

| What's That Mean? Snoring vs. Sleep Apnea

HEALTH » SLEEP » APNEA

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It's the middle of the night and once again you've been awakened by your partner's snoring. Is it simple snoring—or sleep apnea?

Snoring is a bummer—especially to your bed partner. But sleep apnea can be life-threatening. Here's how to tell these tricky terms apart.

SNORING 101

When the airways of your mouth, nose and throat relax during sleep, they get narrower. The tissues then vibrate as you breathe. *Result:* Snoring.

Just about everyone snores, at least sometimes. Temporary snoring can happen when your airways are narrowed by any upper-respiratory infection, including a cold or sinusitis, as well as by allergies. Drinking alcohol can relax the muscles of the throat and soft palate and lead to occasional snoring as well. So can some medications, such as tranquilizers, sleeping pills, antihistamines and beta-blockers. Pregnancy's hormonal changes, which relax muscles, can bring it on, too.

If you snore more than occasionally, however, you might have an enlarged uvula (the dangling tissue at the back of your mouth), which partially blocks the airflow. If you're overweight, you may have some extra tissue at the back of your throat that narrows the airway. And some people just naturally have a thicker soft palate or a deviated septum in the nose, which leads to snoring. Sleep position also can contribute—when you sleep on your back, gravity pulls your relaxed throat muscles down and partially blocks your airway.

SLEEP APNEA SIGNS

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should be on the lookout for these apnea signs...

- Constant, extremely loud snoring
- Gasping or choking
- Pauses in breathing
- Sudden awakenings with a snort
- Excessive daytime sleepiness
- Morning headaches

If you have sleep apnea, your breathing repeatedly stops while you sleep, sometimes for one minute or even longer. Each time you stop breathing, your sleep is disrupted but not enough to consciously wake you up. The poor quality of your sleep can increase the risk for high blood pressure, stroke, heart disease and type 2 diabetes. Extreme sleepiness during the day time, another symptom, can lead to falling asleep while driving—and thus, car crashes. There are two main types of sleep apnea:

Obstructive sleep apnea (OSA), the most common type, usually is caused by soft tissue at the back of your throat collapsing and blocking the airway. Your blood oxygen level drops, and your brain wakes you just enough to get you breathing again—even if you’re not consciously aware that you’ve actually woken up momentarily. If you have OSA, you have five or more of these mini-wakenings every hour during sleep.

Central sleep apnea, where your breathing repeatedly stops and starts while you’re asleep, is much rarer. It happens because your brain isn’t sending the right signals to the muscles that control your breathing. Sometimes central sleep apnea is caused by a condition such as heart failure, but often the reason is unknown. (Some people have *mixed sleep apnea*—a combination of the obstructive and central sleep apnea.)

Bottom line: Losing even a small amount of weight, not smoking, skipping alcohol within four hours of bedtime, sleeping on your side and even doing **anti-snoring throat exercises** can help with a snoring problem, including sleep apnea. But if you think you or your bed partner might have sleep apnea, see your primary care doctor, who can evaluate you and, if needed, refer you to a sleep specialist. If you are diagnosed with this condition and the approaches above don’t fix it, you may want to try an **oral device** that keeps your airways open or go with the medical gold standard, a **continuous positive airway pressure (CPAP) machine**.

Source: s: National Institutes of Health/National Heart, Lung and Blood Institute, National Sleep Foundation, American Sleep Apnea Association, *Merck Manual*, University of Maryland Medical Center. **Date:** May 1, 2017 **Publication:** Bottom Line Health

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