



Important Things to Know About Snoring and Sleep Apnoea in Children

- A child who snores may have sleep apnoea, but not all children who snore will have sleep apnoea.
- Sleep apnoea is a condition where breathing stops for short periods while asleep.
- These events may happen many times per night.
- They disturb sleep and can result in problems during the day.
- In children, the most common cause is larger than normal tonsils or adenoids. This can be treated with surgery.

How are snoring and sleep apnoea related?

A child with sleep apnoea almost always snores. They may struggle to breathe and have restless sleep. There are often breathing pauses which may end with a gasping or choking noise. As the child struggles to breathe, they may wake up briefly. In young children the chest may be sucked in at this time. This may lead to the child sleeping in strange positions. They may sweat a lot when they sleep. In some cases they will wet the bed. In the morning they may wake up with a dry mouth, a headache or confusion.

What is sleep apnoea?

Sleep apnoea is where the child stops breathing for a short time when they sleep. It tends to happen repeatedly during the night. Each time lasts from 10 seconds to a minute or so. Usually such apnoeas occur due to the airway being blocked. In children, the cause is most often big tonsils and adenoids. This is called **Obstructive Sleep Apnoea**. A less common form of apnoea is called central sleep apnoea. **Central Sleep Apnoea** results from a problem with the way that the brain controls breathing.

What are the symptoms of sleep apnoea during the day?

Because of the events during sleep, the child with sleep

apnoea may have a number of problems during the day. Infants may feed poorly, fail to gain weight and be delayed developmentally. Older children may have problems with their behaviour, e.g. being hyperactive, aggressive, having trouble learning and/or not being able to focus well. Being sleepy during the day may lead to personality changes, not doing well at school and problems with how they get on with others. A child with sleep apnoea may lag behind in many areas of development. They may get frustrated and depressed. In the long term, if sleep apnoea is not treated it may cause heart problems and high blood pressure.

How does this affect the child's family?

Sleep apnoea in a child may be very worrying for the family. Possible behavioural problems, combined with potential problems at school, can be stressful for the whole family.

What is the cause of sleep apnoea?

In a child, the most common cause of snoring and sleep apnoea is larger than normal tonsils and adenoids. Obesity can play a part as well. Other risk factors are the shape of the skull and the size of the tongue e.g. a child with Down syndrome has a larger tongue that may block the airway.

In children with a small or receding jaw, sleep apnoea is more common. Children who have had surgery on a cleft palate may also be at a higher risk for sleep apnoea.

How is sleep apnoea diagnosed?

A doctor might suspect this if they see large tonsils and adenoids and certain symptoms are reported. This could include the child snoring, feeling sleepy and possibly having episodes of breathing obstruction. However the best way to be really sure about the problem and its severity is with a [Sleep Study](#). The study is conducted in a special area of the hospital. The child has some fine wires attached to the skin, which are connected to a computer which measures sleep, breathing and oxygen levels. Studies may be done at night in older children or in the daytime in babies. None of the measurements are uncomfortable or painful and children usually manage to sleep. Parents generally stay with the child.

How is sleep apnoea treated?

If a child's sleep apnoea is thought to be due to the size of their tonsils or adenoids, the first thing that is normally done is to take them out. In many cases this will cure the sleep apnoea. If the reason is an abnormality of the facial bones, surgery may sometimes be done to fix this. If surgery is not an option, then the best treatment is [CPAP \(Continuous Positive Airways Pressure\)](#). This involves a small a pump that provides air under gentle pressure through a mask worn over the nose. It only needs to be used at night and the treatment starts working straight away. With the right support, most children do well with CPAP. If the sleep apnoea is due to the child's weight, losing weight may help or even cure the apnoea.

Can it be treated with drugs?

To date there is no effective drug for treating sleep apnoea although a number have been tried. Other remedies have

been marketed, but none has been shown to be effective.

What about sleep habits?

Although sleep apnoea usually requires a treatment such as already outlined, it is also very important that the child has good sleep habits. A regular time to go to bed and to wake up should be set. Before bed, the child should be away from anything that stimulates them (e.g. games, TV). The bedroom should be quiet and dark. In the afternoon and evening you should avoid giving caffeine drinks (including cola and hot chocolate) to your child. See [Good Sleep Habits](#) for more on this.

What other sleep problems can a child suffer from?

Although snoring and sleep apnoea are common conditions, children may also suffer from other sleep disorders. Parasomnias such as [Sleep Walking](#) and [Sleep Terrors](#) are common in childhood and can be distressing to the child and parent. Underlying medical conditions such as epilepsy, asthma or cystic fibrosis may also cause sleeping problems. See these pages for more; [Sleep Problems and Sleep Disorders in School Aged Children](#) and [Behavioural Sleep Problems in School Aged Children](#).

Should I seek help?

If you are worried about snoring or sleep apnoea in your child, you should speak with your GP. A referral will be needed to see a sleep physician. See our [Sleep Specialists](#) page.

Where can I get further information?

http://www.rch.org.au/kidsinfo/factsheets.cfm?doc_id=8678

<http://www.aafp.org/afp/2004/0301/p1147.html>

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A voluntary group offering assistance and support to people and their families living with sleep disorders

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The peak national association of clinicians and scientists devoted to investigation of sleep and its disorders

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Ongoing concerns about sleep or other medical conditions should be discussed with your local doctor.

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Sleep Health Foundation ABN 91 138 737 854

114/30 Campbell Street, Blacktown NSW 2148

T: +61 (0) 2 8814 8655 F: +61 (0) 2 9672 3884