Could My Child Have Sleep Apnea?

Sleep apnea is known to affect 1 to 3 percent of children, but because there may be many unreported cases, could actually affect more. Sleep apnea can affect your child’s sleep and behavior and if left untreated can lead to more serious problems. Because sleep apnea can be difficult to diagnose, it is important to monitor your child for the symptoms and have a doctor see her if she exhibits any.

What is sleep apnea?
Obstructive sleep apnea occurs when breathing is disrupted during sleep. This occurs when the airway is blocked, resulting in choking that causes a slower heart rate and increased blood pressure, alerting your child’s brain and causing him to wake up.

What are the symptoms?
The first sign that your child may have sleep apnea is loud snoring that occurs regularly. You may also notice behavioral changes. Due to a lack of sleep, he or she may be more cranky, have more or less energy, and have difficulty concentrating in school.

How is sleep apnea diagnosed?
If you notice that your child has any of those symptoms, have him or her checked by an otolaryngologist—head and neck surgeon, who can use a sleep test to determine sleep apnea. For the test, electrodes are attached to the head to monitor brain waves, muscle tension, eye movement, breathing, and the level of oxygen in the blood. The test is not painful and can be performed in a sleep laboratory or at home.

Results can vary, so it is important to have the otolaryngologist determine whether your child needs treatment. Often, in mild cases, treatment will be delayed while you are asked to monitor your child and let the doctor know if the symptoms worsen. In severe cases, the doctor will determine the appropriate treatment.

What are the dangers if sleep apnea is left untreated?
Because sleep apnea can lead to more serious problems, it is important that it be properly treated. When left untreated, sleep apnea can cause:

- snoring
- sleep deprivation
- increased bed wetting
• slowed growth
• attention deficit disorder (ADD) or attention deficit hyperactivity disorder (ADHD)
• breathing difficulty
• heart trouble

What causes sleep apnea?
In children, sleep apnea can occur for several physical reasons, including enlarged tonsils and adenoids, and abnormalities of the jaw bone and tongue. These factors cause the airway to be blocked, resulting in vibration of the tonsils, or snoring. Overweight children are at increased risk for sleep apnea. Of the 37 percent of children who are considered overweight, 25 percent of them likely have sleeping difficulties that may include sleep apnea. This is because extra fat around the neck and throat block the airway, making it difficult for these children to sleep soundly. Studies have shown that after three months of exercise, the number of children at risk for sleep apnea dropped by 50 percent.

How is sleep apnea treated?
Because enlarged tonsils and adenoids are a common cause of sleep apnea in children, routine treatment often involves an adenotonsillectomy, an operation to remove the tonsils and adenoids. This is a routine operation with a 90 percent success rate. Studies published in Otolaryngology—Head and Neck Surgery (October 2005) and presented at the Academy’s 2006 annual meeting in Toronto showed that when children with sleep apnea were tested one to five months after their surgery, they showed extreme improvement in their sleep and behavior, and that these improvements remained nearly a year and a half later.