

# Obstructive sleep apnoea/ hypopnoea syndrome and obesity hypoventilation syndrome

Information for the public

Published: 20 August 2021

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## Sleep apnoea and other breathing conditions during sleep

Sleep apnoea is when a person's breathing stops for a short time during sleep. Usually this happens when the throat muscles relax and block their airway. This is called obstructive sleep apnoea/hypopnoea syndrome (OSAHS), although it is more often known as obstructive sleep apnoea or OSA. OSA is common and affects about 1 in 20 people. People may not even know they have it, but it can cause loud snoring and can also interrupt sleep, causing excessive sleepiness, tiredness or fatigue.

Some people with OSA also have a common lung condition called chronic obstructive pulmonary disease (COPD). Having both of these conditions (called 'COPD–OSAHS overlap syndrome') can make breathing problems during sleep much worse.

Another related condition is obesity hypoventilation syndrome. This affects some people who are obese. People with obesity hypoventilation syndrome cannot breathe quickly or deeply enough during sleep (underbreathing), causing the oxygen level in their blood to fall. Many people with obesity hypoventilation syndrome also have OSAHS, but their oxygen levels are even lower than for people with OSAHS alone.

These conditions often go unrecognised and can severely disrupt people's lives. As well as interrupting sleep they are often linked with serious health problems such as high blood pressure, diabetes, heart disease and stroke. Excessive sleepiness can also increase the risk of motor vehicle and work-related accidents. We want this guideline to make a difference to people with breathing conditions during sleep by making sure that:

- these conditions are always recognised, and the right tests offered to confirm a diagnosis
- the people most severely affected see a sleep specialist sooner
- earlier treatment is offered to people who could benefit from it
- everyone is offered lifestyle and sleep advice.

## Making decisions together

Decisions about treatment and care are best when they are made together. Your healthcare professionals should give you clear information, talk with you about your options and listen carefully to your views and concerns.

To help you make decisions, think about:

- What matters most to you – what do you want to get out of any treatment or care?
- What are you most worried about – are there risks or downsides to treatments that worry you more than others?
- Are there any lifestyle choices you can make to help your condition?
- What happens if you do not want to have treatment?

If you cannot understand the information you are given, tell your healthcare professional.

Read more about [making decisions about your care](#).

## Where can I find out more?

The [NHS website](#) has more information about sleep apnoea.

The organisations below can give you more advice and support.

- [Sleep Apnoea Trust](#), 0800 025 3500
- [The Sleep Charity](#), 01302 751 416

NICE is not responsible for the content of these websites.

To share an experience of care you have received, contact your local [Healthwatch](#).

We wrote this guideline with people who have been affected by sleep apnoea and related conditions, as well as the staff who treat and support them. All the decisions are based on the best research available.

ISBN: 978-1-4731-4230-5