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Treating obstructive sleep apnoea (OSA) with CPAP therapy (Sleep Service)

Sleep Medicine

Information for Patients

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Personal CPAP information

Hospital No:	Place sticker here
CPAP mask details:	
CPAP machine details:	

Phone helpline

We have a phone support and advice service for sleep related concerns that may not need a hospital visit.

When you call us one the administrative team will answer the phone. They will arrange for a Sleep physiologist to contact you during one of our scheduled call back clinics.

Our team works during set clinic times, so we may not be able to call you back straight away.

Thank you for your patience. We will get back to you as soon as we can.

0116 258 8106

0116 258 8262

Email service

You can email us at **uhl-tr.sleepservicemailbox@nhs.net**

Please give as much information as possible when using our sleep service email. Please include:

- your name,
- date of birth,
- hospital number,
- description of your query.
- include photographs or videos if relevant to your enquiry.

The team will review the emails. They will reply during our scheduled call back clinics. As responses are done during clinic times, we cannot guarantee a reply right away.

Our staff may not always be able to see you if you come to the clinic without an appointment. This is because they may be running clinics or caring for other patients. If you need help, please phone or email the Sleep Service mailbox. A member of the team will be happy to help you.

Missing CPAP treatment for one night now and then is unlikely to cause serious problems. However, using CPAP regularly is important because it helps control your symptoms. If you stop using CPAP for a longer time, daytime sleepiness may return. This could make activities such as driving or using machinery unsafe.

What is CPAP?

CPAP stands for continuous positive airway pressure (CPAP). It has been chosen as the best treatment for your Obstructive Sleep Apnoea (OSA).

What are the benefits of this?

CPAP works very well for treating obstructive sleep apnoea (OSA). To get the best results, it is important to keep using it, even if it takes time to get used to. This leaflet is here to help you become comfortable with your treatment and deal with any small problems you may have.

How to fit my CPAP mask

- The mask needs to fit tightly enough to prevent a leak of air, particularly near the eyes.
- If it is too tight it may cause sore and/or irritated skin.
- If too loose, the air will escape and can cause excess noise.
- A red mark on the skin right after you have taken off the mask is very common, but it should fade within an hour or so.
- You may find it helpful to practice fitting the mask in front of a mirror until you are comfortable with its position and the adjustment of the straps.
- It is easier to make the final adjustments to the straps when you are lying down, before you switch on the machine, as the straps tend to become a little looser than when you are upright.

Where is the best place to put the machine?

- The pump should be put next to the top of your bed. Please put it on a small bedside table or cabinet. Please do not put it on the floor as it will draw in too much dust. This could affect how well the machine works.
- It would be helpful to put the machine at a slightly lower level than your head.
- Do stand the machine on something like a mouse mat or a folded towel so that the machine does not ‘drum’ during the night.
- Drape the hose across the bed and secure it by laying your arm across it. This stops it falling towards the floor and dragging on the mask or nasal pillows.
- During cold weather, it is a good idea to keep as much of the hose as possible underneath the covers of the bed to warm the air a little, or you can wrap the hose with a fleece fabric.
- Try different sleeping positions and arrangement of the pump and hose until you find whatever suits you best.

Cleanliness

- To makes sure your machine and equipment lasts, you must keep the equipment clean.
- Every night before you put on the mask wash your face with soap and water then dry well.
- To help maintain a good seal and prolong the life of the mask, we recommend avoiding the use of facial creams or oils before wearing your mask.
- Each morning, clean the mask thoroughly with mild soap and water.
- Wash the headgear when it becomes dirty. Use warm water and a mild soap.

Nasal stuffiness

Some people have a runny or blocked nose during the first few weeks of CPAP treatment. These symptoms are often temporary. They may improve as you get used to therapy.

If nasal symptoms are troublesome, please speak to your pharmacist or healthcare professional. They can advise on suitable treatments to help ease your symptoms.

How long will I need the treatment?

CPAP is usually a lifelong treatment. However, in some cases, major changes such as weight loss or other treatments may improve sleep apnoea enough to reduce or remove the need for CPAP. A member of the sleep team will advise you if this may be possible.

Does CPAP do any harm?

CPAP is a safe and well-established treatment. Many patients have used CPAP therapy successfully for several years with little or no adverse effects. Some people may have temporary side effects, such as a dry mouth, nasal congestion, or skin irritation from the mask. These can usually be managed with support from the sleep team.

What happens if I stop treatment?

Missing CPAP treatment for 1 or 2 nights is unlikely to cause harm right away, but symptoms such as snoring and daytime sleepiness may return. If treatment is stopped for a longer period, your condition is likely to return to how it was before CPAP therapy was started.

Are there lots of people like me?

There are millions of people around the world using CPAP every night, including several thousand attached to this clinic. A Patients' Association has been formed to offer help and support as well as to promote knowledge about sleep apnoea. The sleep physiologists can give you a leaflet if you would like to find out more.

How long should I use the CPAP at night?

Ideally, all night. The longer you use it the better the effect. You should aim for 6 to 8 hours' sleep at night. Avoid taking naps during the day where possible. If you find that you are using it for a less time, please let us know on your next visit to our clinic.

Do I have to keep coming to the hospital?

We aim to contact you at around 4 to 6 weeks of first starting treatment. Depending on how well you are using CPAP, we will place you on a Patient-initiated follow-up (PIFU). This means you will be under our service so that you can ask for an appointment if needed. If at the 4 to 6 weeks check we feel you need to come in for a review, we will send you an appointment in the post.

Are there any other treatments?

We have chosen CPAP for you as being the best treatment. We want to work to make sure you have a successful result.

Can I go on holiday with the machine?

Yes. Most CPAP machines supplied by the Sleep Service are multi-voltage. They can be used in many countries worldwide. If you are travelling abroad, you will need a suitable travel adaptor for your destination.

Some CPAP machines can also operate from a 12-volt power supply. However, 12-volt adaptors are not supplied by the Sleep Service. You must buy it separately.

When travelling by air, your CPAP machine should be carried in your hand luggage rather than checked into the aircraft hold. Airport security staff may ask you to remove the device from its case or explain its purpose, so it is advisable to keep the power cable with the machine when travelling. If you have any questions about travelling with your CPAP device, please contact your airline before you travel.

The Sleep Service can give you a letter explaining the purpose of your CPAP machine for travel. Please note that we are only able to give this letter in English. We also recommend keeping the manufacturer's instruction booklet, as it has information in several languages that may be helpful when travelling.

Hospital stays

For any hospital admission, you must take your CPAP machine with you. You will also need to tell the staff that you are a CPAP user.

If you have any problems, please ask the ward staff to contact the Department of Sleep Medicine on (0116) 258 8106, Leicester General Hospital, extension 8106.

Parts of the CPAP

The CPAP machine

Your CPAP machine delivers a continuous flow of pressurised air to help keep your airway open while you sleep. Modern CPAP devices may include features such as humidification, pressure ramp settings, and automatic pressure adjustment, depending on the model prescribed for you.

Your machine will be supplied with the equipment you need for treatment, including a mask and tubing. The Sleep Service will explain the features of your device and how to use it safely.



The CPAP mask

There are several types of CPAP mask available. These include nasal masks, nasal pillow masks, and full-face masks. The most suitable mask for you will depend on your personal needs and preferences.

It is important that your mask fits well. This helps your treatment work properly and reduces air leaks. Your Sleep Physiologist will help you choose a suitable mask and make sure it fits correctly. They will also show you how to adjust it if needed.



CPAP at home

When starting CPAP therapy, it may take some time to get used to sleeping with the equipment. Some people adapt quickly, while others take more time to feel comfortable using their device.

Try to use your CPAP every time you sleep, including during daytime naps. If you find the pressure uncomfortable when you first start treatment, the ramp setting may help. Your Sleep Physiologist can advise you on the settings available on your device.

Benefits may take time to develop. These may include less snoring, better sleep and feeling less sleepy during the day. Use your CPAP every time you sleep to get the most benefit from your treatment.

Follow up and support

The Sleep Service will review you after you start CPAP treatment. They will check how you are getting on and whether your treatment needs any changes.

It is common to have problems when you first get used to CPAP. If you are worried about your equipment or treatment, contact the Sleep Service or the Patients Association team for advice and support.

Bring your CPAP machine, mask and tubing to all clinic appointments, unless we tell you not to.

Driving and the DVLA

All drivers must make sure they are safe to drive. Feeling very sleepy during the day can affect your focus, reactions, and driving. This can increase the risk of a road traffic accident.

If sleepiness affects your ability to drive safely:

- stop driving,
- speak to your healthcare professional for advice,

You may need to tell the DVLA if you have obstructive sleep apnoea and feel very sleepy during the day. This depends on:

- how severe your condition is,
- how sleepy you feel during the day,
- the type of driving licence you have,

Your Sleep Specialist will tell you if you need to contact the DVLA.

Treatment for obstructive sleep apnoea can reduce daytime sleepiness. Many people can continue driving when:

- their symptoms are under control,
- they use their treatment as advised,
- they meet the DVLA requirements,

Tell the Sleep Medicine Service if you drive for work or losing your licence would have a major effect on you. We can give you advice and support about your condition, treatment and driving responsibilities.

If you drive, we recommend that you tell your motor insurer about your diagnosis. A sleep-related condition may affect your insurance policy.

Please note: DVLA requirements may change. Check the latest DVLA guidance or speak to your Sleep Specialist if you have any concerns.

Caring for your CPAP equipment

Regular cleaning of your CPAP equipment helps maintain effective treatment, prolongs the life of your equipment and promotes good hygiene.

Daily cleaning

Mask cushion (Seal)

Why should it be cleaned?

Skin oils, sweat and other residues can build up on the mask cushion. This may affect the quality of the mask seal.

How should it be cleaned?

- Wash the cushion in warm water using a mild detergent.
- Rinse thoroughly with clean water.
- Allow to air dry away from direct sunlight.

Avoid products containing moisturisers, perfumes, bleach, disinfectants or other harsh cleaning agents, as these may damage the mask materials.

Humidifier chamber

Why should it be cleaned?

Regular cleaning helps maintain hygiene. It also stops the build-up of mineral deposits and contaminants.

How should it be cleaned?

- Remove the humidifier chamber from the device.
- Empty any remaining water.
- Wash in warm water with a mild detergent.
- Rinse thoroughly and allow to air dry.

Weekly Cleaning

CPAP hose

Why should it be cleaned?

Moisture can collect in the tubing over time. Regular cleaning helps maintain hygiene and equipment performance.

How should it be cleaned?

- Wash in warm water with a mild detergent.
- Rinse thoroughly.
- Hang the tubing so that excess water can drain away.
- Allow to air dry completely before use.

Headgear and mask frame

Why should they be cleaned?

Regular cleaning removes sweat, oils and other residues that can collect with use.

How should they be cleaned?

- Wash in warm water with a mild detergent.
- Gently clean all surfaces.
- Rinse thoroughly.
- Allow to air dry naturally.

Do not tumble dry or iron any CPAP components.

Air filter

Why should it be checked?

The air filter helps prevent dust and airborne particles from entering the device.

How should it be maintained?

- Check the filter regularly for signs of dust or damage.
- Follow the manufacturer's instructions for cleaning or replacement.
- Some filters are disposable. They should be replaced rather than washed.

If you are not sure which type of filter your device uses, please contact the Sleep Service or manufacturer for advice.

Frequently asked questions

What happens if I find CPAP difficult to use?

Many people need time to get used to CPAP treatment. If you have any problems, please contact the Sleep Service. We may be able to make changes to help you feel more comfortable and get the most benefit from your treatment.

If these changes do not help and CPAP is still not suitable for you, your Sleep Specialist will talk about other treatment options with you if these are suitable. This will depend on your needs and how severe your sleep apnoea is.

I feel sleepy but I have never had a driving accident. Why do I need to tell the DVLA?

Not everyone with excessive daytime sleepiness will have a driving incident. However, sleepiness can affect concentration, reaction times and driving performance. DVLA notification requirements are based on the potential impact of a medical condition on safe driving, rather than if an accident has previously occurred.

Your Sleep Specialist will advise you if your condition meets the criteria for DVLA notification.

How do I know if my treatment is working?

Your Sleep Specialist will talk about your symptoms, sleep quality and daytime alertness with you during follow-up appointments.

Most modern CPAP devices also record information about treatment usage and effectiveness. This information can help the Sleep Service assess how well treatment is working and whether any adjustments may be required.

Do you tell the DVLA about my condition?

In most cases, you must tell the DVLA about a medical condition that may affect your ability to drive safely. You only need to do this when DVLA guidance says you must.

Healthcare professionals must keep your information private. However, in rare cases, they may need to share relevant information with the DVLA. This may happen if you keep driving against medical advice and there is a serious risk to public safety. They must follow professional and legal guidance. Where possible, they will talk about this with you first.

Addresses

Drivers Medical Branch

DVLA

SWANSEA

SA99 1TU

Phone: 0300 790 6806

See the DVLA website:

http://www.gov.uk/obstructive-sleep-apnoea-and-driving for further details

Epworth sleepiness scale: measures how sleepy you are. Sleepiness is one of the main disabling symptom of OSA.

How likely are you to doze off or fall asleep in the following situations, compared to feeling just tired?

This refers to your usual way of life in recent times. Even if you have not done some of these things recently try to work out how they would have affected you.

Score yourself for each of the eight situations below, use the following scoring system:

0 = Would never doze

1 = Slight chance of dozing

2 = Moderate chance of dozing

3 = High chance of dozing

Situation	Score
Sitting and reading	
Watching television	
Sitting inactive in a public place, for example, theatre or meeting	

As a passenger in a car for an hour without a break	
Lying down in the afternoon when circumstances permit	
Sitting and talking to someone	
Sitting quietly after lunch without alcohol	
In a car, while stopped for a few minutes in traffic	
Total	

Health information and support is available at www.nhs.uk or call 111 for non-emergency medical advice
Visit www.uhleicester.nhs.uk for maps and information about visiting Leicester's Hospitals.
To give feedback about this information sheet, contact uhl-tr.informationforpatientsmailbox@nhs.net

اگر آپ کو یہ معلومات کسی اور زبان میں درکار ہیں، تو براہِ کرم مندرجہ ذیل نمبر پر ٹیلی فون کریں۔
ਜੇ ਤੁਸੀਂ ਇਹ ਜਾਣਕਾਰੀ ਕਿਸੇ ਹੋਰ ਭਾਸ਼ਾ ਵਿਚ ਚਾਹੁੰਦੇ ਹੋ, ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਹੇਠਾਂ ਦਿੱਤੇ ਗਏ ਨੰਬਰ 'ਤੇ ਟੈਲੀਫੋਨ ਕਰੋ।
إذا كنت ترغب في الحصول على هذه المعلومات بلغةٍ أُخرى، الرجاء الاتصال على رقم الهاتف الذي يظهر في الأسفل
Aby uzyskać informacje w innym języku, proszę zadzwonić pod podany niżej numer telefonu
જો તમને અન્ય ભાષામાં આ માહિતી જોઈતી હોય, તો નીચે આપેલ નંબર પર કૃપા કરી ટેલિફોન કરો.

If you would like this information in another language or format such as EasyRead or Braille, please telephone 0116 250 2959 or email uhl-tr.equalitymailbox@nhs.net

We are a research hospital and you may be asked to take part in research

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