



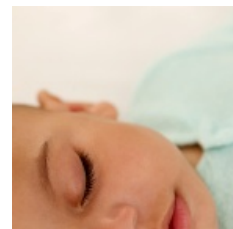
Sleep Apnea Detection

Sleep apnea is a common problem that affects an estimated 2% of all children, including many who are undiagnosed.

If not treated, sleep apnea can lead to a variety of problems. These include heart, behavior, learning, and growth problems.

Symptoms of sleep apnea include:

- Frequent snoring
- Problems breathing during the night
- Sleepiness during the day
- Difficulty paying attention
- Behavior problems (</English/family-life/family-dynamics/communication-discipline/Pages/Evaluating-Behavioral-Problems.aspx>)



If you notice any of these symptoms, let your pediatrician know as soon as possible. Your pediatrician may recommend an overnight sleep study called a *polysomnogram*. Overnight polysomnograms are conducted at hospitals and major medical centers. During the study, medical staff will watch your child sleep. Several sensors will be attached to your child to monitor (</English/ages-stages/baby/preemie/Pages/Apnea-Monitors.aspx>) breathing, oxygenation, and brain waves (electroencephalogram; EEG).

The results of the study will show whether your child suffers from sleep apnea. Other specialists, such as pediatric pulmonologists (</English/family-life/health-management/pediatric-specialists/Pages/What-is-a-Pediatric-Pulmonologist.aspx>), otolaryngologists (</English/family-life/health-management/pediatric-specialists/pages/What-is-a-Pediatric-Otolaryngologist.aspx>), neurologists, and pediatricians with specialty training in sleep disorders, may help your pediatrician make the diagnosis.

Treatment

Many children with sleep apnea have larger tonsils (</English/health-issues/conditions/ear-nose-throat/Pages/The-Difference-Between-a-Sore-Throat-Strep-and-Tonsillitis.aspx>) and adenoids. The most common way to treat sleep apnea is to remove your child's tonsils and adenoid. This surgery is called a tonsillectomy and adenoidectomy. It is highly effective in treating sleep apnea.

Another effective treatment is nasal continuous positive airway pressure (CPAP), which requires the child to wear a mask while he sleeps. The mask delivers steady air pressure through the child's nose, allowing him to breathe comfortably. Continuous positive airway pressure is usually used in children who do not improve after tonsillectomy and adenoidectomy, or who are not candidates for tonsillectomy and adenoidectomy.

Children born with other medical conditions, such as Down syndrome (</English/health-issues/conditions/developmental-disabilities/Pages/Down-Syndrome.aspx>), cerebral palsy (</English/health-issues/conditions/developmental-disabilities/Pages/Cerebral-Palsy.aspx>), or craniofacial (skull and face) abnormalities (</English/ages-stages/baby/Pages/Positional-Skull-Deformities-in-Infants-Audio.aspx>), are at higher risk for sleep apnea. Children with these conditions may need additional treatments. Overweight children (</english/health-issues/conditions/obesity/Pages/default.aspx>) are also more likely to suffer from sleep apnea. Most overweight children will improve if they lose weight, but may need to use CPAP until the weight is lost.

Remember

A good night's sleep is important to good health. If your child suffers from the symptoms of sleep apnea, talk with your pediatrician. A proper diagnosis and treatment can mean restful nights and restful days for your child and your family.

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The information contained on this Web site should not be used as a substitute for the medical care and advice of your pediatrician. There may be variations in treatment that your pediatrician may recommend based on individual facts and circumstances.