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Free Report

The Dangers of Sleep Apnea – Why You Need to Get Treatment

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Dear Friend,

Thank you for visiting ApneaHealthRisks.com and ordering our Free Report *The Dangers of Sleep Apnea – Why You Need to Get Treatment*.

This free report is intended to educate you on what the risks of sleep apnea are, the science behind them and why treatment is so important.

We've packed a lot of information in here in hopes that you will take action if you or a loved one has sleep apnea.

But if you want to learn more, look at the special offer at the back of this Report!

And – no matter what – make sure you take the Epworth Test and take the Action Steps described on pp.18-19 (especially getting a coach to help you “learn the ropes” of treating your sleep apnea!)

Take apnea seriously - because it could make the difference between a long, healthy & well-rested life....and a whole laundry list of health problems!

To Your Health and Sleep,

The Team at Sleep Mask Institute

*The Dangers of
Sleep Apnea –
Why You Need
to Get
Treatment*

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What Is Sleep Apnea?

Apnea is Greek and literally means *without breath*.

In plain English, sleep apnea is when you stop breathing for 10 to 30 seconds at a time during sleep. These cessations of breath can happen up to 400 times a night causing you to wake up gasping for air and destroying your quality of sleep, *whether you remember or not*.

According to the American Lung Association, it is estimated that as many as *18 Million* Americans have sleep apnea.

With each apnea event, sleep is fragmented by the body's attempt to resume breathing. The stress on the body from this cycle leads not only to exhaustion and fatigue, but to serious health risks if left untreated.

Signs and Symptoms of Sleep Apnea

The most common sign of sleep apnea is snoring; however, not everyone who snores has sleep apnea, and not everyone with sleep apnea snores. Other common symptoms are:

- **Excessive daytime sleepiness and**

Snoring is the most common sign of sleep apnea

Other signs include morning headaches, excessive daytime sleepiness and irritability or mood swings

fatigue

- **Choking or gasping during sleep**
- **Morning headaches**
- **Dry throat upon waking up**
- **Learning or memory problems**
- **Inability to concentrate**
- **Irritability, depression or mood swings**

As you will see in this report, if you have some or all the symptoms above and think you may have sleep apnea, it is imperative to your health to go to your health care professional and get a referral for a sleep study.

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Heart and Cardiovascular Risks

Over the past several years medical research has shown a relationship between OSA and cardiovascular disease and congestive heart failure. According to a Yale School of Medicine study presented at the American Thoracic Society 2007 International Conference in San Francisco, having sleep apnea increases a person's risk of heart attack or dying by 30% over a four to five year period.

The Effect of "Fight or Flight"

They found that the occurrence of apneas triggers the "fight or flight" mechanism, which decreases the amount of blood pumped into the heart and causes low levels of oxygen and high levels of carbon dioxide in the blood.

As these levels become more and more out of whack, the body begins to struggle for air, causing a brief awakening and the resumption of breathing. During each apnea episode the body experiences a progressive increase in nervous system activity, increased blood pressure and increased or irregular heart rate.

This stressful cycle causes higher levels of sympathetic nerve activity, which can lead to cardiac arrhythmias and the development of hypertension and heart failure.

*Having sleep
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attack or dying
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Hardening of the Arteries

A different study, conducted in 2002 by the Faculty of Medicine at the Technion-Israel Institute of Technology, showed that sleep apnea causes the same biochemical and cellular changes that are found in atherosclerosis (that's hardening of the arteries).

Researchers found that the white blood cells of sleep apnea patients show an increase in the amount of adhesion molecules on the surface of the cells. These adhesion molecules are responsible for the processes that thicken artery walls.

They also found that these white blood cells produce more free radicals, which damage the endothelial cells lining the vessel walls. The endothelial cells are crucial in maintaining healthy blood vessels, and the damage done to them contributes to the formation of atherosclerosis.

Researchers then added the white blood cells from the sleep apnea patients to a test tube with cultured human endothelial cells. After only an hour, the white blood cells, due to the abundance of the adhesion molecules, had attached themselves to the endothelial cells.

Dr. Lena Lavie, a biochemist who led the study explained, "If the firm binding of white blood cells to endothelial cells in the test tube is what happens in the blood of sleep apnea patients every night, then this may be significant evidence that sleep apnea is associated with an active process of atherosclerosis that inflicts damage on the endothelial cells and may lead to increased risk for cardiovascular disease."

The white blood cells of sleep apnea patients show increased adhesion molecules, which are responsible for the processes that lead to hardening of the arteries

And If You Already Have Heart Problems, the News Isn't Good

The science is there, untreated sleep apnea can clearly increase your risk of heart and cardiovascular troubles. But what if you've already got the heart trouble? What does it mean then? Sadly, it can mean a higher death rate.

A study published in the April 17, 2007 edition of *The Journal of the American College of Cardiology* followed heart failure patients for over 7 years and found that those patients with OSA had double the death rate of those without it.

Yet there is some good news in this study too. While the death rate in OSA patients was 24%, and the death rate in non OSA patients was only 12%, the group of OSA patients who were treated with CPAP therapy had no deaths at all.

Bottom line, for a healthier heart and a longer life, sleep apnea sufferers must get treatment.

Heart failure patients with OSA had double the death rate of those without it

Heart failure patients who were treated with CPAP therapy had no deaths 7 years later

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Stroke

Just as with hypertension and congestive heart failure, OSA causes increased sympathetic nerve activity, increased blood pressure and lowered levels of oxygen in the blood which can lead to stroke. Research shows that **60% of patients who have had a stroke also have OSA.**

A study presented at the American Thoracic Society International Conference, found a startling correlation between sleep apnea and stroke. During the 4 year study of 1,475 people, they found that those with moderate to severe sleep apnea were 3 to 4 times more likely to have a stroke than those who did not have it!!

Researchers said that the stroke risk they found was double the risk of other more common risk factors, such as high blood pressure or diabetes.

Sleep apnea causes high blood pressure, which may be one reason why it increases stroke risk. Another possible reason is the effect of the fight or flight response on the body: part of the reaction increases blood clotting; these clots can cause stroke when in the brain.

Stroke patients with OSA also face a challenge in recovery. It takes a lot of energy and motivation to participate in stroke therapies and rehabilitation programs, but the excessive daytime sleepiness and fatigue that goes along with OSA makes it that much more difficult, resulting in poor

60% of stroke patients also have Obstructive Sleep Apnea

Sleep apnea doubles your risk of stroke

recovery.

Sadly, in addition to the poor functional recovery outcomes, OSA in stroke patients is also associated with a higher mortality rate one year post-stroke.

The National Stroke Association recommends screening for OSA in all acute stroke facilities and rehabilitation programs.

*Fatigue from
sleep apnea
makes recovery
from stroke
more difficult
for sleep apnea
patients*

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High Blood-Pressure

The National Institute of Health lists sleep apnea as a cause of high blood pressure. Studies show that about 30% of people with high blood pressure have OSA, and **80%** of people taking three or more medications to control their blood pressure have OSA (CPAP therapy is especially important for these patients).

During healthy sleep blood pressure decreases, but the prolonged cardiovascular stress caused by apnea episodes leads to increased blood pressure that affects the body night and day.

Even Mild Sleep Apnea Increases Your Risk

Researchers at the University of Wisconsin Medical School discovered that even mild levels of sleep apnea substantially increase the risk of developing hypertension (high blood pressure); and the more severe the sleep apnea is, the higher the likelihood of developing high blood pressure is. The results were published in the May 11, 2000 edition of the *New England Journal of Medicine*.

The 8 year study took more than 700 randomly selected state employees, monitored them for sleep apnea, and then reassessed their health at 4 and 8 years.

Most people taking 3 or more medications for blood pressure have sleep apnea

The more severe the sleep apnea is the higher the risk

After accounting for other possible risk factors, researchers found that people with mild to moderate sleep apnea were *twice* as likely to develop high blood pressure, and the moderate to severe cases of sleep apnea were almost *3 times* more likely to develop it.

***People with
sleep apnea are
2 to 3 times
more likely to
develop high
blood pressure***

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Diabetes and Obesity

It's That "Fight or Flight" Thing Again!!

A Yale study that followed nearly 600 patients for up to 6 years from the VA Connecticut Health Care System, referred for sleep-disordered breathing, found that those with sleep apnea had nearly 3 times the risk of developing diabetes compared to patients without the disorder.

Researchers don't know the exact reason for the increased risk, but they speculate that it is, once again, the effect of the "fight or flight" response on the body. Among the several reactions this response triggers in the body, it is the production of high levels of cortisol that researchers believe link sleep apnea to diabetes. These high levels of cortisol night after night lead to insulin resistance and glucose intolerance, which is a pre-diabetic condition that can lead to diabetes if left untreated.

Sleep apnea can increase your risk of developing insulin resistance.

Approximately 60% of people with Type 2 diabetes also suffer from sleep apnea.

Obesity: The Hormone Connection

Two hormones, ghrelin and leptin, which control the feelings of hunger and being full, are dramatically affected by lack of sleep. Ghrelin is produced in the gastrointestinal tract and stimulates appetite, while leptin is produced in the fat cells and sends the signal to your brain that you are full.

According to Michael Breus, PhD, faculty member of the Atlanta School of Sleep Medicine, when you don't get enough sleep:

- leptin levels go down (meaning you don't feel very satisfied after you eat and you crave carbs)
- ghrelin levels tend to rise, stimulating your appetite and causing you to want to eat more.

The combination of these two effects *alone* can clearly lead to overeating and weight gain.

To demonstrate, in a study conducted at the University of Chicago in Illinois, doctors measured the levels of leptin, ghrelin, hunger and appetite in 12 healthy men. Then the men underwent two days of sleep deprivation immediately followed by two days of extended sleep, all the while their hormone, appetite and activity levels being monitored by doctors.

What was the result? During the sleep deprivation ghrelin levels went up while leptin levels went down, their appetite increased proportionally and their craving for calorie-dense, high carb foods *increased by 45%.*

Lack of sleep messes with your “I’m hungry,” and “I’m full,” hormones

Sleep deprivation caused a 45% increased craving for high calorie – high carb foods

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Depression

People who have OSA and sleep-related breathing disorders appear significantly more likely to develop depression, and the depression increases in severity as the breathing disorder becomes more severe.

Since symptoms of daytime sleepiness, fatigue and lack of enthusiasm are common in both depression and sleep apnea, there is a problem of possible misdiagnosis of depression in the presence of sleep apnea.

If you are diagnosed with depression, you should also get checked for sleep apnea. Studies have shown that treating OSA with continuous positive airway pressure has a beneficial effect on the depression as well as the sleep apnea.

A study at the Stanford University School of Medicine was the first to show a link between depression and sleep apnea. More than 18,000 people from the United Kingdom, Germany, Italy, Portugal and Spain were chosen to be a representative sample of 206 million Europeans.

After analyzing data from the participants regarding sleep quality, quantity, schedules, sleep-related breathing disorders, medical condition and mental disorders researchers found that a whopping 18% of depressed participants had sleep apnea (or some other sleep-related

Given the common symptoms of sleep apnea and depression, you should get checked for sleep apnea if you are diagnosed with depression

breathing disorder), but only 3.8% of non-

depressed participants had sleep apnea....that's a 5 times increased likelihood of sleep apnea (or other sleep-related breathing disorder) among people who are depressed.

Which comes first, depression or sleep apnea remains unclear, as does the degree to which sleep apnea deepens or lengthens depression, and more studies are needed.

*18% of
depressed
participants
also had sleep
apnea*

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Severe Auto Accidents

Many studies have already linked sleep disorders with drowsy driving and an increased risk of having a car crash, but did you know that the crashes of sleep apnea patients tend to be much more severe and involving personal injury?

A study presented at the American Thoracic Society 2007 International Conference in San Francisco compared 800 people with sleep apnea to 800 people without it. And what did they find? People with sleep apnea were 2 times more likely to have an auto accident as people with out it, and 3 to 5 times more likely to have a serious crash that involves personal injury!!

The sleep apnea group had 250 crashes over 3 years, while the group without sleep apnea had only 123 crashes. Researchers were surprised at how many of the sleep apnea accidents involved injury, and that even patients with mild sleep apnea were still having these serious crashes.

And ladies, while it's true that in the general population men have more accidents than women, but this study found that among sleep apnea patients, men and women have a similar crash rate.

What's frightening is that the cognitive effects of untreated sleep apnea could be much more damaging in children because the damage is happening during critical developmental periods, unlike adults.

People with sleep apnea are 2 times more likely to have an auto accident and 3 to 5 times more likely to have a serious crash involving personal injury

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Getting Diagnosed

If you think you may have sleep apnea, go to your doctor and explain why you'd like him to prescribe a sleep study. You can even print out this report to show him why you're concerned. (Remember, the sleep apnea epidemic is not widely known about yet, even to some doctors).

If you are reluctant to visit the doctor or get a sleep study done, then first take the **Epworth test below – if you score more than 10, there's a higher chance you have some sleeping disorder (and therefore should definitely get a sleep study done!)**

Epworth Test

Simply answer the questions below and sum up your score, as follows: .

- 0 = no chance of dozing off
- 1 = slight chance of dozing off
- 2 = moderate chance of dozing off
- 3 = high chance of dozing off

For each situation below, indicate what chance of dozing off you experience.

1. Sitting and reading =
 2. Watching television =
 3. Sitting inactive in a public place =
 4. As a car passenger for 1 hour without a break =
 5. Lying down to rest in the afternoon =
 6. Sitting and talking to someone =
 7. Sitting quietly after a lunch with no alcohol =
 8. In a car stopped in traffic for a few minutes =
- TOTAL= _____

REMEMBER: An aggregate score of 10+ suggests need for extra sleep.

Getting Help After the Diagnosis

After your sleep study, if you are diagnosed, you will be prescribed CPAP therapy.

Here's the trick though: getting help getting set-up and complying with therapy isn't so easy. **That's why we strongly recommend that you don't go at it alone – make sure to get ongoing help/coaching for your CPAP therapy!**

Why? Because this therapy takes some getting used to and there are many reasons people don't use or comply with their CPAP therapy.

The good news: studies have shown that patients that have some kind of chronic care coaching with CPAP therapy have a much higher compliance rate: 77% as compared to only 31% without it. That's a huge difference!!

The bad news: most doctors will refer you to a "DME" (durable medical equipment") provider to get your CPAP prescription filled. The DME will set you up with the equipment, give some instructions, and maybe call you 1 or 2 times. But they won't do "chronic care" coaching, especially over the long haul.

These DMEs are fine for getting the equipment – you just shouldn't expect to really rely on them for long-term coaching and assistance. (Of course, some DMEs do a good job – but they're 1 or 2 out of a 100!)

That's why we recommend that after the DME sets you up on your CPAP, make sure you get help from a specialist in *chronic-care* coaching. Two such providers are SleepCareProgram.com and MySleepMask.com. Both accept Medicare and most private insurance – and both provide their chronic care help for free. (They make their money by billing your insurance for the replacement parts and supplies you'll need anyways).

(Note: SleepCareProgram markets primarily to doctors, while MySleepMask focuses more on patients – but both are good. There may be other companies out there that provide similar services – if you find one, please let us know so we can consider adding it to our list of recommended companies. Thanks!)

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Want to Learn More?

Get our Full Report “The 15 Biggest Health Risks of Sleep Apnea” with a Bonus 30-Day Plan for only \$24.99!

Go to this website: http://apneahealthrisks.com/full_report

SPECIAL: if you order within the next 7 days, then you get over 60% off! That’s right – only **\$9.99!**

And just so you know what you’re getting, we’ve listed the full table of contents below. Now, if you see some of the same titles that are in your Free Report, don’t be fooled!! The Full Report has many more studies and much more information on each topic than the Free Report does.

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That’s a lot of information for only \$9.99!

What are you waiting for??

**Your health (or the health of your loved one) is worth the
small investment of \$9.99, right?**

**Go to http://apneahealthrisks.com/full_report Right Now to
get the Full Report for only \$9.99**