

Benefits from upper airway surgery for sleep apnea found to equal CPAP

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Adults who struggle with CPAP treatment for obstructive sleep apnea (OSA) should be considered candidates for reconstructive surgery on the upper airway, because it holds the same quality-of-life (QOL) benefits but with more permanence. This thesis is in new research published in the August 2009 edition of *Otolaryngology-Head and Neck Surgery*.

Continuous positive airway pressure (CPAP) therapy is a highly effective means for treating obstructive [sleep apnea](#), but because it involves a mask and set of hoses, it can be frustrating and uncomfortable for some patients, and compliance may be short-lived.

The Australian authors of the study discovered that among moderate-to-severe OSA-suffering patients, those treated through upper airway [surgery](#) experienced the same level of long-term quality-of-life improvement as their peers who were treated with CPAP therapy. Among the QOL benefits were improvements in snoring, sleepiness, and neurocognitive impairment. In contrast, those patients who were prescribed, but did not adequately use CPAP, had minimal QOL improvement.

The upper airway includes nose and throat (pharyngeal) areas, particularly behind the soft palate and tongue. [Reconstructive surgery](#) to treat sleep apnea involves clearing any blockages in those areas that might be hindering breathing.

Source: American Academy of Otolaryngology -- Head and Neck

Surgery

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