

Sleep Apnea- Therapeutic Settings, Acclimation and Tolerance to Therapy

Shakkour-Perez H*

Geisinger Medical Center, USA

***Corresponding author:** Shakkour-Perez H, Geisinger Medical Center, USA, Tel: 570-764-1560; E-mail: hayfyperez@yahoo.com

Opinion Article

Volume 2 Issue 1

Received Date: April 19, 2017

Published Date: May 18, 2017

Opinion

Sleep Apnea is a disorder that affects a vast number of our population. It is not gender or age specific. Sleep Apnea is primarily caused by an obstruction in the airway due to airway collapse or instability. Once the airway collapses/relaxes during sleep, air cannot pass freely, resulting in a pause in breathing. As this occurs, the blood oxygen levels drop below adequate values, causing hypoxemia. Hypoxemia deprives the brain of oxygen and taxes heart which starts to pump harder attempting to compensate. At the same time, the brain awakens the person resulting in a gag, gasp or breath. This is a repetitive cycle that continues throughout the night. The body is an amazing machine, but also has its limits. The comorbidities associated with Sleep Apnea are significant. Good management of Sleep Apnea is essential to the overall health and wellbeing of anyone who has sleep apnea. Sleep Apnea increases the chances of Cardiovascular Disease, Hypertension, Stroke, Type 2 Diabetes, etc.

Sleep Apnea can be well managed with Positive Pressure therapy. This treatment is non-invasive and utilized during hours of sleep. Continuous positive pressure maintained in the airway will allow for airway stability, uninterrupted/restful sleep, and improved oxygenation and will lessen the work on the heart.

There are a few therapeutic modalities used depending on the diagnosis, severity and complexity noted during testing. Once the diagnosis is met and Therapeutic testing completed, the road to good sleep hygiene begins. Sleep Therapy is ordered and the steps to education, acclimation and compliance begin. All three go hand in hand. It is up to us as clinicians to set the right pace for each patient.

Therapeutic settings are what we strive for as clinicians, however sometimes we must take a step back and focus on what the person can tolerate and re-evaluate the plan of care. Managing sleep apnea is very important, however patient tolerance must be considered for therapy to be successful. When comparing compliance to optimal therapy pressure- both are necessary so that the patient can contribute to the plan of care and be successful