

YOUR PERSONAL NEWSPAPER

AUGUST 11, 2011 |

CPAP Questions And Answers

April 16, 2010

Hey, long time no post, eh? Up today I've taken a look at some of the longtail phrases in my traffic logs. I don't rank well for some of the basic sleep apnea phrases, but I do have some pretty good longtail searches. I list some of the interesting ones below and give my reply. If you like, let me know in the comments below.



Sleeping With CPAP

“i throw my mask off when I sleep” and “cpap taking off mask at night without knowing”

Likely one of two things are the cause here. You may be a bit claustrophobic. This is perfectly natural. Sticking a mask on your face before you go to bed that blows air at you all night long is not a normal thing to do. Try the steps I describe here to acclimate to the mask and gradually calm your fears. I had this problem in a bad way on my first attempt with CPAP therapy several years ago. My claustrophobia was so bad that just *looking* at the machine during the day was enough to send my heart racing.

The other likely cause of this problem is that your nose is clogged up during a point in your sleep cycle when you are slumbering lightly. It doesn't take much to wake you up at this point, and the clogged nose can be very uncomfortable. You wake up, though not fully, sling your mask off and doze off again. This happened to me too for several months before I figured it out and took countermeasures. I describe this at length in my post *Secrets of My CPAP Success*. Read that post and see if your experience matches mine. I'll be writing more soon about my battle to keep the nasal passages open.

“how long before you catch up on sleep with cpap”

I've read somewhere that for a normal sleeper the past 7 nights are the most relevant. If we applied this to OSA sufferers then just a week of effective CPAP therapy would be enough to make you right as rain. But that isn't the case. My regular doc told me

that it takes about 6 months of properly compliant CPAP treatment to become your old self again. And in my experience that is roughly true. Of course I couldn't really understand that until I'd done it myself. And because it took me a good 6 months to achieve a level of decent compliance, getting back to some pre-OA level of basic humanity took me about a year.

But if you're just starting out I wouldn't worry about that. Just do what you can on the sleep machine every night and work on improving your compliance all the time. The great thing about CPAP is that even if you can only manage a couple of hours a night in the mask you WILL feel a whole lot better than you do now. I can guarantee that.

And even after 6 months of good compliance, there are still subtle improvements awaiting, both in your body and your mind. At the time I write this I've been on CPAP just about 2 years and 3 months. Knock 6 months off that for the time I've been effectively compliant. So its about 1 year and 9 months now of CPAP success for me. And every month I do notice small improvements. If you want a way to gauge your improvement, try watching one of your favorite game shows. One that requires at least a little bit of brain power. Probably the most common would be Wheel Of Fortune and Jeopardy!. As your compliance improves you should notice your mental reflexes improving as well.

But if you are just starting out on CPAP, even 2.5 hours a night under the mask can make you feel like you've been shot out of a cannon the next day. Pretty cool.



Astelin

“i can t breathe threw my nose when i sleep”

Ok, what are you going to do about it? For nearly 2 years now I've been using antihistamines to keep my nose clear thru the night. Its worked fairly well. Over that time I've averaged a little over 6 hours per night on CPAP. I use a regimen of three antihistamines: Astelin, Cetirizine, and Loratadine. Cetirizine is better known as Zyrtec and Loratadine you'll recognize as Claritin. I rotate thru these from night to night.



Claritin



Zyrtec

Why three? Well, for the long answer I'm going to write a full post about it. Basically its what works for me, at least for now. I find that if I take the same antihistamine every night it becomes less effective. So I rotate. A lot of experience went into this, and you'll really want to catch the full story. I'm working on it.

"how to set the air numbers sleep apnea machines"

DO NOT DO THIS. For gosh sakes, you had at least one and quite possibly two nights of sleep supervised by trained professionals and the paperwork reviewed by a doctor. All of that work to come up with a CPAP number that best fits you and your sleep patterns and now you want to change it? That is not smart. Its a lot worse than that, but this is a family-friendly blog.

I can understand the impulse. As a guy who is something of a tech geek I find these machines fascinating. I've spent some time learning how the thing works and I know how to access the control screens. I could change my CPAP number. But I won't. I'm not a doctor and I don't play one on TV. Now if you are interested in digging up more data or changing your ramp-up

time by all means go ahead and make adjustments.

If you've been complying for a long time and you think your OSA has improved, schedule an appointment with your doctor. You'll need to prove your condition has changed in the lab.

"cpap can't breath nose ent doctor"

I've already covered the plugged probiscus. I brought up this search phrase because of the "ent doctor" part. Before shelling out some dough for an ENT appointment, give my antihistamine régime a whirl. It doesn't cost much and it might well work. If it doesn't THEN go ahead and get your regular doc to give you a referral to an ENT specialist. Its unlikely your insurance will cover it all, and the out of pocket cost could be considerable.

This was my plan too. But the antihistamines are working. Eventually I'll go to an ENT anyway. Probably within the next year or so. My GP has reported excellent results for some of his sleep-deprived patients who had procedures to correct a deviated septum. That isn't the kind of thing a GP can diagnose; a visit to an ENT guy is mandatory. But we both believe that I may well have one.



CPAP Mask

"cpap set to 15 blows mask off"

Ha ha haaaa! Yup, I've been there. Big time. My number is 18. I'm on a BiPAP. Exhale is 12, inhale is 18. It gets worse. That number's effectiveness is dependent on my sleeping position. During my titration appointment the operator would scale me all the way up to 25 when I slept on my back. Talk about blowing the mask off your face! And he said that even 25 was not very effective. He would have gone higher, but 25 was the machine's top number. 18 was my best number only when I slept on my side. The left side to be specific. Sleeping on my right side is often as bad as sleeping on my back.

I'm not as bad as that now. I've lost a decent amount of weight - now that should generate some interest! - and expect that inside of 3 years I should be back at my pre-OSA poundage. My neck is definitely slimmer and I might well warrant a decrease in my

CPAP number.

If your mask is blowing off, adjust the straps. Its not that hard. I could tell you how, but that can depend on the type and model of the mask. If there is interest - post a comment - I might write on this some more. By the way, that is my mask pictured above. And no, that ain't me. And she really doesn't look like she has OSA.

And I'd love to read whatever comments criticisms and brickbats you might have. Just post below.

I liked writing this post up; I think I'll do more of them. In the meantime I'm working on a long post about my antihistamine dealie. I've waited several months to post, but I promise the next one will come in 2-4 weeks.

Beat Sleep Apnea!

You can read more on this blog about sleep apnea and CPAP masks as well as getting used to CPAP breathing.

The Secret Of My CPAP Success

August 15, 2009

I suffered thru 10 long years of sleep apnea before finally getting CPAP treatment. But even then it took more than 6 months of trial and error on the sleep machine before I could really use the machine the way it was intended. Over the first month with my Resprionics BI-PAP Auto M Series I could only manage a meager 2.5 to 3 hours per night. After 6 months I was still averaging just about 4 hours per night.



And even then most nights consisted of at least 2 separate CPAP sessions. Sleep for a couple of hours, throw the mask off usually without even knowing it, wake up another hour later and put the mask back on. That was a normal night for me.

I tried everything. At least I thought I did. Some nights I'd stop eating several hours before putting the mask on. Other nights I'd snack just before going to bed, just to see the difference.

I changed the thread count in our sheets. I managed to make this a twofer; I bought some really nice 500-count sheets as part of an overall package of presents for my wife on Mother's Day. No sneering; she got lots more than that believe me.

I tried all manner of adjustments to my CPAP equipment - mask changes, mask strap changes, putting the machine on the floor instead of the nightstand, changing the humidity level. One night I even preheated the distilled water before loading it into the machine. Crazy I know.

I spent plenty of time on the phone with the home health care company that set me up with my sleep machine. They are sick of hearing from me I can tell you. Over those early months I had reason to see my regular doctor frequently and we discussed my problems at some length. A consult with an ENT(ear nose and throat) specialist was mulled over.

By the way, isn't that what the thing should be called: a sleep machine? You'd think one of the major manufacturers would figure that out and name a new model the "Sleep Machine 1000" or something.

Over time as my claustrophobia diminished I was often able to keep the mask on for awhile even after I woke up in the middle of the night. Occasionally I was successful in going back to sleep, though that was certainly not the norm. This really bothered me. I had mostly mastered the mask, yet I still took it off even when fully awake. Why? Its not like I couldn't breathe.

I realized that if I understood why the mask came off my head maybe I could come up with a solution.

All my life I've suffered from stuffed up nasal passages. Even when they are clear they are more clogged than the average person's. That was a big reason why my first attempt at CPAP therapy failed several years ago. I was outfitted with a nasal pillows setup on my face. Worked great in the clinic, but failed badly at home. The claustrophobia was overwhelming, but I could have worked through that. But there was no getting around my stuffed up nose. It might be clear long enough to get in an hour, maybe two on the sleep machine. But never more. Throwing that much high pressure air at my face just guarantees I'll get stuffed up at some point during the night, and sooner rather than later.



So on this go round I opted for a full face mask. If I can't reliably breathe thru my nose, I'll just breathe thru my mouth I thought. This certainly worked better if not well.

So why did I take the freakin' mask off? I started making a mental inventory of my sensations and surroundings just before slinging the mask off. Not being the sharpest knife in the drawer it took a couple more weeks to realize that just about every time I took the mask off my nose was stuffed up. Really, really stuffed up. Yes, even though I was breathing thru my mouth.

Or that is what I thought at first. If I was really breathing thru my mouth why would I take the mask off when my nose clogged up? Was I really breathing thru my mouth after all?

I started paying closer attention to the first couple of minutes after I put on the mask at night. This was tough, because I fell asleep very quickly most nights, and to reduce potential frustration I waited till fairly late to turn in. When I hit the bedroom I was quite ready for the Sandman. I didn't have the capacity for much in the way of higher thought processes.

So I started going to bed a little earlier. As soon as the CPAP machine started up I paid close attention to every breath. While I did indeed mouth breathe at first, as I started to relax this changed a bit. My nose got into the act too. It was a team effort, and responsibility changed from breath to breath. Often I inhaled with the mouth and exhaled with my nose. But the trendline was clear: my nose did more and more of the work as I got closer to la la land.

I started to wonder just how much I used my nose once I fell asleep. I could have asked my wife to listen closely. But she is on CPAP as well. And my CPAP is a bit louder than the average bear's. My number on the inhale is 18, and on exhale its 12. Yeah, inside my mask it sounds like an airport.

I definitely used my nose to breathe at least somewhat during sleep. And I couldn't get the mask off quickly enough when it

clogged up. If I could unclog the nose maybe I could get a good night's sleep. Eureka!

What unclogs noses? There are all sorts of drugs both prescription and over the counter for people who have colds. Why not look in the local pharmacy?

What I was looking for specifically was an antihistamine. Antihistamines are supposed to be for allergies, but they show up in cold medications too. And for good reason - they unclog noses, making cold relief possible.

I mulled over the many choices available down at the drugstore, finally settling on a generic version of Claritin. Why Claritin? The first line on the package says "Non-Drowsy". I was already sleepy at night so I didn't need the kind of sleep help the old standbys like Benadryl would provide. When it was time to get up in the morning I didn't want to have to drag myself out of bed.

So I bought a package of generic Claritin and gave it a shot. Did it work? The title of this story is "The Secret To My CPAP Success", and you've plodded thru more than 1000 words of my ponderous prose. I'm not going to make you wait any longer: yes, IT WORKED! I've been averaging just under 6.5 hours per night of sleep on my CPAP machine for the last 13 months.



There is plenty more to the story and I'll fill you in on the details later. If you are having problems complying with your CPAP therapy, consider making a trip to your nearby druggist and picking up a box of antihistamines. Make it a cheap purchase; individuals can have widely varying reactions to antihistamines. That is a big reason why there are so many available. And don't buy anything but the antihistamine itself. Check the active ingredients. The number should be ONE. No more.

But all of them should work for you to some degree. If this works for you worry about perfection later. Just TAKE YOUR LIFE BACK!

You can read more on this blog about sleep apnea and CPAP masks as well as getting used to CPAP breathing.

Conquer Your CPAP Fears

July 17, 2009

I'm getting a fair number of people here from the search engines, and from the traffic reports its clear that plenty of people have a hard time complying with their CPAP treatment. Let me share with you one of the techniques I used to learn about myself and the difficulties I've had with CPAP.

I started a spreadsheet. Every day I entered some basic details

into it about the previous night's sleep: the date, the total hours spent on the machine, the actual number of hours spent in the bedroom, and the number of times I put the mask on. I augmented these columns with some formulas to keep track of recent compliance.

So how did I keep track of all of this info every day? Every CPAP machine these days provides all sorts of measurements. My CPAP, and I think every machine made today keeps track of the total number of hours of sleep logged. The number of hours you slept last night is just today's total hour count minus yesterday's total hour count.

Now the machine can't do it all for you. I also kept track of when I entered the bedroom. Not down to the minute mind you. But I'd get it down to the nearest 15 minutes, e.g. 12:30am, 11:45pm. And I'd keep track of the times I put the mask on in my head.

All of this info helps you in a couple of different ways. The first is pretty obvious. You can correlate your nightly sleep totals with various environmental variables: bedroom temperature, the time you went to bed, the sheets you are using, etc. This will definitely help you increase CPAP compliance.

For example, I quickly learned that the colder the bedroom the better I slept. Now this is a general sleep tip too, but one I didn't really grasp before CPAP. And for CPAP users the effect is a little different than for the general population. If you use a heated humidifier, the temperature inside your mask will definitely feel warmer than the surrounding air. If your bedroom is warm, it will feel quite warm under the mask.

As a result I dial up the humidity during the winter when the room is colder, and dial it down during the warmer months.

But there is another, more subtle benefit of detailed daily record keeping. I'm talking about the simple ability to keep the mask on. When you dedicate yourself to analyzing your sleep you become a detached observer of your own behavior. It becomes much easier to deal with any fears you have towards your sleep machine when you get caught up in keeping track of all that data. I would even keep a small pen flashlight on my nightstand so that when I woke up during the night with my mask off, I could check the machine's numbers to see how long I'd actually slept since the last time I put the mask on. I'd then check that against time on the clock to figure out how long it had been since I took the mask off, which I often did without even knowing it.

The point is that gradually my fears of the CPAP mask receded because I was so preoccupied with diligently measuring my nightly sleep numbers. I didn't have the time or energy to indulge my phobias. Plus it made me more aggressive in putting the mask back on in the middle of the night: I needed not just the sleep, but more numbers for my study. And over time the repeated wearing of the mask wore down my mild - and to my mind perfectly natural - claustrophobia.

Now you don't need to get quite as geeky as I was about it, flashlight and all. Check with your significant other before you bring it into the bedroom. But it did definitely help me in learning about my problems.

Turned out the most common time for me to lose the mask for the first time was about 1.9 hours after putting it on. That is just about the time it took me to complete my first sleep cycle; from

light sleep to heavy sleep and back. Something was causing me to wake up instead of going back into heavier sleep and another cycle. At first my phobia was to blame. But as more data accumulated and I got better at putting the mask back on I figured out the real culprit and took steps to solve it.

So open up Excel and get cracking. Don't have Microsoft Office? Fine, surf on over to Open Office and download their free software. The spreadsheet component is called Calc. Do you have a GMail account? Then try clicking that link labeled "Documents" up at the very top of your browser window. The fine folks at Google have provided not just a web-enabled word processor, but a spreadsheet facility as well. It ain't as full featured as Excel or Calc but it is more than capable of handling this small task.

So what was the solution to my CPAP problems? That is for another post. Right now you need to know that you can beat sleep apnea, and that keeping a daily record of your progress will give you both the information and confidence you need to benefit from CPAP. Believe me, if I can do it you can do it. Take your life back!

You can read more on this blog about sleep apnea and CPAP masks as well as getting used to CPAP breathing.

Don't Be Afraid Of Your CPAP Mask

June 13, 2009

CPAP therapy just plain works. In fact, its so effective that most doctors aren't much interested in precisely WHY you have sleep apnea. If your doc suspects you may have it you're shipped off to the nearest sleep clinic for a study and a month later you've got your machine.

But there is a problem with CPAP. A biggie. Its compliance. It ain't natural to put on a bulky mask at night to have some machine blow air in your face for several hours. The machine itself can be pretty loud. My wife says that when my mask occasionally slips on my face that the bedroom sounds like an airport. And if it sounds like that to your spouse, its certainly an audio nuisance to you too.

Plenty of other things can affect compliance. Poor eating habits, a bedroom that allows in too much light, a bad mattress, the list goes on.

But the very first hurdle is the CPAP mask itself. Just putting one on can remind someone of a visit to the hospital. That's not a pleasant memory. The head straps put pressure on a noggin that is normally restraint free. If you've got a good bit of beard development you might find a full face mask rubs uncomfortably on your nighttime stubble. A common problem is fit around the bridge of the nose. Both full face and nasal masks are susceptible.

By far the most important issue though is claustrophobia. You can't deal with those other problems if you are just plain afraid of the mask. The therapy can't work if you don't put on the mask. Too many sleep clinics don't help their patients deal with this.

In the confines of a sleep clinic plenty of people do quite well on their fitting night but fail miserably at home by themselves. And

its no wonder. Sleep clinics wouldn't be very useful if you couldn't, you know, SLEEP in them. So everything is done to provide the patient with the proper conditions for a restful slumber. That goes for both the diagnostic appointment and machine fitting. A proper bed, sheets that are always clean. The carpet on the bedroom floor is vacuumed daily. A perfect temperature and humidity is maintained at all times. A trained professional is just steps away from the door. In the bigger clinics an entire staff is at the patient's beck and call should the need arise.

And some of these rooms resemble accommodations in nice hotels. My wife had her appointments in a room with a private shower. She even received a voucher for breakfast the next morning in the hospital cafeteria. The food was pretty good!

In such an artificial environment accompanied by trained professionals, acclimating to CPAP therapy is a breeze. But at home its a different story. There is maybe someone else in the bed with you. There might be a pet roaming about that you have to worry about. You're not sure you set the machine up properly. And when you put that mask on your face and power the machine up you've got a blast of air forcing your throat open in a way you've never experienced before. You might not even make it 30 seconds before you take the mask off, scared silly.

Take it easy. You can work through this. Here is a simple progression that the kindly doc at my SECOND, successful titration appointment taught me:

First, just sit on the edge of your bed with the mask next to you. You don't even have to touch it. Just look at it. Take your time; you're not going anywhere.

Then when you feel comfortable, pick the mask up. Don't do anything with it. Just hold it. Look at it if you like. Pay attention to your breathing, your heart beat, and the thoughts running through your head.

When you feel calm and relaxed, put the mask up to your face. You don't even have to put your head inside the apparatus. Just breathe comfortably for a few moments. That is not so hard is it?

Take the next step; its time to put the CPAP mask on, head straps and all. This will take a moment or two if you are a beginner. Don't panic. Just concentrate on breathing in a calm fashion.

Now turn your machine on. Be sure to press the button that starts the ramp up procedure. Your CPAP provider did show you how to do this. Do you remember? All sleep machines these days come with a ramp-up button that starts off your air pressure fairly low, and over about 15 minutes gently ramps up to the prescribed pressure setting.

You aren't lying down on the bed yet, are you? Just continue sitting on the edge of the bed with your mask and machine on. Then, when you are ready, go ahead and lie down. Within a few minutes you'll be fast asleep!

Now if at any time in this progression you feel uncomfortable, just move back a step. If you have a problem when you turn on the machine, just turn it off. If you have problems lying down, just get back up and sit. At first I had problems putting on the mask, so I simply held it. Take your time, and when you are ready just move back up to the next step.

Now if you have problems coping with this process, you might try turning on a radio. Make sure it has the ability to shut off automatically after some period of time. In the beginning this helped distract me from my mild claustrophobia. Now for me music didn't help much. If I didn't like a particular selection I found myself wanting to change the station. So I had to have some other type of program on. The local NPR station broadcasts an Americanized version of the BBC overnight. Its just stimulating enough to distract me from the CPAP machine, but earnest and conventional enough to make me sleepy even in the middle of the afternoon.

But listen to anything that helps. You'll know you've found it when you think you are paying close attention yet can't remember a single thing about what you heard the next day. That means you are falling asleep in a matter of a few minutes at most.

One more piece of advice: when you are working thru the progression, don't spend too much time with the mask on and the machine off. The carbon monoxide level will build and that could cause problems. You can always call your CPAP machine or mask provider for more info.

Just follow the simple steps I've outlined and you too can stop going through life as a zombie. I lied to myself for years that I was coping with sleep apnea rather well. Bull. I know it now and if you'll just practice my advice it won't be long before you agree: suffering from sleep apnea is like being the undead. Get your life back with CPAP!

You can read more on this blog about sleep apnea and CPAP masks as well as getting used to CPAP breathing.

How Bad Is Sleep Apnea?

April 19, 2009

More than 3 million Americans are diagnosed with sleep apnea every year. The most common form of sleep apnea is Obstructive Sleep Apnea, which is responsible for 84% of all apnea diagnoses. Obstructive sleep apnea (OSA) is caused by a blockage of the airway, usually when the soft tissue in the rear of the throat collapses and closes during sleep.

A 2005 study in the New England Journal of Medicine put the American sleep apnea population at 20 million people. Common risk factors include being male, overweight, and over the age of forty, but sleep apnea can strike anyone at any age, even children. Because of the lack of awareness on the part of public and health care professionals, the majority remains undiagnosed and therefore untreated, despite the fact that this serious disorder can have significant consequences.

Untreated, sleep apnea can cause high blood pressure and other cardiovascular disease, memory problems, weight gain, impotency, and headaches. Moreover, untreated sleep apnea may be responsible for job impairment and motor vehicle crashes.

Fortunately, sleep apnea can be diagnosed and treated.

You can read more on this blog about sleep apnea and CPAP masks as well as getting used to CPAP breathing.
