

Ten Commandments of Obstructive Sleep Apnoea

1. Snoring and inappropriate falling-off-to-sleep are not the minor and laughable nuisance which many people think they are. They are red flags for OSA, which can kill or severely disable you with stroke, heart attack and microsleep car accidents.
<https://www.ncbi.nlm.nih.gov/pubmed/18714779>
2. Even if OSA doesn't kill you, it can blind you (non-arteritic anterior ischaemic optic neuropathy - OSA-induced hypotension leads to hypoperfusion of the optic nerve).
<https://www.ncbi.nlm.nih.gov/pubmed/23772197>

(In my personal series yet to be published, 93% of patients presenting with NA AION had undiagnosed OSA!)
3. Even if it doesn't blind you, it can reduce your vision to the point where you lose your driving licence, especially a commercial vehicle licence for which the visual standards are more exacting.
4. Even if none of these things happen, it can dramatically degrade your quality of life by causing you fatigue, and your bed-partner likewise – passive OSA!
5. OSA is wildly under-diagnosed, and is increasing alongside obesity. In particular, a sleep study should be part of the work-up for stroke and TIA.
<http://sleepmed.com.au/bariatric3.pdf>
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2854698>
6. Not everyone with OSA snores, women in particular may not snore. A sleep study is the only way to be sure.
7. Even so-called moderate disease may need treatment, as it will usually be severe in particular phases of sleep.
8. Treatment is increasingly user-friendly
 - over-the-counter mandibular advancement splints
 - or preferably custom-made mandibular advancement splints
 - APAP machines are more affordable and quieter than ever, with less intrusive delivery systems such as nasal pillows
9. Problems in the nose can greatly worsen OSA, and make effective APAP much harder to achieve. See an ENT surgeon to have your nose looked at.
10. Avoid Viagra if you have OSA, as it potentiates hypotension.

Effective treatment of OSA saves lives and vision