

Primary snoring in children impacts cardiovascular functioning

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Primary snoring in children may have an impact on cardiovascular functioning equivalent to that of moderate obstructive sleep apnea (OSA), according to a research abstract that will be presented Wednesday at SLEEP 2008, the 22nd Annual Meeting of the Associated Professional Sleep Societies (APSS).

The study, authored by Angela Jackman and colleagues at the University of Melbourne and Monash University, Melbourne, Victoria, Australia, focused on 40 children who were referred for clinical assessment of a sleep-related breathing disorder and matched controls.

Overnight polysomnography was performed, and heart rate and heart rate variability data from the total sleep period and from periods of uninterrupted sleep were analyzed. The subjects were grouped by clinical diagnosis: primary snoring, mild OSA, moderate OSA, severe OSA, and controls.

According to the results, significant overall differences were found in heart rate over the total sleep period and during stable sleep, whereby heart rate was highest in severe OSA, followed by primary snoring, moderate OSA, mild OSA, and controls. In time domain analyses, heart rate variability was significantly lower in primary snoring than in controls.

“Primary snoring in children has traditionally been considered benign, in part because some children grow out of the condition without intervention,” said Jackman. “Mounting evidence now suggests, however, that this condition can impact cognition, behavior, and academic performance. Furthermore, our current preliminary findings concur with emerging evidence that primary snoring in children may also impact heart function. To the best of our knowledge, ours is the first study to compare the effects of varying severities of sleep-related breathing disorders on

cardiovascular control and to suggest that children with primary snoring may be just as affected as children with more severe sleep-related breathing disorders (such as obstructive sleep apnea syndrome). The long-term consequences of such changes are currently unknown, and further research is necessary to expand on these findings.”

Snoring is a sound made in the upper airway of your throat as you sleep. It normally occurs as you breathe in air. It is a sign that your airway is being partially blocked. About one-half of people who snore loudly have OSA. OSA happens when the tissue in the back of the throat collapses to block the entire airway. This keeps air from getting in to the lungs. Almost everyone is likely to snore at one time or another. It has been found in all age groups. Estimates of snoring vary widely based on how it is defined. The rate of snoring in children is reported to be 10 to 12 percent.

It is recommended that infants (three to 11 months) get 14 to 15 hours of nightly sleep, while toddlers get 12 to 14 hours, children in pre-school 11-13 hours and school-aged children between 10-11 hours.

Source: American Academy of Sleep Medicine

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