

# Obstructive sleep apnea in the young child



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# Obstructive apnea

- There are several possible causal factors
- The apnea often goes unnoticed
- Associated with behavioral problems during the day in the young child



# Epidemiology

- Differential diagnosis with “primary snoring”
- 10% of children have primary snoring during preschool and school age
- Several studies have found around 3% of children with obstructive sleep apnea



# Causes of obstructive apnea

- Multiple causes, some are medical conditions, others unknown
- MEDICAL CAUSES
- Facial malformations, or in the airway passages( eg. Down, Cruzon, Artrogriposis, Hunter, Hurler, Pierre-Robin, Marfan, Treacher Collins,etc)



# Other causes of sleep apnea

- Allergic rhinitis
- Hypertrophy of tonsils and adenoids
- Chronic irritation (smoke in the house, high smog content)
- Obesity
- Micrognathia
- Multiple less frequent causes



# Effects of obstructive apnea

- Physiological effects:
- Periodic interruption of sleep
- Worse quality of sleep, interrupting phases III and IV
- Periods of apnea with oxygen desaturation
- Less rest during the night



# Clinical Manifestations

- Intense snoring during the night, but may also occur in the day
- Somnolence during the day
- Hyperactivity during the day
- Diminished ability to concentrate
- More irritable and aggressive during the day



# Diagnosis

- Observatin. Restless sleep, frequent changes in position.
- Sleep in unusual positions
- Snoring and apneas
- Polysomnographic study and actigraphy
- Measure oxygen saturation





# Treatment

- Resolve the original cause
- Surgery if indicated
- Removal of tonsils and adenoids if necessary
- Positive Pressure in the airways  
(CPAP machine)