

Aging Lifestyles: Dealing with sleep apnea

by Joe_Volz

Back in the sleepy 1980s, I had trouble staying awake at afternoon newsroom meetings. In fact, I nodded off within minutes after our brilliant young editor sat down with his list of story ideas for the week.

They were starting to call me Mr. Sandman.

Those were the days when any two-fisted reporter downed a drink or three at lunch while dissecting a huge steak. I figured I was dozing off because I drank too much and ate too much. Little did I know that I was suffering from sleep apnea, a disease that affects millions of Americans.

But, thanks to an accidental detection by an intimate friend, who actually noticed that I repeatedly stopped breathing for several seconds at night, I got help. And I am still here 20 years later.

Who knows what might have happened if the apnea had not been detected in time?

It might be time for some of you folks who snore, snort, toss and turn to consider whether or not you have the ailment. Those most likely to develop apnea are people who are overweight, have high blood pressure or have some physical abnormality, like a deviated septum, blocking airflow through the nose.

I had never even heard of the ailment before I was diagnosed. Back in the Dark Ages, no doctor ever hinted that I had apnea.

I was living in Washington at the time. I alerted the doctor about my concern and he sent me over to the Georgetown University Sleep Center. Not too many hospitals had such labs then; however, now any sizable hospital has a center.

Lying in bed for a night, hooked up to all sorts of sensors, I was told that I had actually stopped breathing 134 times for 15 seconds each. I would wake up, and go back to sleep quickly without being aware I had been awake.

I never got into the deep sleep mode necessary to have, well, a good night's sleep. I was always tired in the morning.

The doctors told me that they could toss me on the operating table and fix me by chopping out my tonsils, reaming out my nose and shaving a flap in the throat, which kept shutting off my windpipe at night. But, after all that, they said there would only be a 50 percent chance of any improvement.

"No, thanks," I said. I didn't want a surgeon sticking a sharp knife down my throat just for the fun of it.

However, there was another approach. I could buy or rent a machine that would pour air down my throat at night, keeping that troublesome flap open. I would breathe beautifully without waking up.

All I had to do was put two little rubber things - the experts call them pillows - in my nose. They were attached to a 2-foot-long plastic hose, which was connected to a machine the size of a cigar box. It has worked like a charm.

I have been using the machine, called an acontinuous positive airway pressure unit, or APAP, for what seems like a lifetime. I don't know what it is like to go to bed without it; it is a permanent appendage.

Recently, I went over to the local hospital to get an updated machine and I was tested to see if the apparatus I had been using had corralled the apnea. Yes, it had. And Medicare picked up most of the tab. I really would have had trouble getting to sleep if I had had to pay myself. The little wonder machines cost more than \$1,000.

I never dreamed there was such an easy way to combat the ailment.

For more information visit the American Sleep Apnea Association Web site at www.sleepapnea.org, or call 202-293-3650. Also, try the National Sleep Foundation at www.sleepfoundation.org, 202-347-3471.

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