



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Caerdydd a'r Fro
Cardiff and Vale
University Health Board

LLANDOUGH HOSPITAL

Lung Function Sleep Apnoea Service

Patient's Handbook
Information Guide

Appointment queries: 02921 825421

Sleep Technician: 02921 825806 | sleephelp.cav@wales.nhs.uk

CONTENT

3 WHAT IS OBSTRUCTIVE SLEEP APNOEA

4-5 EFFECTS OF OSA AND TREATMENT

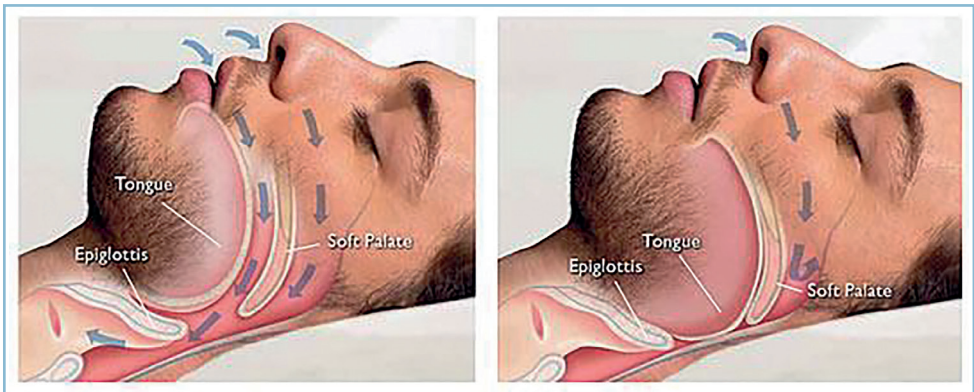
6 RESPONSIBILITIES AS A PATIENT

7 DRIVING WITH SLEEP APNOEA

WHAT IS OBSTRUCTIVE SLEEP APNOEA?

Obstructive Sleep Apnoea (OSA) occurs when a person stops breathing during their sleep because their airway collapses upon itself. This stops the air from reaching the lungs presenting as a choking sensation or restlessness. Complaints of loud snoring and periods of stopping breathing may be noted from your partner.

After a period of time, the brain wakes you up to a light sleep to restore the airflow because of the lack of oxygen in the blood. The collapsing occurs again as you fall back into a deeper sleep and this cycle occurs all night although you might not be aware of it.



NORMAL BREATHING

During sleep, air can travel freely to and from your lungs through your airways.

OBSTRUCTIVE SLEEP APNOEA

Your airway collapses, stopping air from traveling freely to and from your lungs and disturbing your sleep.

WHAT CAUSES THE AIRWAYS TO COLLAPSE DURING SLEEP?

- Large tissue at the back of the throat e.g. tonsils, uvula
- Excess fatty tissues around the neck – more likely in overweight individuals
- Nasal obstructions
- Certain facial bone structures e.g. recessed chin
- Excess alcohol or drugs
- Poor muscle tone to hold the airways open

WHAT EFFECTS DOES IT HAVE ON THE SUFFERER?

- Daytime sleepiness
- Irritability
- Morning headaches
- Sexual dysfunction
- Lack of concentration
- Increased night time urination

WHAT EFFECTS DOES IT HAVE ON HEALTH?

Besides the symptoms outlined above, if you do not receive treatment for OSA there is an increased likelihood of:

- High blood pressure
- Heart disease and heart attacks
- Stroke
- Fatigue related accidents at work or driving
- Type 2 Diabetes
- Decreased quality of life

HOW IS IT TREATED?

CPAP therapy is the best known treatment of OSA. This is provided by a machine that delivers a flow of air set at a pressure to overcome the obstruction during sleep. The pressure is determined by the severity of the sleep apnoea and symptom control.

It is delivered through a mask that covers your face or nose.



BENEFITS:

- Snoring reduced
- Breathing and oxygen levels controlled
- Restful sleep
- Quality of life improves and health risks reduced

Although sleep apnoea is a potentially life threatening condition it can be easily treated. Once treatment has begun you should soon notice an improvement in daily life.

You will need to use your CPAP machine every time you go to sleep to get the benefits and it is unlikely you will come off treatment unless the condition dramatically changes.

CPAP AND FITTING YOUR MASK

Mask leakage is common and is normally rectified by unclipping the mask and replacing it on your face. This adjustment is usually enough to ensure the gel lining is not creased and has a good seal against your face. If there is still some leak then it may be worth tightening slightly until the leak stops. Please be aware that over tightening can cause leaks too and also cause soreness on your face. If after adjustment and perseverance you are unable to get a good seal then the sleep technician will be able to give you tips on how to improve the mask fit (please call the number on the front of this booklet).



YOUR RESPONSIBILITIES AS A PATIENT



You must use your CPAP every time you sleep, **for at least 4 hours every night.**



Your CPAP machine is on long term loan to you from the hospital. It does not require any regular routine servicing, however it is your responsibility to regularly check the casing and electrical cable for any signs of damage.



If you notice any unexplained changes in the performance of your device, if it is making unusual or harsh sounds, if it has been dropped or mishandled, if water is spilled into the enclosure, or if the enclosure is broken, disconnect the power cord and discontinue use. **Contact the Lung Function department immediately.**



Your mask and machine must be kept clean and in good order (cleaning instructions explained below).



Significant changes in your weight can affect treatment, please inform a physiologist of any drastic changes in weight to ensure we are treating you correctly.

We endeavour to provide the best possible service to all our patients however you are responsible for your treatment. We cannot accommodate walk-ins, and you must call if you have a problem.

DRIVING WITH SLEEP APNOEA

It is illegal for anyone who is sleepy to drive, whatever the reason. Having Obstructive Sleep Apnoea Syndrome (OSAS) is associated with increased daytime sleepiness and reduced concentration levels leading to an increased chance of road traffic accidents.

If you have been diagnosed with moderate or severe **OSAS AND you are sleepy** you have a legal obligation to notify the DVLA. You will also need to inform your insurance company. If you fail to do so you are committing an offence.

IF YOU HAVE OSAS AND EXPERIENCE EXCESSIVE DAYTIME SLEEPINESS:

Step 1: You must refrain from driving until your symptoms have resolved

Step 2: Write to the DVLA and notify them that you have OSAS on **Drivers Medical Unit, DVLA, Swansea, SA99 1TU**

Step 3: DVLA will send you a SL1 form to complete and send back to them (you may need help completing this by a Sleep Technician)

Driving may resume when you are compliant with treatment and sleepiness has improved

For further information: <https://www.gov.uk/obstructive-sleep-apnoea-and-driving> or call the **DVLA on Tel: 0300 790 6806**



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Caerdydd a'r Fro
Cardiff and Vale
University Health Board

Appointment queries: 02921 825421

Sleep Technician: 02921 825806 | sleephelp.cav@wales.nhs.uk