



Sleep-disordered breathing in children

What should a parent do?

By Cecelia Damask, DO

Sleep-disordered breathing (SDB) is a common problem for adults that leads to high blood pressure, heart attacks, stroke, and sudden death. Other consequences are bedroom disharmony, excessive daytime sleepiness, weight gain, poor performance at work, failing personal relationships, and increased risk for accidents, including motor vehicle accidents.

Sleep-disordered breathing in children, from infancy through puberty, is in some ways a similar condition, but has

different causes, consequences, and treatments. A child with sleep-disordered breathing (SDB) does not necessarily grow up with this condition into adulthood.

The hallmark symptom of sleep-disordered breathing is snoring that is loud; it is present every night regardless of sleep position, and is ultimately interrupted by complete obstruction of breathing with gasping and snorting noises. Approximately 10 percent of children are reported to snore. Ten percent of these children (one percent of the total pediatric population) have obstructive sleep apnea.

When an individual, young or old, has obstructed breathing during sleep, the body perceives this as a choking phenomenon. The heart rate slows, the sympathetic nervous system is stimulated, blood pressure rises, the brain is aroused, and sleep is disrupted. In most cases, a child's vascular system can tolerate the changes in blood pressure and heart rate. However, a child's brain does not tolerate the repeated interruptions to sleep, leading to a child that is sleep deprived, cranky, and ill behaved.

Consequences of untreated pediatric sleep-disordered breathing

Snoring. A problem if a child shares a room with a sibling and has regular sleepovers.

Sleep deprivation. The child may become moody, inattentive, and disruptive both at home and at school. Classroom and athletic performance may decrease along with overall happiness. The child will lack energy, often preferring to sit in front of the television rather than participate in school and other activities. This may contribute to obesity.

Abnormal urine production. Sleep-disordered breathing also causes increased nighttime urine production, and in children, this may lead to bedwetting.

Growth. Growth hormone is secreted at night. Those with SDB may suffer interruptions in hormone secretion, resulting in slow growth or development.

Attention deficit disorder (ADD) / attention deficit hyperactivity disorder (ADHD). There are research findings that identify sleep-disordered breathing as a contributing factor to attention deficit disorders.

Dental ASSOCIATES of Lake Mary

COSMETIC & RECONSTRUCTIVE DENTISTRY

State-of-the-art practice specializing in

- Full Mouth Reconstruction
- Implant Supported Prosthesis
- Complete & Partial Dentures
- Crowns and Bridges
- Lumineers (ultra-thin) and Veneers

Complemented by

- Extractions, Root Canals
- Teeth Whitening, Tooth Colored Restorations

Kalpesh Mehta DMD
GENERAL DENTIST

Deepa Mehta DMD, CAGS
PROSTHODONTIST

Call for a Complimentary Consultation
407.829.2123

We Accept Most Insurance
Affordable Payment Plans Available

MEMBER OF: ACP ADA
ALUMNI OF: BOSTON UNIVERSITY

www.dentalassociatesoflakemary.com

1301 South International Pkwy., Suite 2041 | Lake Mary, Florida 32746

Diagnosis of sleep-disordered breathing

The first diagnosis of sleep-disordered breathing in children is made by the parent's observation of snoring. Other observations may include obstructions to breathing, gasping, snorting, and thrashing in bed, as well as unexplained bedwetting. Social symptoms are difficult to diagnose, but include alteration in mood, misbehavior, and poor school performance. (Note: Every child who has subpar academic and social skills may not have sleep-disordered breathing. But if a child is a serious snorer and is experiencing mood, behavior, and performance problems, SDB should be considered.)

A child with suspected SDB should be evaluated by an otolaryngologist (an ear, nose and throat specialist). If the symptoms are significant and the tonsils are enlarged, the child is probably a candidate for a tonsillectomy and adenoidectomy (removal of the tonsils and adenoids). Conversely, if the symptoms are mild, academic performance remains excellent, and the tonsils are small, a sleep study may be recommended to further evaluate the child. Physicians must evaluate each child on a case-by-case basis.

There are other pediatric sleep disorder diagnoses. The sleep study is the standard diagnostic test for sleep-disordered breathing. This test is performed in a sleep laboratory. Sleep tests can produce inaccurate results, especially in children. Borderline or normal sleep test results may still result in a diagnosis of SDB based on parental observation and clinical evaluation.

Treatment for sleep-disordered breathing

Enlarged tonsils are the most common cause for SDB in children, thus tonsillectomy and adenoidectomy (removal of tonsils and adenoids) is the most effective treatment for pediatric sleep-disordered breathing. Tonsillectomy and adenoidectomy achieves a 90 percent success rate for childhood SDB. Of the nearly 400,000 tonsillectomies performed in the United States each year, 75 percent are performed to treat sleep-disordered breathing.

Not every child with snoring should undergo tonsillectomy. The procedure does have risks and possible complications. Aside from the mental anguish experienced by the

parent and child, potential problems include anesthesia risks, bleeding, and infection.

Dr. Damask is a board-certified otolaryngologist, a physician who practices the medical management of diseases of the ears, nose, and throat. Her specialty is in the treatment of allergies. Dr. Damask attended medical school in Chicago, and was in private practice in North Carolina prior to opening Lake Mary Ear, Nose, Throat & Allergy.

LML

AUTOMOTIVE **ne**
 "FIRST RATE SERVICE AT A FAIR PRICE"
407-699-9111
 SERVICE CENTER

OVER 28 YEARS OF QUALITY SERVICE AND EXPERIENCE

Don't PUSH service off any longer
 We do the job right the first time.
 Bring your vehicle to the people you can trust!

FREE SHUTTLE SERVICE
 Lake Mary - Longwood
 Altamonte Springs
 Sanford - Apopka
 407-699-9111

Oviedo - Winter Springs
 Casselberry - Orlando
 Winter Park
 407-695-7788

COMPLETE REPAIRS
 All Systems - All Makes
 All Models
 Cars - Trucks - RV's - SUV's

Ask About Our Warranty Policies

ASE
 AAA Approved Auto Repair
 ASR
 QUALIFIED TECHNICIANS
 ACDelco
 Auto-Hitch

785 S. Hwy 17-02 • Longwood • 1/2 Mile S. of SR 434 • FL REG NO. MV 00068