

ORAL APPLIANCES

FOR SNORING AND SLEEP APNEA

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Snoring occurs in 40% of Australians. Severe sleep apnea affects about 5% of adults however mild to moderate forms occur in 20% of adults.

In sleep apnea the airway in your throat that leads from the nose and mouth to the lungs collapses when you fall asleep and the tongue muscles relax. If the airway is partially blocked, it usually causes snoring. If the collapse is severe enough it causes an apnea (airway blockage/ absence of breath).

A person with severe sleep apnea may have hundreds of airway collapses each night, which are then corrected by gasping or choking and the tongue moves forward. This cycle repeats over and over which results in lack of oxygen to the body's vital organs and disrupted sleep and daytime fatigue.

Long term consequences are high blood pressure and an increased risk of heart attack or stroke.

Oral appliances are indicated for those with mild and moderate obstructive sleep apnea OSA. They may be also used in people with severe OSA who are unable to tolerate a CPAP machine.

MANDIBULAR ADVANCEMENT SPLINTS

Oral appliances / mandibular advancement splints (MAS) are worn only while sleeping. They consist of a 'mouth guard' fitted to both your top and bottom teeth. They gently push the lower jaw forward to help open the airway by repositioning the tongue more forward. This helps to reduce the airway blockage. They fit completely within the mouth. You can speak, drink water, yawn and even kiss while wearing them. MAS should be made to meticulous measurements of your mouth and jaws. This is best done by a dentist experienced in dental sleep



medicine.

IS IT COMFORTABLE?

Yes! A properly fitted MAS should not cause discomfort to your teeth, gums or jaw. Most people find an oral appliance is more comfortable and more convenient than CPAP.

DOES IT WORK FOR EVERYONE?

A MAS is quite effective in stopping or reducing snoring for most people. Oral appliances will work to reduce sleep apnea for most people too – especially for mild and moderate cases. Their success is improved by fitting them with an experienced dentist and following up with ongoing care to ensure it is still effective and correctly adjusted. Subsequent assessment of success should always be undertaken with the guidance of a sleep physician. It may be necessary to have another sleep study with your MAS in place to assess its efficacy.

OTHER ORAL APPLIANCES

ORAL APPLIANCES FROM A DENTIST

There are many different styles. A dentist experienced in the field of dental sleep medicine can advise on the most appropriate style for you. The appliance will generally be fitted or customised to your jaws and teeth by first making an impression of your teeth. The MAS is adjusted to slowly push the lower jaw forward and gradually alleviate sleep apnea without causing severe

discomfort. Private health rebates are available if vou are covered for dental extras.

OVER-THE-COUNTER PRODUCTS

Many cheaper 'boil and bite' products are available over the counter or from the internet. These are not recommended, as they are poorly adapted to your teeth and can cause long-term gum, tooth and jaw problems. They may not push your jaw far forward enough to open up your airway. If you have tried one unsuccessfully, you may not be able to compare your experience to that of a custom-made appliance fitted by a dental sleep medicine specialist.

HOW DO ORAL APPLIANCES COMPARE WITH CPAP?

The view is that oral appliances are not as effective as CPAP in severe sleep apnea, however, this remains an active area of research. Oral appliances are generally the first-line treatment option in patients with mild to moderate sleep apnea, although this requires an experienced dentist to fit and monitor its effects. If you are unable to use CPAP throughout the night despite your best efforts, an oral appliance may be a reasonable alternative.

GOOD POINTERS TO TREATMENT SUCCESS

If your sleep apnea is mild or moderate

If you sleep better on your side than on your back

If you have a lower jaw that tends to recede

If you have a good amount of lower jaw movement

If you are in a healthy weight range

If you have central sleep apnea (more common in people with heart failure or a stroke), a MAS will most likely not work. Seek advice from your sleep specialist.

DISCLAIMER: Information in this fact sheet is general in nature and is not a substitute for professional medical advice. Discuss with your doctor if you are concerned about your sleep or other medical conditions.



ABOUT US

Sleep Disorders Australia (SDA) is a voluntary Notfor-Profit organisation that provides information and support to people affected by sleep disorders throughout Australia. SDA advocates the needs of people with sleep disorders by raising awareness of sleep disorders and their impact on our lives. We also offer support and education with regards to preventing and treating sleep disorders.

We would be delighted if you joined us. Membership is open to sufferers, family members, medical professionals, and the general public. You can join via our website or email our membership officer for more information.

If you would like to support us financially, you can donate via our website or send a cheque to our address.

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