



Obstructive Sleep Apnea and It's Homoeopathic Management

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ABSTRACT

The prevalence of obstructive sleep apnea is rising. The information in this article relates to obstructive sleep apnea and how homoeopathy can aid in treating it.

The illness known as obstructive sleep apnea (OSA) is brought on by repeated collapses of the upper airway while you sleep. It is the respiratory issue most frequently linked to sleep.

Introduction

OSA happens when the muscles that hold your tongue and soft palate in place in your throat loosen. Your airway may possibly shrink or even close as a result, temporarily stopping your breathing.

Normally, air should always enter the lungs smoothly from the mouth and nose, including during sleeping. Apnea, often known as an apneic episode, refers to instances when breathing entirely stops. In OSA, the usual airflow is sometimes interrupted throughout the course of the night.

Though it can affect anybody, including children, OSA is most prevalent among older males. Following menopause, the incidence increases to the point that postmenopausal women and men have identical rates. OSA is frequently linked to snoring, particularly when the snoring is interspersed with stillness. Airflow squeezing through the constricted airway area is what causes snoring. It's crucial to keep in mind that not everyone who snores has OSA, and snoring isn't always a sign of something potentially bad.

Untreated OSA can result in major health issues such pulmonary hypertension, high blood pressure, heart disease, stroke, diabetes, and gestational diabetes.

Obstructive sleep apnea symptoms include:

-Loud snoring, gasping, choking, snorting, and breathing pauses as you sleep

Causes

Some of the illnesses connected to OSA include:

Chronic lung diseases like asthma, chronic obstructive pulmonary disease (COPD), and pulmonary fibrosis neuromuscular conditions like a stroke that can affect brain signals to your chest muscles and airway obesity hypoventilation syndrome, a breathing disorder in people with obesity endocrine conditions like hypothyroidism, acromegaly, and polycystic ovary syndrome that may affect your breathing when you're asleep.

Risk factors

Obesity, craniofacial morphology, enlarged tonsils or adenoids, co-morbidities such neuromuscular illnesses, and habits like smoking, drinking, and drug usage are among the variables that predispose people to sleep apnea. The greatest risk factor is central obesity, which is indicated by the waist-hip ratio, neck circumference (>15 inches for women and >17 inches for males), and BMI (best body mass index BMI calculator online). [Excess fat-free muscle tissue increases the size of several upper airway structures, compressing lateral airway walls, whereas increasing pharyngeal fat deposits, under the jaw, within the tongue, soft palate, or uvula all contribute directly to upper airway narrowing.

- Obesity (more prominent in adults than in children) (more significant in adults than in children).
- Aging (up to age 65). (up to age 65).
- gender of a man.
- Menopause

(Risk is higher among African Americans, and it doesn't seem to be related to respiratory issues or obesity.²⁸)

abnormal morphology of the skull and face (e.g. receding chin or mandible, or narrow or receding maxilla).

large adenoids or tonsils (especially in children).

issues with the upper and lower respiratory tract in kids and teenagers.

Allergies in children (Allergy is frequently present in pediatric patients with habitual snoring; presence of allergy is associated with an increased risk of OSA in this population.)

Neuromuscular disorders that affect the muscles in the airways.

Smoking (Cigarette smoking causes increased upper airway inflammation; even exposure to second-hand smoke is associated with habitual snoring).

Alcohol use (Ingestion of alcohol before sleep has been shown to increase upper airway collapsibility and to precipitate obstructive apneas and hypopneas during sleep.)

Drug use, esp. sedatives, sleeping pills, opioids, or heart medications.

Allergies in children (Allergy is typically prevalent in children who snore regularly, and in this demographic, allergy is linked to an increased risk of OSA.)

abnormalities of the nervous system that influence the muscles of the airways.

Smoking (Cigarette smoking promotes increased upper airway inflammation; even exposure to second-hand smoke is related with frequent snoring)

(Cigarette smoking causes increased upper airway inflammation; even exposure to second-hand smoke is associated with habitual snoring).

Alcohol use (use before bed has been proven to increase upper airway collapsibility and to hasten obstructive and hypopneic apneas and hypopneas.)

use of drugs, particularly sedatives, sleep aids, opioids, or cardiac medicines.

Heart failure and stroke.

Family history of sleep apnea. (Genetic factors associated with craniofacial structure, body fat distribution and neural control of the upper airway muscles interact to produce the OSA phenotype.³¹)

Miasmatic Analysis

There is thread running through sleep apnea and its co-morbidities that needs to be acknowledged. The **tubercular miasm** confers a weakness upon the respiratory system as well as an allergic disposition. adenoids which in turn cause obstruction of the airway leading to snoring, sleepdisordered breathing or, in severe cases, apneic episodes (i.e. sleep apnea).Chronic allergies give rise to rhinitis and sinusitis and hypertrophy of tonsils and

RUBRICS for Symptoms of Sleep Apnea

Rubrics for causation will be considered after more general sleep rubrics suitable for sleep apnea patients. These are organized according to Mentals, Generals, and Particulars.Obviously, each case will be different and each homeopathic practitioner will have to choose the most characteristic signs and symptoms of their patient, find the rubrics that most closely and accurately match these, and repertorize accordingly.

MENTALS

MIND – DELUSIONS – suffocation; as if – sleep; on going to

MIND – FEAR – suffocation, of

MIND – FEAR- suffocation, of – closing eyes

MIND – FEAR- suffocation, of – lying, while

MIND – FEAR- suffocation, of – night

MIND – FEAR- suffocation, of – sleep, during

MIND – STARTING – sleep – from – suffocative breathing, from

GENERALS

GENERALS- CHEYNE-STOKES respiration

GENERALS- OBESITY – accompanied by – respiration – difficult

GENERALS- OBESITY – accompanied by – respiration – wheezing

PARTICULARS

RESPIRATION- ARRESTED

RESPIRATION- ASPHYXIA

RESPIRATION- GASPING -sleep; during

RESPIRATION-HYPERVENTILATION

RESPIRATION- IMPEDED, obstructed

HOMOEOPATHIC MANAGEMENT FOR OSA

The aim of homeopathy treatment is not only to treat sleep apnoea but to address its underlying cause and individual susceptibility. As far as therapeutic medication is concerned, several well-proved medicines are available for sleep apnoea treatment that can be selected on the basis of cause, sensation, and modalities of the complaints.

Arsenicum Album: Homeopathic remedies Arsenicum album for sleep apnea is often prescribed for individuals who have breathing difficulties at night and is considered for people with a fearful, tense, and agitated response to illness.

Lachesis:Lachesis is a homeopathy medicine for sleep apnea prescribed for conditions that worsen at night. This homeopathic medicine is designed for people who are typically fearful and anxious, but also prone to jealousy and excessive talking.

Sulphur: By reputation, sulphur is a commonly prescribed homeopathic remedy, especially for nighttime congestion and sweating. Homeopathic sulphur combats a wheezy cough and congested head, both of which are suffered in sleep apnea.

SpongiaTosta: This homeopathic remedy for croup may help congestive sleep apnea sufferers as it treats respiratory symptoms that worsen when lying down.

Sambucus: For difficulty breathing at night. This remedy is most appropriate for individuals who may have nasal obstruction or asthma and actually jump up out of bed with a feeling of suffocation

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