

Patient Information

All About CPAP





■ What is CPAP ?

Continuous Positive Airway Pressure (CPAP – pronounced “Cee-pap”). A CPAP device is essentially a pump that delivers air at an increased pressure. The basic form of this treatment is fixed CPAP therapy which delivers a fixed or constant pressure all night long. An alternative treatment is Automatic Positive Airway Pressure (APAP) which adjusts the pressure throughout the night to changes in the sufferer’s airway. The third alternative is Bi-Level therapy (BiPAP) which provides a lower pressure when exhaling, but a higher pressure when inhaling. It is considered a more comfortable option for the CPAP user, especially those on higher pressures.



■ Why we use CPAP ?

In Obstructive Sleep Apnoea (OSA) the upper part of the air passage behind the tongue narrows and collapses during sleep causing an interruption to breathing. Snoring occurs when the air passage is narrowed and air flowing through the narrow passage causes it to vibrate. Since in both snoring and OSA the interruptions to sleep are caused by either narrowing or complete collapse of the air passage, treatment is designed to stop the air passage from narrowing during sleep. The flow of air from the CPAP therapy creates a 'splint' to keep the airway open. Once the air passage is held open, breathing is completely normal and there are no interruptions to sleep.



■ Home trial period

The first few weeks or so is a trial period for you and your sleep specialist to decide whether you feel the treatment has helped your symptoms.

This can be a difficult time when in addition to coping with the CPAP equipment yourself, you may also have to cope with the reactions of your partner or other family members to the CPAP.

It may be helpful to speak to an existing CPAP user. Your consultant will be able to advise you and will do all they can to help you adapt to CPAP.



When you wake in the morning you may well feel much more refreshed than normal but some people take a few nights to really begin to feel the effects of the CPAP treatment.

The CPAP system consists of:

- A pump to produce the pressurised air (the CPAP device)
- A flexible length of tubing to carry the air to you
- A close fitting mask worn over the nose and or mouth with ports
- Head straps to hold the nasal mask in place

Using the CPAP system

- Always check the manufacturers user guide before use
- Fit the mask with the blower turned off
- Adjust the head straps for a snug fit
- Check and readjust the head straps when lying down
- Switch CPAP machine on and breathe

Using CPAP

The patient sleeps with a comfortable, close fitting nasal mask which is connected by flexible tubing, to a flow generator that provides varying levels of pressurised air, typically 4-20 cm H₂O. The patient breathes in fresh air from the flow generator and breathes out via an exhaust port on the mask. In effective treatment snoring and OSA are prevented immediately and for as long as the patient wears the mask and the CPAP pressure remains adequate. Excessive daytime sleepiness resolves over the first few days of using CPAP.

When to try CPAP

Following diagnosis of OSA your Sleep Consultant will arrange for a trial of CPAP.

The trial is usually recommended over one to two nights. You will be fitted for a mask and monitored overnight while using the CPAP system. This allows you to experience CPAP and for reports to be prepared to assess the appropriate pressure setting for your personal system.



Patient information series leaflets:

- Obstructive Sleep Apnoea
- All about C.P.A.P.
- Getting to grips with your C.P.A.P. system
- Common problems and solutions for C.P.A.P. users



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