seconds or more during sleep, sometimes hundreds of times a night.

“Most patients don't even understand it happens. The arousal is so brief that they feel like they're sleeping through the night without realizing they're being awakened a number of times,” says Hargett, who is chairman of the American Sleep Apnea Association (ASAA).

OSA is more common in overweight men older than 40. But apnea can occur at any age, at any weight and in both men and women, according to Hargett. The condition may also run in some families.



Snoring subsides, sleep returns with new surgical technique

Habitual snoring may affect up to 40 percent of adults—and their partners. Often caused by the vibration of the soft palate (the back portion of the roof of the mouth), snoring not only disrupts a healthy sleep process but can suggest serious long-term health risks as well. High blood pressure, heart disease, weight gain and energy deficiencies all can result from chronic snoring issues.

Doctors have been able to treat chronic snoring in recent years by stiffening the soft palate, but these procedures usually prove highly invasive and potentially painful. But the Pillar Procedure, a new treatment being used for the first time in Polk County by **Serge Jean, M.D., Ph.D.**, a Watson Clinic otolaryngologist/head, neck and facial plastic surgeon, offers a safe, effective alternative.

In the Pillar Procedure, the physician stiffens the soft palate in a way that produces little or no discomfort. During the procedure, three tiny inserts are placed in the soft palate. These inserts provide structural support that greatly reduce the vibrations that cause snoring. The inserts are designed to be invisible and have no effect on speech or swallowing.

Dr. Jean, a graduate of Harvard Medical School with training at Johns Hopkins University Hospital, believes the Pillar Procedure offers a solution for many people who snore. “The procedure itself is completed during an office visit in under half an hour,” he says, “and results in the permanent reduction of a patient’s snoring intensity.”

The material that makes up the

implants has been used in the medical field for more than 50 years.

By alleviating the snoring, the procedure allows patients and their partners a more productive rest and, in turn, increases their levels of energy and alertness.

More than 9,000 people across the country have had this procedure performed to help them. Studies show that 75 to 95 percent of all patients experienced satisfaction with their decrease in snoring.

“I’ve found patient response to be tremendous,” Dr. Jean says. “I have patients and their spouses telling me they haven’t slept this well in many, many years.”



Serge Jean, M.D., Ph.D.

SOUNDS OF TROUBLE

For years Hargett snored—“like a freight train,” he was told. In addition to extreme daytime sleepiness, loud snoring is among the most common sleep apnea symptoms.

“Snoring is almost always a sign of obstructive sleep apnea,” says **Eberto Pineiro, M.D.**, a Watson Clinic neurologist and medical director of the Watson Clinic Sleep Disorders Center.

An even clearer signal that you may have the disorder is when someone tells you that you stop breathing during sleep.

Other symptoms can include:

- Choking or gasping sounds during sleep.
- Forgetfulness.
- Frequent urination at night.
- Mood changes or irritability.
- High blood pressure.

POTENTIAL RISKS

Left untreated, sleep apnea can be dangerous—even life-threatening—because of several associated risks, including impaired driving. “Compared with people who don’t have sleep apnea, the risk of car accidents is greater for people who have the condition and aren’t treated for it,” Dr. Pineiro says.

This holds true even if those people don’t think that they are sleepy, he adds. While they may not actually fall asleep behind the wheel, people with untreated sleep apnea may be slower to react to hazardous driving situations.

Another significant problem linked to sleep apnea is high blood pressure. Other health risks include impaired thinking and cardiovascular difficulties, such as heart attacks, strokes and heart failure.

TREATMENTS CAN HELP

According to the ASAA, sleep apnea is often undiagnosed, so millions of people may not be getting the help they need. If you suspect you have sleep apnea, tell your doctor, advises Dr. Pineiro. “Call the Watson Clinic Sleep Center for proper evaluation,” he says.

The most common treatment is continuous positive airway pressure, or CPAP, therapy. Each night you sleep with a mask over your nose, mouth or both while a toaster-size machine blows air into your body. The flow of air creates enough pressure when you inhale to keep your airway open.

Lifestyle changes, such as avoiding alcohol and smoking, or losing weight if you are overweight, may also help. Other options include dental devices that keep the airway open or, sometimes, surgery.



Eberto Pineiro, M.D.

FEELING BETTER

These days Hargett helps spread the word about sleep apnea. With CPAP treatments, his fatigue, headaches, snoring and other symptoms disappeared, he says.

“I became much more like my old self,” Hargett says. “I got my life back.”

MORE >> The Sleep Disorders Center is located at Watson Clinic’s main campus. For more information or to make an appointment, call (863) 680-7627.



Never too late for a good night's sleep



Getting some natural light in the afternoon can help improve sleep.



If you worry at night, jot down your concerns in a “worry book.”



If you enjoy caffeinated drinks, have them earlier in the day.

CHANGE COMES WITH AGE, and that can be a good thing. No matter what your age, though, you’ll probably never grow tired of a good night’s sleep.

“But many older adults still sleep less than they should,” says **Eberto Pineiro, M.D.**, a Watson Clinic neurologist and medical director of the Watson Clinic Sleep Disorders Center.

There are many possible reasons. For example, as people age they often have trouble falling asleep, spend less time in deeper sleep and awaken more often at night than younger folks, according to the National Institute on Aging (NIA).

But older people need as much sleep as younger adults do—on average seven to nine hours per night.

HOW’S YOUR SLEEP?

Insomnia is the most common sleep complaint, according to the NIA. If you have insomnia, you might: ♦ Take a long time falling asleep (more than 30 to 45 minutes). ♦ Wake up often during the night. ♦ Wake up early, unable to fall asleep again. ♦ Wake up tired.

Insomnia may be caused by stress, anxiety, depression, disease, pain, medication, poor sleep habits or other problems, notes the National Sleep Foundation.

Dr. Pineiro says that underlying disorders, such as sleep apnea, a treatable condition in which breathing pauses during the night, can also cause sleep troubles.



Eberto Pineiro, M.D.

Medical problems or medications for conditions such as high blood pressure, colds or allergies may interfere with restful sleep as well.

GET A GOOD NIGHT’S SLEEP

To improve your sleep, try some changes in your sleep habits, such as these suggested by Dr. Pineiro and other experts:

- Go to bed and get up at the same times each day.
- Exercise regularly, but finish at least three hours before bedtime.
- Start a relaxing bedtime routine, such as reading or listening to soothing music.
- Try to get some natural light in the afternoon.
- If you worry at night, write your

concerns in a “worry book” and close it until morning.

Don’t just toss and turn, either. If you’re still awake and not drowsy within 15 minutes after going to bed, get up, and return to bed when you’re sleepy.

WHEN TROUBLES PERSIST

Poor sleep isn’t a normal part of aging, experts say. Dr. Pineiro advises, “If you have concerns or if your sleep problems last for more than two to three weeks and leave you too tired to function normally, see a doctor.”

What about sleeping pills?

Prescription sleeping pills may be an option if you have trouble falling asleep, but they’re not considered a long-term answer.

Talk to your doctor. Some sleeping pills may have side effects that are particularly dangerous for older adults, such as an increased risk for falls. Even nonprescription sleep aids can be a problem for some older adults, according to the National Sleep Foundation.

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