

How is testing done?

Sleep testing can be done in your own home.

It is simple, comfortable, cost effective and reliable.



Possible Complications

Untreated sleep apnea in children is a major independent risk factor contributing to:

- Behavior and learning issues both at home and at school. Sleep apnea can also be a contributing factor to attention deficit disorders in some children.
- Enuresis: Sleep apnea can cause increased nighttime urine production, which may lead to bedwetting.
- Growth: Children may not produce enough growth hormone, resulting in abnormally slow growth and development.
- Obesity: Sleep apnea may cause the body to have increased resistance to insulin or daytime fatigue with decreases in physical activity. These factors can contribute to obesity.
- Cardiovascular: OSA can be associated with an increased risk of high blood pressure or other heart and lung problems.



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Could Your Child Have Obstructive Sleep Apnea?



Pediatric Home Sleep Studies

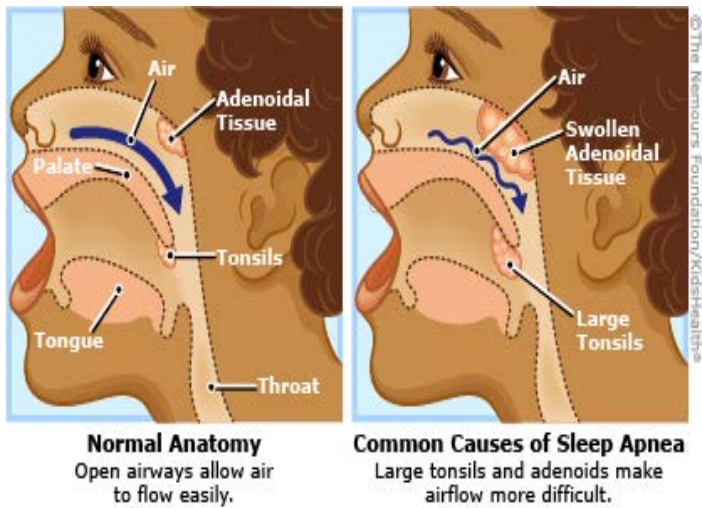
Today it is easier than ever, and may be done in the comfort of your own home...

Ask your child's medical provider if a home sleep test is appropriate for your child.



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Obstructive Sleep Apnea

Snoring is considered a major indicator of OSA.

Obstructive sleep apnea is characterized by pauses in breathing that occur during sleep. The snoring can be interrupted by complete blockage of breathing with gasping and snorting noises and associated with awakenings from sleep. Due to a lack of good quality sleep, a child with sleep disordered breathing may be irritable, sleepy during the day, or have difficulty concentrating in school. Busy or hyperactive behavior may also be observed. Bed-wetting is also frequently seen in children with sleep apnea.

A common physical cause of airway narrowing contributing to obstructive sleep apnea (OSA) in children is enlarged tonsils and adenoids. Overweight children are at increased risk because fat deposits around the neck and throat can also narrow the airway. Children with abnormalities involving the lower jaw or tongue or neuromuscular deficits such as cerebral palsy have a higher risk of developing sleep disordered breathing.

Does Your Child Show Any Of These Symptoms?

- Snoring
- Long pauses in breathing
- Restlessness during sleep
- Chronic mouth breathing during sleep
- Excessive daytime sleepiness or irritability
- Hyperactivity during the day
- Obesity

Share with your child's Medical Provider if you experience **one or more** of these symptoms to see if you, like many others, are at risk.

"It is estimated that 1 to 4 percent of children suffer from sleep apnea, many of them being between 2 and 8 years old. Studies have suggested that as many as 25 percent of children diagnosed with attention-deficit hyperactivity disorder may actually have symptoms of obstructive sleep apnea and that much of their learning difficulty and behavior problems can be the consequence of chronic fragmented sleep." (sleepapnea.org)



Talk to your child's physician if you are concerned about your child's breathing during the night. In addition to a complete medical examination and evaluation of the upper airway, your doctor will discuss the usefulness of a home sleep test.