

SLEEP APNEA:

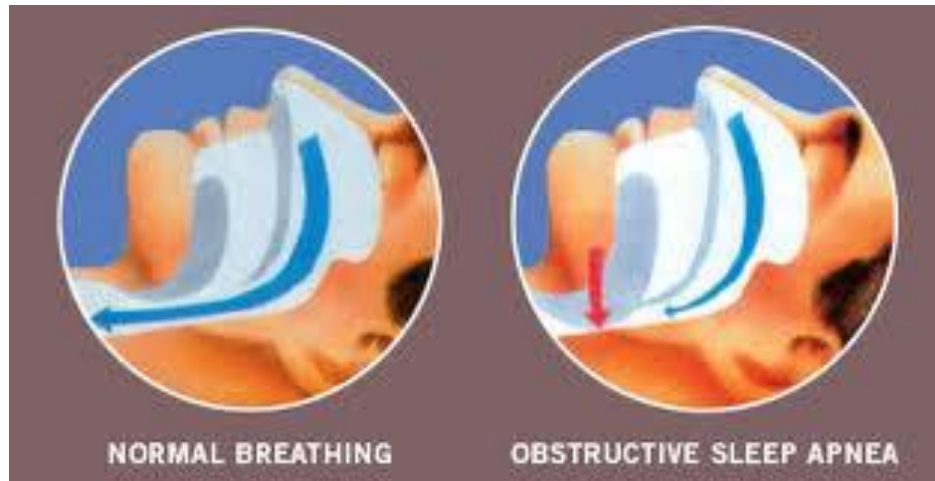
Call (208) 234-7246

A Consumer's Guide

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WHAT IS SLEEP APNEA?



The word “apnea” is Greek in origin, and the literal translation is “**without breath**”. Sleep apnea is the temporary and complete blockage of the airflow, lasting at least 10 seconds and often for a minute or longer, during sleep. The individual is starving for oxygen and probably isn’t even aware of it.

The muscles in your airway relax along with the muscle that controls your tongue. The tongue drops back into your throat and allows the airway to close down and collapse. The decrease in the amount of oxygen in the blood and to your brain, activating your “fight or flight” mode causing you to arouse and to breath.

If you suffer from sleep apnea this means that you actually “stop breathing” while you sleep. No oxygen is getting into your lungs and being transported to your brain.

Without air, the level of oxygen in your blood plunges downward setting off emergency signals to your brain, heart and lungs to save your life. Apnea literally throws your survival systems into a constant "flight or fight" mode.

The "fight or flight response" is our body's primitive, automatic, inborn response that prepares the body to "fight" or "flee" from a perceived attack, harm or threat to our survival. It's still a vital mechanism to have in modern society, but not while we are sleeping.

There are three types of sleep apnea: obstructive (the most common), central and mixed which is simply a combination of both the obstructive and central apnea.

Although you are not expecting a real physical threat, when you stop breathing and **your brain is no longer getting life sustaining oxygen**, your body doesn't understand the difference. A primeval instinct kicks in that is trying to save your life causing you to fight for oxygen and breath deep.

It's not about snoring or being tired...

If you have untreated sleep apnea, your biggest concern might be that you snore loudly and can't sleep with a bed partner. Or, maybe you run out of energy and find it difficult to get through the day without taking a nap or drinking a lot of caffeinated drinks to stay alert. Those are just some of the observable symptoms of sleep apnea.

There are greater issues at stake than being tired and loud snoring!

Without adequate levels of oxygen in your blood stream, brain cells begin to die off and your heart has to work harder to circulate the reduced amount of oxygen to the brain. This causes your blood pressure to go up and puts your blood vessels under a lot of stress. *This increased stress damages the inside of your blood vessels.* Too much pressure could result in a ruptured vessel and even cause a stroke.

Everyday new research from around the world is finding that untreated sleep apnea is being linked to a host of damaging health conditions that you may have.

Life threatening medical conditions:

- ***Cardiovascular events such as angina, heart attacks, irregular heartbeat, enlarged heart and heart failure, Atrial fibrillation***
- ***Stroke***
- ***High blood pressure***
- ***Accidents***
- ***Depression /Anxiety***
- ***Weight gain***
- ***Erectile Dysfunction***
- ***Insulin resistance***

You deserve to keep the health you have!
We have answers you can live with!

The airway must be reopened ASAP and oxygen flowing.

On this and the following pages, you will find a Sleep Questionnaire and an Epworth Sleepiness Scale test. Your responses will aid a trained observer to determine if a sleep study is necessary.

Sleep Questionnaire:

- **Have you been told that you snore so loudly that it can be clearly heard even when the bedroom door is closed?**
- **Have you been told that you stop breathing during sleep?**
- **Do you wake up gasping for air?**
- **Do you have morning headaches?**
- **Do you feel so tired during the day, especially in the afternoon that you feel like taking a nap?**
- **Do you drink caffeinated beverages (coffee, soda, tea) in order to stay alert during the day?**
- **Do you still feel tired even after getting a full night's sleep?**
- **Do you dream? (Not remember your dreams. But do you remember having a dream?)**
- **Have you been told that you need to lose some weight?**

THE EPWORTH SLEEPINESS SCALE

This self-administered test determines how likely are you to doze off or fall asleep in the following situations, in contrast to feeling just tired. This refers to your usual way of life in recent times. Even if you have not done some of these things recently try to work out how they would have affected you. Use the following scale to choose the most appropriate number for each situation:

0 = no chance of dozing

1 = slight chance of dozing

2 = moderate chance of dozing

3 = high chance of dozing

SITUATION CHANCE OF DOZING

- ____ Sitting and reading
- ____ Watching TV
- ____ Sitting inactive in a public place (e.g. a theater or a meeting)
- ____ As a passenger in a car for an hour without a break
- ____ Lying down resting in the afternoon when circumstances allow
- ____ Sitting and talking to someone
- ____ Sitting quietly after a lunch without alcohol
- ____ In a car, while stopped for a few minutes in traffic
- ____ To check your sleepiness score, total the points and write it here:

Check your total score to see how sleepy you are.

1 - 6 Congratulations, you are getting enough sleep!

7 - 8 Your score is average

9+ Seek the advice of a sleep specialist without delay

The results of the Epworth Sleepiness Scale are very reliable because you are rating yourself in different situations and not being asked questions by an interviewer. *Any score totaling over 9 means you have significant issues* with daytime sleepiness. You may not be aware of them and may discount their effects on your life. They warrant taking the next step and that is to have a sleep study to determine if you have any forms of sleep apnea. Obstructive sleep apnea is a medical condition. Having an overnight sleep study and having a sleep medicine doctor read and interpret the results is the only way to make the diagnosis.

Sleep Testing is Important

An overnight sleep study can be done at sleep center or in your home using an ambulatory testing device. The report of your study has the important information needed for your health care team to discuss your treatment options.

The recorded numbers (AHI) on the study will let your team know if you actually have sleep apnea and to what severity. Is it mild, moderate or severe?

All sleep medicine doctors are members of one national organization, the *American Academy of Sleep Medicine (AASM)*. The AASM sets the standard of care for all sleep related diseases. The AASM recommends a sleep study for a proper diagnosis before beginning any treatment.

A dentist can legally treat you without the study, but this is not in your best interest. While you may snore and think that you do not suffer from sleep apnea, unless you have the sleep study you cannot be sure. Your life is worth the investment.

The recognition of obstructive sleep apnea is relatively new in medicine. Over 95% of the people who have sleep apnea have not been tested and are unaware of the risk they are living. And, that number of individuals with apnea is getting larger every day as our population becomes older and more obese.

You may have had sleep apnea for many years and do not know what it's like to get a good night's rest because you already think you are getting one. Many patients only realize how sleep deprived they have been much of their lives once they get treatment and experience restful sleep.

Treatment

The basic goal for the successful treatment of all obstructive sleep apnea problems is the same: **keep an open airway in the back of your throat all night long.** The airway opening needs to be large enough to allow plenty of air into your lungs and sufficient oxygen flowing to your brain.

The CPAP machine holds the airway open by forcing pressurized air through your nose and down the back of your throat and into your lungs. The amount of air pressure necessary to hold the airway open is determined by testing.

A dental sleep retainer gently cradles your lower jaw and tongue forward, which automatically opens your airway so that you can breathe normally. A movement of just a few millimeters is all that it takes to make a sleep retainer work for you to stop the noise, keep the airway open, and keep the oxygen flowing.

Dr. Sandy Shire of the FDA says this about dental sleep apnea retainers, “The mandibular positioning devices are designed to move the mandible into a more forward position and provide support for the jaw at rest. This is intended to create a larger airspace and thereby decreasing air turbulence and tissue vibration (snoring.)” The dental sleep apnea retainer allows you to keep breathing normally and the oxygen flowing.

Sleep Retainers

In order for any dental sleep retainer to work, it has to be comfortable, not cause you any jaw, muscle or tooth pain, and it has to stay in your mouth while you sleep. It has to have a “snug” fit, but not enough to cause you tooth soreness.

Food and Drug (FDA) approved dental sleep retainers are custom-made, consisting of upper and lower dental plates that allow normal mouth opening and closing. The device is custom fitted and adjustable and **made of medical grade materials**. The sleep retainer weighs approximately four ounces. The laboratories that manufacture retainers give between 1-3 year guarantees on manufacturing defects.

All of the sleep retainers can be easily cleaned with a toothbrush and antibacterial soap. Some manufacturers recommend that you keep the retainer moist by storing it in a solution of water and a small amount of mouthwash. Others advise you to dry it after use and store in a safe place. Be sure you know the proper storage recommendations.

Most recommend that you thoroughly clean your device once a week by soaking it for 10-15 minutes in a denture cleaning solution.

Not all sleep apnea retainers are FDA approved!

You may see advertising for inexpensive oral appliances that you think may work for you. Those claims are unfounded because the devices that you see for sale on TV or the Internet are not FDA approved for treating your disease.

The ones you get off the Internet are not custom made for you. Compared to a custom sleep retainer, they never fit as well and can actually damage your teeth and TMJ. These are known as boil and bite retainers, because they are heated in hot water to form to your teeth. It's a one-size-fits-all solution for a dangerous condition.

They are manufactured at the lowest price point and sold to the public. Since they came from a factory off shore you do not have any idea what materials were used in the manufacturing process. With a custom fit sleep retainer, made in dental lab in America you never have to worry about the materials used in the fabrication. Here's why this is important.

The soft tissues of your mouth absorb molecules from anything they come in contact with. This can be either good or bad for your health. Dentists rely on the fundamental principle of absorption in order for fluoride to harden tooth enamel, toothpastes to scrub teeth clean, sealants to prevent decay in children, topical anesthetic to get you numb before an injection. A sleep retainer is going to be in contact with the **SOFT TISSUES OF YOUR MOUTH FROM 6-8 HOURS EVERY NIGHT**. It is a better investment *health wise to get a retainer that is custom made with medical grade materials than an unknown risk from off shore just because it's cheap.*

The ten pictured dental sleep retainers have received FDA approval:



or



or



EMA

Click on image for larger view



How will I know the sleep retainer is working?

At the delivery appointment your retainer will be fitted to your teeth. You will be given information on what to expect during the initial phases as you adjust to wearing something in your mouth, as well as instructions on how to clean. Store and care for your sleep retainer.

After your retainer is properly fit, you will be given a follow-up appointment to evaluate your success. At this appointment, you will be asked questions similar to those in the sleep questionnaire and Epworth Sleepiness Scale to determine if the retainer is working effectively.

It can take up to two or three months for some patients to be totally comfortable wearing their new sleep retainer. As wearing the dental sleep retainer becomes second nature to you, the better it works. When Dr. Dwight Romriell feels that your sleep retainer is working effectively, he will recommend that you have a sleep test while using your sleep retainer.

Your physician will want this test and the *American Academy of Sleep Medicine* (AASM) recommends that you get a follow-up sleep study while you are wearing your retainer.

Why didn't my medical doctor recommend sleep retainers?

This is a very good question. I used a CPAP for years on recommendation from my medical doctor before learning of the sleep retainers. I am now an expert in sleep retainers and they work great for me. I have provided hundreds of them. Not all doctors are aware of the availability of sleep retainers and their effectiveness. All sleep medicine professionals in February of 2006, were given the results of a scientific study done by a blue ribbon panel of the American Academy of Sleep Medicine (AASM.) It consisted of a comprehensive review of every article ever published in the previous ten years on the use of sleep retainers for the treatment of sleep apnea.

The study came to the conclusion that, "Oral appliances are indicated for use in patients with mild to moderate sleep apnea who prefer them to CPAP therapy or who do not respond to, are not appropriate candidates for, or patients who fail treatment attempts with CPAP." Even if you have severe sleep apnea and cannot tolerate your CPAP, you are a candidate for an oral appliance. Here's why!

The medical risk factors associated with untreated obstructive sleep apnea are well documented. The sleep retainer offers a viable option for those who failed to tolerate CPAP or choose an alternative. The sleep retainer is certainly far superior to no treatment at all. Wearing a sleep retainer may not get you the same results as you would get using a CPAP, but you would be quieter, better rested, and healthier than doing nothing at all.

Included with this “**Consumer Guide**” is a summary copy of the AASM report. The next time someone tells you that dental sleep retainers do not work, you will have the fact to allow you to educate that person on the confirmed facts.



I personally used CPAP for several years and know the problems of managing the mask and the CPAP machine with the air leaks and the sore face. The marks on my face took two hours to disappear each morning and were awkward to explain to the inquisitive. Have you ever had the need to explain the marks on your face? The extra baggage in traveling was a pain. It did take a few weeks to become accustomed to the dental sleep retainer in my mouth. The biggest surprise in wearing the sleep retainer was the quiet. It took a while to be accustomed to the normal household noise again after unplugging the noisy CPAP. I sleep better with the sleep retainer than I did with the CPAP. Travel is convenient now! There is no need for electricity and no hoses. After being tied to a machine the retainer is new found freedom. I’ve not used the sleep retainer in church yet, but it works great on an airplane. Even my spouse likes the retainer better than the noisy CPAP machine.

Frequently Asked Questions:

1. If I have false teeth, is it true that I cannot wear a sleep retainer for my sleep apnea?

This is **false**. It used to be that in order for one to work you had to have at least 8 upper and 8 lower teeth. Newer designs are available that will work for you even if you have complete upper and lower dentures.

2. Will sleep retainers damage my teeth or crowns?

This is a rumor that get passed around and it's **false**. A retainer has to stay in place while you sleep, but it does not put too much pressure on your teeth.

3. Will these retainers cause me to have jaw joint discomfort?

This may be especially true if the dentist is untrained and unskilled in taking good records of your jaw movement. **But, in the hands of a skilled sleep medicine dentist, this is seldom a problem.** If it does happen, you would take out your sleep retainer, visit your dentist to see if adjustments can be made, and then put it back in after the discomfort subsides.

In order for any sleep retainer to work, it has to be so comfortable that you do not even realize you are wearing one. It cannot cause your teeth, muscles, jaw or gums to hurt while wearing it. If it did, you would not use it.

4. If I have a sleep retainer and should ever need dentistry, will I need a new one?

This is **half-true**. Some of the designs can be modified to fit new crowns, veneers, bridges and implants. Others are more difficult, if not impossible, to refit to new dentistry. If you are getting new fillings, all of them will fit after treatment. You should have no problems if you are getting an occasional crown or two replaced.

The same applies for getting implants as long as the new teeth are not larger than ones being replaced. If you decide on getting a smile makeover that involves changing the size, position and length of your teeth, then you will need a new sleep retainer after treatment.

I trust this *Consumer Guide* has helped you understand the role sleep retainers can play in returning your freedom and getting your life back. There are serious medical risks of untreated obstructive sleep apnea and they can all be conveniently treated.

Visit www.theTMJsleepcenter.com

Please call or email for an appointment or additional information. Janel@thetmjcenter.com
(208)-234-PAIN
(208)-234-7246

I have the answer you can live with;

Dr. Dwight Romriell

PS: Call today for a 10% cash discount!



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It's a myth!

The CPAP machine is not the only way to treat sleep apnea!

There is an alternative way for you to get the same or better results without a machine — using a new device small enough to fit in the palm of your hand – a dental sleep retainer.

Dear CPAP Sufferer:

Thank you for inquiring about an alternative treatment for your sleep apnea. My goal is to help you better understand why your sleep apnea should be treated, and how you can get the same or better results from a **dental sleep retainer** than with a CPAP machine.

Because you responded to my ad, I suspect that you, or a loved one, have been diagnosed with sleep apnea. You may have also been told that the best and only option for treating sleep apnea is to use a CPAP air pump machine. Yes, you have likely been told that you have a medical condition and there is his only one available treatment. CPAP machines continue to be the “only choice” recommended, for people with sleep apnea, but CPAP may not work for you. Up to 60% of people who have CPAP prescribed won't use or stop using the CPAP before the end of the first year.

- **They can't find the right size or style CPAP mask**
- **Trouble getting used to wearing the CPAP device**
- **Leaky mask, skin irritations or pressure sores and marks on face**
- **Salesmen, Truck drivers, vacations difficulty of traveling**
- **They remove the CPAP device during the night.**
- **They are annoyed by the noise, hose, or mask.**
- **Difficulty tolerating the forced air**
- **A dry, stuffy nose and or mouth**
- **Feelings of claustrophobia**
- **Difficulty falling asleep**
- **The confinement of the CPAP**

Dental sleep retainers are custom designed to fit your teeth. There is no wrong size, nothing leaks, causes irritations or pressure sores on your face. You can sleep comfortably breathing room air. Your dental sleep retainer makes no noise! It's not plugged into any wall. It works anywhere in the world without electricity. It's small enough to fit in the palm of your hand, and makes traveling with it a breeze.

I know DENTAL SLEEP RETAINERS work because I was diagnosed with sleep apnea in 1996 and I am successfully using an oral sleep retainer. I have had the luxury to have worn six different designs of oral sleep retainers and consider myself an expert from personal experience plus I have made hundreds of sleep retainers for my patients.

I am a member of the American Academy of Dental Sleep Medicine, the American Academy of Craniofacial Pain, and the American Academy of Pain Management

I have been a practicing dentist since 1976.

I have been assisted patients treat their Sleep Apnea with a sleep retainers since 1996; I have testimonials from many patients.

Congratulations on seeking this state of the art information. You obviously take your health and well being seriously, and know the importance of controlling the symptoms of sleep apnea. You understand that, left untreated, you increase your risk for obesity, hypertension, heart disease, stroke, depression, and surprisingly even cancer.

If you are concerned about your health, about keeping your job, about your quality of life and that of your loved ones, or you just want to see if a sleep retainer would work for you, please read the enclosed, **"Sleep Apnea: A Consumer's Guide"** and give me a call.

I hope that once you have read the Consumer Guide, you will make an informed, educated decision for the choice of the best treatment option for you.

I am sure you may still have some unanswered questions, so please call our office at: 208-234-7246(PAIN).

Best regards,

Dr. Dwight Romriell