

Getting referred

The Edinburgh Sleep Centre accepts referrals from general practitioners and medical specialists. In addition, we consider referrals directly from self-funding patients. We are recognised by all of the UK private health care companies, and by the major international health insurance companies.

If you require any further, no-obligation information, please do not hesitate to contact us



How to get to us

The Edinburgh Sleep Centre is situated on the east section of Heriot Row. It is well served by public transport and road links.

Parking

Metered parking is available directly opposite the Centre. This is free between the hours of 6.30pm and 8.30am.

Public Transport

The Centre is within walking distance of Edinburgh Waverley train station and St. Andrews Street bus station. The centre is served by Lothian Buses numbers 13, 23, and 27, which stop at the Dundas Street end of Heriot Row, and numbers 24, 29 and 42, which stop at the Howe Street end.

The Edinburgh Sleep Centre

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Obstructive Sleep
Apnoea/Hypopnoea
Syndrome (OSAHS)

Obstructive Sleep Apnoea/Hypopnoea Syndrome (OSAHS) refers to a disorder in which there are breaks or pauses in a person's breathing during sleep. Most people who have OSAHS also snore, but not all snorers have OSAHS...

Diagnosing OSAHS needs to be done in a sleep centre and requires at least one nocturnal polysomnogram (PSG), which measures various physiological functions during the stages of sleep. A trained sleep technologist monitors the patient continuously during the test. The results are then evaluated by a sleep disorder specialist, a diagnosis is made and a treatment plan is proposed.

The most effective means of treating OSAHS is by Continuous Positive Airway Pressure (CPAP). In this highly effective therapy, a mask is worn over the nose during sleep. Nasal CPAP provides a pressure splint to the upper airway, allowing the person to sleep and breathe normally. The airflow required must be determined through testing during sleep which is done during an overnight PSG, or using a machine at home.

Left untreated, OSAHS increases the risk of cardiovascular, pulmonary and other diseases.

Disruption of sleep caused by frequent interruption of breathing can lead to excessive daytime sleepiness, irritability, memory lapses, inattention, personality changes, poor work performance, and increased likelihood of driving and industrial accidents. Low levels of oxygen can lead to potential heart problems and other health disorders, including depression, mood changes, memory loss, weight gain, impotency and headaches. Pressure changes in the throat can lead to an irregular heart beat. There is also an increased risk of high blood pressure, heart disease and stroke.

Who should be treated?

The decision about whether you need treatment must be made in consultation with your doctor. Obviously if you suffer from the classic symptoms of obstructive sleep apnoea with daytime sleepiness and alterations in your mental function or personality, then treatment will be of great importance to you. But some people with obstructive sleep apnoea are surprisingly unaware or free of symptoms.

Even asymptomatic patients may be at risk for the cardiovascular complications of obstructive sleep apnoea. You may be at risk of developing hypertension or other medical complications, even if you do not have severe apnoea or marked drops in oxygen levels at night. The decision should therefore be based on both symptoms and signs of obstructive sleep apnoea after review with your physician.

More recently, scientific research has focussed on treating the disabling daytime sleepiness associated with OSAHS. New medications are now licensed for use in patients with OSAHS and excessive daytime sleepiness.

The Edinburgh Sleep Centre provides a fully comprehensive diagnostic and treatment service for patients with OSAHS including sleep studies, CPAP titration, patient education and compliance monitoring.

If you require further information, please contact us or visit our website:

www.edinburghsleepcentre.com.