Snoring
An information guide
Snoring

Why does it happen?

Snoring is noisy breathing through the mouth and nose during sleep. It happens when air doesn’t move smoothly through your air passages, making the tissue in your mouth, nose and throat vibrate as the air passes through.

Muscles in the tongue, throat and roof of the mouth relax during sleep, narrowing the passage for air to move through. These relaxed muscles then vibrate, causing the sound of snoring and this gets louder the narrower the airway becomes.

Nearly half of the UK population snores at some time and a quarter are regular snorers.

Things that can cause snoring or make it worse

- If you are overweight the excess fat around your neck and throat can cause the tissues to sag, narrowing the airway.
- Alcohol and certain drugs (such as sedatives) cause extreme relaxation of your muscles, including those in your throat.
- Smoking can cause inflammation of airway tissue.
- Sleeping on your back can make snoring worse because your tongue falls backwards into your throat, which can narrow your airway and partly block airflow.
- Nasal blockages caused by allergies, colds or a damaged nose can limit airflow through your nose. This causes you to breathe through your mouth which has more of the tissues that sag.
- Some people have narrowed airways because of enlarged tonsils or adenoids, a long uvula (the piece of skin that hangs down in the back of your throat between your tonsils) or if the soft part of the roof of your mouth is a bit low or thick.
How can snoring be treated?

Lifestyle measures

You can improve your snoring by thinking about the things that make it worse and trying to improve your lifestyle.

• Try to keep to a healthy diet and weight – this helps reduce the fat in your throat tissues and improves your general health.

Eat a wide variety of foods from four main food groups:
1. Bread, other cereals and potatoes.
2. Fruit and vegetables.

Try to make sure you eat five servings of fresh, frozen or canned fruits and vegetables everyday. Grill or bake food instead of frying.

• Take regular exercise to improve your muscle strength and help your weight. Start with a 10-minute period of light exercise and gradually build from there. When you are ready, it is recommended that you exercise at least three to four times a week. Try to do 20 to 30 minutes at a time, it doesn’t have to be in one go: three 10 to 20 minute sessions of exercise each day is just as good. Occasional vigorous activity is unwise and possibly dangerous if you are ‘out of shape’.

• Stop smoking.

• Always try to sleep on your side, not your back.

• Avoid alcohol before bedtime.

• Get treatment for nasal congestion/allergies.
Snoring tends to be worse when you are sleeping on your back and when your head is bent forward.

Try propping your head up with pillows, and you can try sewing a tennis ball into the back of your pyjamas to stop you lying on your back. Pillows are available for snorers which may help your sleeping position.

Nasal decongestants that you can buy over the counter can be used on a short term basis (a few weeks). See your GP about the need for long term medication if your symptoms persist.

Making changes to your lifestyle is the first thing you should try, but they may not always be effective.

Mouth devices

These are the treatment of choice for snoring when lifestyle measures have been taken but snoring persists.

These are gum shield-like devices (orthodontic devices) which help keep the airway open by moving the jaw forward. There are a number of companies that make reasonably priced mouth devices for snorers.

They can help some people with snoring, but may lose their effect after a while as they are not fitted individually. Websites of companies that make these are given below; we do not recommend any particular type.

www.snorban.co.uk and www.sleeppro.com

Devices that are fitted by a maxillofacial surgeon, or a trained dentist, may be more effective.

Dentists will charge for this but you can discuss this with your doctor, as it may be possible to refer you to a NHS maxillofacial surgeon. It may not be possible to fit a device if you have dental problems.
Surgery

Surgery to correct snoring can include procedures to correct a damaged or deviated nose and the removal of excess tissue in the mouth and throat.

You will need to be referred to an ENT surgeon and you may need a nose endoscopy (telescope) test to assess whether surgery would be likely to help your snoring problem.

Most surgery won’t have any major side effects and has a quick recovery period. However, some techniques can cause a painful throat for about a week afterwards and occasionally alter your voice so it is important to discuss the surgery fully with the ENT surgeon.

Surgery may not always be a successful long term treatment as the benefits often don’t last for ever.

In people who are overweight there is no evidence of long term benefit from surgery. You should not have surgery if you are suffering from obstructive sleep apnoea, as it can make this condition more difficult to treat.

Persistent snoring

Snoring can be difficult to treat and may still persist even when the above lifestyle changes and treatments are tried. In severe, persistent cases a treatment called CPAP may be tried (see explanation below) although this is not available on the NHS.
Obstructive sleep apnoea (OSA)

In some snorers the narrowing of the air passage during sleep can be enough to cause significant reduction of the flow of air into the lungs, or briefly stop airflow altogether.

This leads to the person briefly waking to open up the air passage. They are not aware of this, but it means they don’t sleep properly and often feel tired during the day.

This condition is diagnosed by a sleep study and your doctor will refer you for this if they suspect OSA.

The treatment of choice for this is continuous positive airway pressure (CPAP). This is a machine that blows air into the upper airway via a mask over the nose, and the air pressure helps keep the airway open.

Fitted mouth devices can help with this condition too, but may not be suitable for people with some chronic chest conditions, nasal blockage or dental problems.
Useful websites

The British Lung Foundation
www.lunguk.org/support-for-you/osa

The British Snoring and Sleep Apnoea Association
www.britishsnoring.co.uk

The Sleep Apnoea Trust
www.sleep-apnoea-trust.org,
Sleepnet:www.sleepnet.com
If English is not your first language and you need help, please contact the Interpretation and Translation Service

Jeśli angielski nie jest twoim pierwszym językiem i potrzebujesz pomocy, skontaktuj się z działem tłumaczeń ustnych i pisemnych

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For general enquiries please contact the Patient Advice and Liaison Service (PALS) on 0161 604 5897

For enquiries regarding clinic appointments, clinical care and treatment please contact 0161 624 0420 and the Switchboard Operator will put you through to the correct department / service

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