Symptoms include:

- Snoring
- Mouth breathing
- Restlessness during sleep
- Sleeping in odd positions
- Periods of not breathing
- Teeth grinding
- Night terrors
- Mood changes
- Poor concentration
- Bed wetting
- Headaches

Children with undiagnosed OSA are frequently misdiagnosed as having ADHD and placed on unnecessary medications.

Sleep breathing disorders in children, particularly pediatric obstructive sleep apnea (OSA), often goes undiagnosed. OSA can occur in children at all ages, including infants. However, children may instead be treated for ADHD, since hyperactivity can actually be a symptom of OSA. Untreated OSA can lead to more severe health problems, including diabetes, cardiovascular disease and hypertension.

In most cases, OSA is caused by a poorly positioned jaw or tongue that leads to a blocked airway. Sleep apnea, essentially, is the absence of breathing when asleep. The blocked airway causes slow suffocation, and the sleeper is briefly but abruptly woken up throughout the night in order to open the airway and breathe. Bruxism, or teeth grinding, is also a symptom of sleep apnea—it’s an unconscious movement to open the airway while sleeping. Children who suffer from this interrupted and poor sleep suffer from excessive sleepiness during the day, hyperactivity or irritability, migraines and even depression or cognitive impairments.

Luckily, pediatric OSA can be cured because in children, it’s possible to manipulate the development of their airways so they aren’t blocked or obstructed as they grow up. The American Academy of Pediatrics recommends all children get screened for snoring, and those who do snore should undergo further evaluation to test for OSA and other sleep disorders. Dentists are often able to provide a preliminary screening for OSA and can refer patients to a sleep specialist for further screening and treatment.

**Signs to Watch**

Look for the following common OSA symptoms in your child:

- Snoring
- Restlessness during sleep (are the sheets strewn all over the bed when the child wakes up?)
- Gasping or choking when waking up
- Difficulty waking up
- Trouble concentrating, easily agitated
- Nightmares or night terrors
- Teeth grinding (bruxism)
- Frequent headaches
- Dark circles under eyes
- Excessive daytime sleepiness

Talk about these symptoms with your child’s pediatrician and ask to be referred to a sleep specialist. You can also use the “BEARS” sleep screening algorithm, which is a series of questions available on the TMJ & Sleep Therapy Centre website: http://tmjtherapycentre.com

The BEARS screening tool provides information to help doctors assess whether a child likely has a sleep disorder.

**Treatment**

Adult therapies for OSA, including CPAP machines or oral appliances, are not appropriate for children. Pediatric OSA is usually treated with dynamic orthopedic therapies, with the goal of increasing airway volume and encouraging or correcting skeletal development. If it is diagnosed early, pediatric OSA can be completely cured in as little as three months, however, the time needed for treatment varies with each child.

When a child is diagnosed with OSA, the entire airway should be evaluated to determine where it is obstructed. There are four possible points of obstruction, as shown on Figure 1.

Depending on the location and severity of the obstruction, treatment may include expanding the upper or lower jaw or correcting their alignment, tongue and lip exercises and lifestyle changes.

TMJ & Sleep Therapy Centre of San Diego, located in La Mesa, provides non-invasive treatment for patients with sleep apnea and TMJ disorders. For more information, visit www.TMJTHERAPYCENTRE.COM.

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Obstructive sleep apnea (OSA) is caused by an airway blockage (obstruction) during sleep. During the day, muscles in the airway region keep the throat wide open, but during sleep, these muscles relax to a point where the airway collapses and becomes obstructed. Although obstructive sleep apnea (OSA) is typically considered an adult condition, there is no age boundary, and OSA can affect otherwise healthy children. OSA may be the root cause of childhood behavior and attention problems. Enlarged tonsils and small structural features of the maxilla / nose, mouth, and throat may contribute to OSA. Proper evaluation and testing is needed for accurate diagnosis.

OSA is a medical condition that is diagnosed by a medical doctor, but can be treated by a dentist with special understanding and training on this life-threatening breathing disorder. At present, the primary method for diagnosing OSA is to have the patient undergo a sleep study, known as polysomnography (PSG) or home sleep test (HST). We are happy to assist our patients in coordination of necessary sleep testing.

Contact TMJ & Sleep Therapy Centre of San Diego
Phone: 619.466.2774 | www.TMJTHERAPYCENTRE.COM

We are here to help your patients! TMJ & Sleep Therapy Centre of San Diego is accredited by the American Academy of Dental Sleep Medicine. Our director, Dr. Steven Olmos, is certified in both Dental Sleep Medicine and Craniofacial pain. We are dedicated exclusively to non-surgical treatments for Sleep Apnea and Craniofacial Pain.

We understand the unique needs of both adult and pediatric patients, and we are committed to the highest standard of care.