



睡眠窒息症綜合治療中心



本中心匯集各專科的醫護人員，為阻塞性睡眠窒息症的病者提供一站式診斷及治療服務，並透過教育活動提高公眾對阻塞性睡眠窒息症的認識。

甚麼是阻塞性睡眠窒息症?

阻塞性睡眠窒息症是一個新近發現的病症，香港約有2-4%的成年人受影響。患者的上呼吸道於睡眠時受阻，空氣因此不能順利通過呼吸管道，引致窒息。這種情況每晚可發生多次，令患者身體缺氧、經常驚醒及得不到充足的睡眠。患者會在日間嚴重瞌睡、智力或工作表現倒退，及容易遇上因疲倦造成的交通意外，更有較高機會患上高血壓、糖尿病、心臟病和腦血管疾病。

主要症狀

如有以下症狀，就可能是患上阻塞性睡眠窒息症：

1. 習慣性出現嚴重鼻鼾
2. 睡眠時呼吸停止
3. 日間嚴重瞌睡

高危因素

以下因素會增加患上阻塞性睡眠窒息症的風險，而且年紀愈大，患病的風險愈高：

1. 年長
2. 肥胖
3. 嚴重鼻敏感
4. 下顎細
5. 頸短
6. 扁桃腺肥大
7. 甲狀腺分泌過低
8. 慢性心肺疾病

診斷

如懷疑自己患上阻塞性睡眠窒息症，可到本中心由睡眠窒息症專科醫生作臨床評估。此外，亦需接受

多頻道睡眠測試，以記錄睡眠模式、睡眠時的心跳率、呼吸模式、肌肉活動、鼻鼾及動脈含氧水平，從而確診是否患上阻塞性睡眠窒息症。多頻道睡眠測試是一項無痛及無創傷性的檢查，在本院的睡眠測試室內進行。

對於一些較難治理及複雜的個案，例如先前曾接受手術治療阻塞性睡眠窒息症，但效果欠佳的病者，醫生會安排睡眠內視鏡檢查。這項檢查是在使用鎮靜藥物後，利用可屈曲的內視鏡檢查病者的上呼吸道，找出阻塞的位置和原因。



治療方法

由資深的睡眠窒息症專科醫生根據個別病者的情況，建議適合的治療計劃，包括：

1. 持續正壓通氣 (CPAP) 睡眠機：利用氣壓固定病者的上呼吸道，以防止阻塞。
2. 牙膠：利用特別訂做的牙膠矯正病者的下顎，擴闊舌頭後方的空氣通道。
3. 外科手術：切除或矯正阻礙上呼吸道的喉部結構，使進出肺部的氣流恢復正常。
4. 生活方式的改變，例如體重控制。

療程完成後，本中心的睡眠窒息症專科醫生會評估病者的情況，並按病情所需提供適合的進一步治療。

查詢或預約，歡迎聯絡我們

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Comprehensive Sleep Apnea Centre



The Comprehensive Sleep Apnea Centre provides one-stop service in diagnosis and management of patients with Obstructive Sleep Apnea Syndrome (OSAS) through a multi-disciplinary approach. The Centre also provides public education programmes to promote awareness of OSAS.

What is Obstructive Sleep Apnea Syndrome?

OSAS is a recently recognized disease that affects 2-4% of adults in Hong Kong. It is due to repeated collapse of the upper airway during sleep, leading to arterial oxygen desaturation and frequent awakenings. Individuals suffering from OSAS would have fragmented sleep and poor sleep quality. They also have excessive daytime sleepiness, impaired intellectual performance and more fatigue-related vehicle accidents. Those suffering from OSAS would have an increased risk of having hypertension, insulin resistance, cardiovascular and cerebrovascular diseases.

Main symptoms

If you have the following symptoms, you may be suffering from OSAS:

1. Habitual loud snoring
2. Apnea (stopping of breathing) during sleep
3. Excessive daytime sleepiness

Risk factors

The following factors put an individual at a higher risk of having OSAS. The risk also increases proportionately with age.

1. Elderly
2. Obesity
3. Severe nasal allergy
4. Small jaw
5. Short neck
6. Big tonsils
7. Hypothyroidism
8. Chronic cardio-pulmonary disease

Diagnosis

Individuals suspected of having OSAS can consult a sleep apnea specialist at our Centre for clinical assessment. In order to confirm the diagnosis, polysomnography (multi-

channels overnight sleep study) has to be performed. Polysomnography is a painless and non-invasive procedure to record the sleep pattern, heart rate, breathing pattern, muscle activities, snoring and arterial oxygen levels during sleep. The procedure is conducted in our Sleep Laboratory.

In difficult and complicated cases such as failure after previous sleep surgery, sleep endoscopy will be carried out under sedation to assess the level of the narrowed segment in the upper airway using a flexible endoscope.



Therapeutic options

A suitable treatment regimen will be formulated by experienced sleep apnea specialists for individual patients. Therapeutic options include:

1. Continuous Positive Airway Pressure (CPAP) devices: To splint the upper airway with air pressure in order to prevent its collapse during sleep.
2. Oral appliances: To reposition the lower jaw with a custom made dental device, thereby enlarging the airway space behind the back of the tongue.
3. Surgery: To resect or reposition throat structures obstructing the upper airway so as to restore normal flow of air in and out of the lungs.
4. Modification of lifestyles such as weight control

Follow-up assessment will be provided at our Centre after treatment to evaluate the patient's condition to determine whether further support is necessary.

For enquiries and appointment, please contact us at:
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