DO YOU SNORE? WOULD YOU LIKE TO STOP?

Answer these questions to assess your risk for obstructive sleep apnea (OSA).

STOP-BANG Questionnaire		YES	NO
Snoring	Has anyone complained about your loud snoring (such as your bed partner, children or neighbors)?	0	0
Tired	Do you often feel tired or sleepy, or struggle to concentrate and stay awake in the afternoon?	0	0
Observed	Has anyone observed that while sleeping, you choke, gasp or stop breathing?	0	0
Pressure	Have you been told you have high blood pressure, or are you being treated for it?	0	0
Body	Is your body mass index (BMI) more than 35 kg/m²?	0	0
Age	Are you older than 50 years of age?	0	0
Neck	Is your neck size greater than 16 inches?	0	0
Gender	Are you male gender?	0	0

Scoring Criteria for General Population

- 1. Low risk of OSA: Yes to 0-2 questions
- 2. Moderate risk: Yes to 3-4 questions
- 3. High risk: Yes to 5-8 questions or any the following:
 - Yes to 2 or more of 4 STOP questions + male gender
 - Yes to 2 or more of 4 STOP questions + BMI greater than 35 kg/m²
 - Yes to 2 or more of 4 STOP questions + neck circumference greater than 16 inches

STOP SNORING. START LIVING!





Silent Nite®



Anti-Snoring Solution Prescribed by Your Dentist

Adapted from Chung F, Abdullah HR, Liao P. STOP-Bang questionnaire: a practical approach to screen for obstructive sleep apnea. 2016 Mar;149(3):631-8.



My Silent Nite® fits like a glove, and I can't fall asleep without it. I have better sleep and mental focus, and I'm more alert.

)) – Kelly B.



On the first night of using my Silent Nite appliance, I was so quiet that my wife actually checked to make sure I was still breathing.

"

- Maurice W.

When to seek treatment for snoring

Nearly everyone snores now and then, but for some people it can be a chronic problem, which can sometimes also indicate a serious health condition called obstructive sleep apnea (OSA). OSA is often characterized by loud snoring followed by periods of silence when breathing stops or nearly stops. Eventually, this reduction or pause in breathing may signal the person to wake up, and the patient may awaken with a loud snort or gasping sound.

Bed partner disturbance is the primary reason most people seek treatment for snoring. **Daytime sleepiness** is also a main reason people seek treatment.

What causes snoring?

During sleep, muscles and soft tissues in the throat and mouth relax, shrinking the airway. This increases the velocity of airflow during breathing. As the velocity of required air is increased, soft tissues like the soft palate and uvula vibrate. The vibrations of these tissues result in "noisy breathing" or snoring.¹

How can I prevent snoring?

For the majority of snorers, the most affordable, noninvasive, comfortable and effective solution is a snore prevention device, such as the **Silent Nite® Sleep Appliance**, prescribed by dentists. The patient-specific Silent Nite oral appliance treats snoring and mild to moderate sleep apnea by gently shifting the lower jaw into a therapeutic position during sleep, which increases the space in the airway and reduces air velocity and softtissue vibration. Connectors are attached to transparent, flexible upper and lower splints that are formed to the teeth. The fit is excellent and comfortable, permitting uninhibited oral breathing.

Most people find oral appliance therapy to be very successful. One study, which followed patients for 2.5 years, found oral appliances to be **well-accepted by 90% of patients**. The study also concluded that these devices significantly improve respiratory function and sleep quality.²

Want to learn more about how the Silent Nite appliance can help you stop snoring?

Scan the code below to see the animation, and then ask your dentist if treatment is right for you.



Scan here to watch the animation!

^{1.} Isono S, Remmers J. Anatomy and physiology of upper airway obstruction. Kryger MH, Roth T, Dement WC, eds. Principles and Practice of Sleep Medicine, 2nd ed. WB Saunders and Co. 1994:642-56.

^{2.} Yoshida K. Effects of a mandibular advancement device for the treatment of sleep apnea syndrome and snoring on respiratory function and sleep quality. Cranio. 2000 Apr;18(2):98-105.