



Jeffrey S. Leider, M.D., P.C.

24001 Orchard Lk. Rd. * Suite 170 * Farmington, MI 48336

Telephone: 248-615-4368

Fax: 248-615-4342

How Common is Snoring?

One out of every four people is a habitual snorer. The problem is more frequent in males and the overweight, and worsens with age.

What Causes Snoring?

Modern medical science has discovered that snoring is often related to physical obstructive breathing during sleep. This physical obstruction occurs when the muscles of the palate, the uvula, and sometimes the tonsils relax during deep sleep, and act as vibrating noise-makers when the air of breathing moves across them (see reverse side). Excessive bulkiness of tissue in the back of the throat into the airway can also contribute to snoring, as can a long palate and/or uvula.

Should I Worry if I Snore?

Socially, snoring is disruptive to family life, causing other family members sleepless nights and often resentfulness. Snorers become unwelcome roommates on vacations or business trips. Also, snoring actually disturbs the sleeping patterns of the snorer, making restful sleep difficult. Finally, can be an indicator or obstructive sleep apnea – a serious medical problem.

What is Obstructive Sleep Apnea?

Obstructive sleep apnea is diagnosed when loud snoring is interrupted by episodes of completely obstructed breathing i.e. pausing and/or gasping. This condition can be serious and sometimes fatal if these last over 10 seconds and occur more than 7 times an hour. The cumulative effect of these obstructed breathing episodes is reduced blood oxygen levels to the brain, forcing the snorer to stay in a lighter sleep stage so that the breathing passage muscles are kept tighter. This prevents the snorer from obtaining the rest benefit achieved only during deep sleep, and can lead to a tendency to fall asleep during daytime hours – on the job, or worse, at the wheel of a car.

What is the Radio-Surgical Treatment of Snoring?

The surgical treatment is much like a visit to the dentist. You are treated right in our office, sitting upright and fully awake in a comfortable chair. After local anesthesia (Lidocaine) is applied, the Radio-Surgical Unit is used to trim and reshape the uvula, which has no real function. Each session takes about 30 minutes. You may require three to five sessions spaced about 4-6 weeks apart.

What are the Advantages of Radio-Surgery Treatment?

The Radio-Surgical Unit is more high-tech, less costly, and usually less painful than laser. The multiple sessions keep the pain down to a sore throat for a week; there is less chance for bleeding with Radio-Surgery treatment. Eating and speaking are less affected. Patients go right back to their normal activity after each session. The biggest advantage to treatment with the Radio-Surgery Unit, however, is that it works. An immediate reduction in snoring is common, with significant improvement usually occurring after the second session. In 85% of patients the snoring is cured, while an additional 12% report a reduced level of snoring.

The initial consultation with me will include an examination to determine whether the Radio-Surgery treatment for snoring is indicated. The procedure is only performed on adults over the age of 16. If you and I decide to go ahead with the surgery, a series of appointments will be scheduled. Most insurance carriers do not reimburse for treatment of snoring, as is the case for cosmetic procedures. Thus, payment in full shall occur prior to the procedure. However, surgery for the treatment of obstructive apnea is often covered. Diagnosis of obstructive sleep apnea must be documented by a sleep study (polysomnography). You should check with your insurance carrier for information about your specific benefits.

Revised September 1997