

Snoring is an incredibly common problem causing distress to both individuals and their sleep partners and ironically it is the non-snorer who suffers most, even resulting in relationship problems.

Using a **Somnowell** or **S4S snore guard** can prevent the loss of more than just a good night's sleep!

How many people snore?

- Lots! It has been estimated that as many as 60% of people snore at some stage of their lives and is more prevalent in older people.

Is there a difference between men and women?

- Snoring is considered more common amongst men but it is known that many women snore too – it is perhaps simply less reported and diagnosed. The ratio is thought to be about 2:1 but more men seek advice and help with snoring than women. There are thought to be important issues such as fat distribution, anatomy and hormone differences that make snoring more prevalent in males than females.

Why do people snore?

- Snoring is the sound made by vibrations of the soft palate and other tissues of the nose and throat – the upper airway. Turbulence is created by a restriction when breathing in and this can be anywhere from the nose to the vocal chords. Muscle tone is reduced when we sleep allowing these partial blockages to occur more readily. It is now widely considered that tongue position plays a very important role in snoring.

Are there different kinds of snoring?

- Yes – snoring is mainly associated with one or more of the following; being overweight and unfit, higher alcohol consumption, sleeping pills, sleeping position, nasal stuffiness, mouth breathing, small or collapsing nostrils and tongue position.

Can snoring be cured?

- No, but it can be controlled. One or more different approaches may be required, for example, losing weight, avoiding excessive alcohol consumption, nasal sprays to clear passages, nasal airway dilator strips devices to reduce mouth breathing and the use of **Snoreguards**.

Can dentists help me with my snoring?

- Depending upon its cause, dentists can often help you control your snoring by manufacturing appliances called **Snoreguards** or more correctly **Mandibular Advancement Devices (MAD)**.

How do I know if my snoring is tongue based?

- Try this self-test – put your tongue out as far as it will go, grip it between your teeth and try to make a snoring noise. If it is reduced or eliminated in this position it is likely a **Snoreguard** will help.



I have heard of Sleep Apnoea – what is it?

- Obstructive Sleep Apnoea (OSA) is a kind of more 'extreme' snoring occurring when breathing is completely interrupted stopping air reaching the lungs. It becomes clinically significant if it lasts longer than 10 seconds and occurs 10 times an hour or more. It's likely that partners or family will be most aware of this sleep pattern which causes poor, interrupted sleep and some or all of these symptoms – loud snoring, interruptions and gasps, excessive daytime tiredness, irritability, headaches, forgetfulness, mood changes, anxiety, depression, reduced libido.

How is OSA diagnosed?

- This requires sleep studies requiring overnight monitoring and tests carried out in hospital. Referral, usually by your GP, to a Specialist in hospital will be required. OSA can remain undiagnosed and misdiagnosed (resulting in inappropriate treatments such as antidepressants).

And how is it treated?

- Usually by continuous positive airway pressure (CPAP) although special dental devices can be helpful too.

How do Snoreguards work?

- **Snoreguards (Mandibular Advancement Devices)** can help with 'tongue based' snoring. They work by moving the lower jaw (mandible) forward and holding it there during sleep. This pulls the tongue away from the back of the throat and soft palate and helps maintain a more open airway.

Are there different types?

- Yes, many. They all aim to do the same basic thing but some are better made, better fitting and more effective than others.

Can I buy them ready made?

- You can but they are generally not a great fit and are difficult for people to mould themselves. They are cheaper than custom made ones but it is always better to invest a little more in a professional appliance. Cheap do-it-yourself ones can be used to 'test' if this type of appliance will work before then making a better one.

How do the custom made ones differ from the cheaper varieties?

- They are made in a specialised dental laboratory on models cast from properly taken dental impressions. Consequently they are tailor made for each individual and fit more accurately and comfortably.



What materials are used?

- A variety of vacuum formed plastics are used - either rigid or semi-rigid. There are a number of different designs but they all work by holding the lower jaw in a forward position.

How far does the lower jaw need to be brought forward?

- This is difficult to assess and will be different for different people. They are made generally to advance the jaw by about 75% of its maximum travel.

Are they adjustable?

- Fixed and adjustable ones are available with adjustable ones having the obvious advantage of the user being able to try out different levels of advancement to see what works for them.

Are they comfortable?

- Inevitably they are something of a mouthful and take time to adapt to and so compliance with wearing them can sometimes be difficult. However, the benefits make it worthwhile persevering.

Are there any side effects?

- They can sometimes lead to some jaw joint discomfort although they can also help reduce night time tooth grinding (bruxism). Increased salivation can occur and they can also lead to the biting position being altered first thing in the morning. The bite rapidly settles back into its normal position however.

Can you guarantee they will work?

- In short – no. But if your snoring is tongue based they will certainly help and can eliminate snoring altogether in many instances. It is essential wearers persevere with the appliance though – if you don't wear it then it can't work!

