

BOARD OF REGISTERED POLYSOMNOGRAPHIC TECHNOLOGISTS



FACT SHEET: CENTRAL SLEEP APNEA

KEY FACTS

- Central sleep apnea has many causes.
- Treatment of underlying conditions may eliminate central sleep apnea.
- Treatment with PAP therapy may be necessary.

O: WHAT IS CENTRAL SLEEP APNEA?

A: Central sleep apnea is a condition which causes pauses in your breathing during sleep. During these events your brain fails to send the signal to the muscles that control respiration. A few central apneas may be normal as you fall asleep but are considered abnormal when they happen frequently and disturb your sleep or cause a drop in the level of oxygen in your blood.

Q: HOW DOES CENTRAL APNEA DIFFER FROM OBSTRUCTIVE SLEEP APNEA (OSA)?

A: OSA is caused by a collapse or a blockage in the upper part of the airway. Patients with OSA attempt to breathe but are unable to get air to the lungs because of this blockage.

Q: WHAT CAUSES CENTRAL SLEEP APNEA?

A: Central sleep apnea has many different causes, some simple and some very complex. These include:

- 1. Changes in the control of breathing as you fall asleep
- 2. Nasal congestion, particularly in children
- 3. Sleeping at higher than usual altitude
- 4. Heart conditions, such as congestive heart failure or atrial fibrillation
- 5. Kidney disease
- 6. Medications, especially some pain medications
- 7. Neurologic conditions, such as stroke, Parkinson's disease, neuromuscular disease, etc.

Q: WHAT ARE THE SYMPTOMS OF CENTRAL SLEEP APNEA?

A: You may not realize that you are experiencing pauses in your breathing while asleep, but other symptoms may be noticeable. These may include:

- 1. Daytime sleepiness and fatigue
- 2. Difficulty concentrating
- 3. Morning headaches
- 4. Restless sleep or difficulty getting to sleep (insomnia)
- 8. Sudden arousals from sleep due to feelings of shortness of breath
- 9. Frequent urination at night
- 10. Observed periods of not breathing, without making the effort to breathe



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O: HOW IS CENTRAL SLEEP APNEA DIAGNOSED?

A: Your physician will perform a complete medical history and physical examination. You may be given a survey to complete asking about daytime sleepiness, sleep quality and bedtime habits. Your physician will schedule you for a sleep study to confirm the diagnosis of sleep apnea. Sleep studies are typically performed in a Sleep Disorders Laboratory but in some instances you may be given a device to record your breathing patterns at home.

O: WHAT IS THE TREATMENT FOR CENTRAL SLEEP APNEA?

A: Treatment will depend on the cause of your central sleep apnea. In some people there is a simple solution which will eliminate the apnea, such as treating your nasal congestion, eliminating use of certain medications, or a return to sleeping at your usual altitude. Treating underlying health problems, such as a heart condition, may reduce or eliminate central sleep apnea. In other people, additional treatment may be needed, such as oxygen therapy at night or positive airway pressure (PAP) treatment.

Q: HOW CAN POSITIVE AIRWAY PRESSURE (PAP) THERAPY HELP MY CENTRAL APNEA?

A: PAP provides assistance to help you breathe during sleep. When used to treat OSA, PAP helps to keep the airway open and prevents obstruction. When PAP is used to treat central sleep apnea, it works differently by giving your respiratory system a "boost" to keep breathing regularly during sleep. There are various types of PAP devices but they are all small compressor-like machines with a hose attached to a mask, which covers your nose or mouth, or a nasal pillow system. It is important that your Sleep Center or medical equipment provider provides a mask that is comfortable to wear every night.

FURTHER READING

- 1. The American Sleep Apnea Association (www.sleepapnea.org)
- 2. National Heart, Lung, and Blood Institute of National Institutes of Health (www.nhlbi.nih.gov)
- 3. American Sleep Association (www.sleepassociation.org)