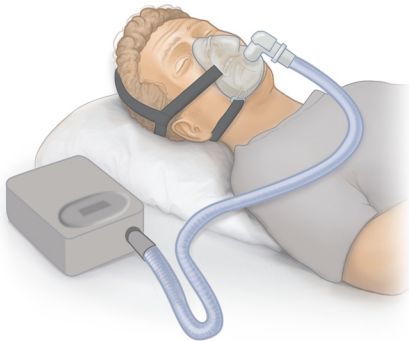


Heart Failure: Sleep Apnea



Sleep apnea is fairly common in people with advanced heart failure. Sleep apnea means you stop breathing for short periods while you are asleep. It may cause you to snore loudly and not sleep well, so you wake up feeling tired.

Getting treatment for sleep apnea can help you sleep and feel better. It may also help keep your heart failure from getting worse.

What is sleep apnea?

Sleep apnea occurs when you often stop breathing for 10 seconds or longer during sleep. Sleep apnea is most common in middle-aged or older men. Most people do not know they have it.

The two types of sleep apnea are:

- **Obstructive sleep apnea.** This occurs when your airway gets blocked while you sleep. Being overweight can lead to obstructive sleep apnea. Taking sleeping pills, drinking

alcohol before bedtime, or sleeping on your back can make it worse.

- **Central sleep apnea.** This type is caused by a problem with how the brain signals the breathing muscles. This more rare form of sleep apnea is the type most often related to heart failure.

How is sleep apnea related to heart failure?

Doctors have long believed that heart failure can cause sleep apnea. Now they also think that sleep apnea may cause heart failure.

They are not sure just how this happens. It may work like this: When you stop breathing during sleep, you interrupt the flow of blood and oxygen. To make up for this lack, your heart starts to beat faster to send more oxygen-rich blood through your body. Or when you stop breathing during sleep, you may startle awake to catch your breath. This startle impulse causes the release of chemicals that speed up your heart. This stresses your heart and can lead to heart failure.

What are the symptoms?

If you have sleep apnea:

- You probably snore loudly and toss and turn during sleep.
- Your bed partner may notice times when you stop breathing during sleep.
- You may wake up with a headache and be very tired all day long.
- You may be so tired that you fall asleep while you are eating, talking, or driving.

How is it diagnosed?

To diagnose sleep apnea, your doctor will examine you to look for anything that could be blocking your airflow during sleep. He or she

will ask questions of you and possibly your sleep partner. You will be asked about your lifestyle, snoring, sleep behavior, and how tired you feel during the day. If your doctor thinks that you have sleep apnea, he or she may suggest a sleep study or other tests.

A sleep study is a series of tests that show what happens to your body during sleep. The studies help your doctor find out what is causing your sleep problems. The studies are usually scheduled from 10 p.m. to 6 a.m. in a special sleep lab. You will be in a private room, much like a hotel room.

How is it treated?

Your doctor may suggest that you use a breathing machine while you sleep. The most common type is a continuous positive airway pressure (CPAP) machine. The machine keeps your airway from closing when you sleep.

It may take time for you to get used to CPAP. You may find that you want to take the mask off, or you may find it hard to sleep while you use it. If you have problems, talk to your doctor. You might be able to try another type of mask or make other changes. If your doctor has told you to use CPAP, it is very important to keep using it.

There are other steps you can take on your own that may help:

- **Lose weight**, if needed. It may reduce the number of times you stop breathing or have slowed breathing.
- **Sleep on your side**. It may stop mild apnea. If you tend to roll onto your back, sew a pocket in the back of your pajama top. Put a

tennis ball into the pocket, and stitch the pocket shut. This will help keep you from sleeping on your back.

- **Wake up at the same time** every morning.
- **Avoid alcohol and medicines** such as sleeping pills and sedatives before bed.
- **Do not smoke**.
- **Prop up the head of your bed** 4 to 6 inches by putting bricks under the legs of the bed.
- **Treat breathing problems**, such as a stuffy nose caused by a cold or allergies, right away.

Your doctor may suggest surgery if you have obstructive sleep apnea. Surgery can remove excess tissue in the throat to make the airway wider. This may help, but some people still need to use CPAP after surgery.

Questions to ask your doctor

Use the space below to list your questions or concerns. Take this sheet with you to your next doctor visit.

Questions about sleep apnea and heart failure: