

Your Journey with Obstructive Sleep Apnea



For more information scan this QR code or go to myhealth.alberta.ca/obstructive-sleep-apnea-pathway

Quality sleep is important for your health and well-being. If you have obstructive sleep apnea (OSA) you stop breathing for short periods while you sleep. This can cause you to feel tired while awake and cause other health problems. OSA can range from mild to severe. You are the most important part of your healthcare team. This guide will help you to know what to expect as you work with your team to manage and treat your sleep apnea. If you have any questions along the way, ask your healthcare team. Click on the page numbers in blue for more information about that step in your journey.

Before your appointment ([page 7](#))

- Write down how you feel, your symptoms, and any questions or concerns. You may consider using a [sleep journal](#).
- Symptoms you may experience include feeling tired, loud snoring, stopping breathing for short periods while sleeping, gasping or choking during sleep, and being restless or changing positions frequently while sleeping.



Visit your healthcare provider ([page 8](#))

- Your health includes physical, emotional, spiritual, financial, and social elements. To better manage your condition, your healthcare provider needs to understand who you are and what matters to you.
- They will ask about your sleep, your symptoms, and how they impact your day-to-day life. They may also ask your bed partner about your sleep. Consider bringing a family member or friend to support you.
- Your healthcare team may ask about any history of high blood pressure, stroke, or heart problems. They will conduct a physical exam, possibly measuring your neck circumference, height, weight, and blood pressure.



Get your tests ([page 11](#))

- Based on the results from your history, physical exam, and your risk factors for OSA, your healthcare team may recommend that you have a Home Sleep Apnea Test (HSAT).
- The HSAT is not appropriate for everyone. Some patients may be referred to a sleep specialist for more testing in a sleep laboratory.
- You may have mild, moderate, or severe OSA.
- Talk with your healthcare provider so you know what your sleep test results mean for you.



Review your treatment and management options ([page 16](#))

- Your healthcare provider may recommend that you make some changes to your lifestyle. These may include changes to your nutrition, activity level, changing your sleep position, and limiting your alcohol intake.
- Your healthcare team may discuss the importance of driving safely with OSA and symptoms of excessive sleepiness.
- Continuous Positive Airway Pressure (CPAP) therapy is a common and often effective treatment for sleep apnea.
 - Not all people with OSA need CPAP.
 - If you do need CPAP machine, someone on your healthcare team will help guide you to the resources and supports you need.
- Note: Not all treatments for OSA are covered by Alberta Health Care.



Talk with your healthcare provider about a referral ([page 23](#))

- Most people will not need a referral to see a specialist for OSA (for example, respirologist or sleep specialist).
- The decision about whether you need a referral is made based on the type of sleep apnea, the severity, the symptoms, and what previous treatments you have tried.



Start your treatment and watch your symptoms ([page 25](#))

- If you use a CPAP machine or other medical device and have problems (such as an uncomfortable mask or bad fit), make sure to tell your healthcare provider so they can help you.
- Write down any changes you notice in your symptoms.



Keep taking care of yourself ([page 26](#))

- Keep taking care of your overall health.
- Look for other healthy lifestyle resources and supports.



Whole-person health
([page 2](#))

Important Tips:

Need to connect with a primary care clinic?

ahs.ca/findadoctor

Need a translator or interpreter? Let your healthcare provider know

Need health advice?
Call Health Link at 811

Need to find programs and resources in your community?
Call 211 or visit ab.211.ca



Primary Care
Alberta

How to use this resource

The information provided in this resource is based on validated evidence from a variety of sources, including healthcare professionals in Alberta, peer-reviewed journals, current clinical guidelines, validated patient resources, and specialty care recommendations. It is intended as general health information and should not replace the clinical judgement of a qualified healthcare provider. This resource does not address the unique needs of individual patients. Always consult with your healthcare team and follow their recommendations for your specific care.

These pages are for you to use as needed. You can look through all of them at once or just the ones that help you now. Feel free to come back to the resource whenever you need it.

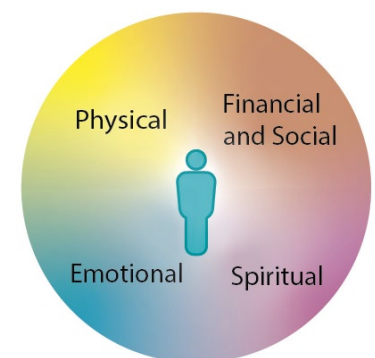
Whole-person health

The whole-person health approach will help you and your healthcare team better manage your health condition. Many cultures embrace the elements of whole-person health and this image is drawn from the teachings of the medicine wheel as practiced by many Indigenous people.

Whole-person health means thinking about all parts of your health and wellness: physical, financial and social, spiritual, and emotional. All of these parts are connected and influence each other. It's important to be aware of your personal needs in each part and to share that information with your healthcare team.

- **Physical:** Your specific health conditions and how well your body works.
- **Financial and Social:** Your ability to meet your housing, transportation, food, and health needs, feeling supported to manage your daily life, and having meaningful relationships.
- **Spiritual:** Your beliefs, sense of connection, and purpose.
- **Emotional:** How you think, feel, and cope with life events.

Whole-person health also reminds us that we are all connected and work together: You, your support systems, and your healthcare providers. Your healthcare providers could be your doctor, nurse practitioner, or a team that comes together with you to plan and organize your care.



Whole-person health

Your healthcare provider needs to understand who you are and what matters to you. This helps to build trust. But it can be hard to know what to share or what to say. Try starting by asking yourself:

“What are the things in my life that are important to me?”

“What are the things in my life that may be affecting my health and well-being?”



Talking about what matters to you is important. Here are some examples of things you may want to talk about with your healthcare provider:

Physical

“Even if I go to bed early, I always feel so tired and struggle to get through the day.”

“I often wake up with a sore throat and a headache.”

“My healthcare team just told me I have high blood pressure.”

“I wake up in the night, gasping for air and choking.”

Financial and Social

“I’m worried I won’t be able to get to all of my appointments.”

“I need my daughter with me as a translator.”

“I feel so tired at work that I am having trouble concentrating and I am worried that I will make a mistake.”

“I am not sure if I will have enough money to pay for a CPAP machine or if my health benefits will cover it.”

Emotional

“My family tells me I am always grumpy and on edge.”

“My bed partner has moved out of our bedroom as my snoring is keeping them awake. I am worried about our relationship.”

“I’m lonely and have no one to talk to.”

“I still have questions and just don’t know if I really need to use this machine”

“I don’t know if I can keep trying to sleep wearing the CPAP mask. It makes me so uncomfortable.”

Spiritual

“It’s important that I follow traditional healing practices.”

“I don’t have the energy to participate in the spiritual activities that I have always enjoyed being part of.”

“I do not feel like myself anymore because I have lost interest in the things that are important to me.”



What is obstructive sleep apnea?

Sleep apnea is a condition where your breathing stops or becomes very shallow while you sleep. This can make it hard for you to get a good night's rest, leaving you feeling very tired during the day. It can also affect your oxygen levels and may cause carbon dioxide levels in your body to rise. There are different types of sleep apnea, including central sleep apnea, complex sleep apnea, and obstructive sleep apnea (OSA).

This patient pathway is about OSA.

OSA is the most common form of sleep apnea. It occurs when the airways in your nose, mouth, or throat become narrowed, making it hard for air to flow through your windpipe while you sleep. This lower air flow makes your brain wake you up just enough to start breathing again. These pauses in breathing can also cause your blood oxygen levels to drop, which also results in you waking up. While this reflex helps you breathe, it interrupts your sleep.

Waking up often during the night means you won't get enough rest, which can make you feel tired. If you have OSA, you may have problems at work or in social settings. Over time, OSA may lead to serious health problems, especially if you have severe OSA.

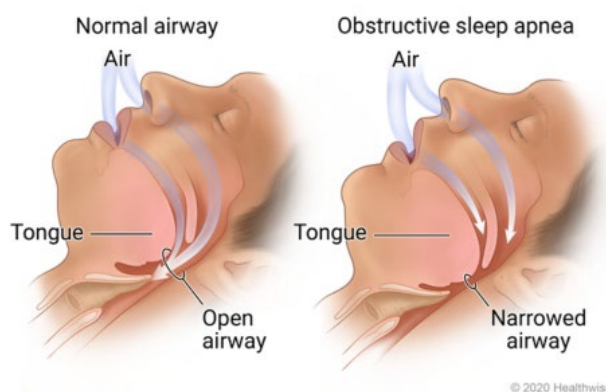


Image 1: [Sleep Apnea](#) (MyHealth Alberta)

OSA can be mild, moderate, or severe, depending on how many times your breathing stops (apnea) or how much your airflow is reduced (hypopnea). OSA severity is measured by the apnea-hypopnea index (AHI) or respiratory disturbance index (RDI). Your symptoms don't always reflect how severe your sleep apnea is.

- **Mild apnea** means you have 5 to 14 episodes of interrupted or reduced breathing each hour while sleeping.
- **Moderate apnea** means you have 15 to 29 episodes of interrupted or reduced breathing each hour while sleeping.
- **Severe apnea** means you have 30 or more episodes of interrupted or reduced breathing each hour.

Here are some great videos to help you understand sleep apnea:

Watch: Sleep Apnea: What is it? (Link:

myhealth.alberta.ca/health/pages/conditions.aspx?hwid=abp6071&lang=en-ca)

Watch: Sleep Apnea: Time to get checked (Link:

myhealth.alberta.ca/health/pages/conditions.aspx?hwid=abp8868&lang=en-ca)

What happens while you sleep?

When you have obstructive sleep apnea (OSA), the narrowing of your airway causes you to stop breathing temporarily while you sleep. This may cause you to make grunting, gasping, or snoring sounds. You may also toss and turn.

Symptoms of OSA:

- Feeling very sleepy or tired during the day
- Not feeling rested or refreshed after a full night's sleep
- Problems with memory and concentration
- Mood changes
- Waking up with a headache or sore (dry) throat
- Getting up often at night to urinate (pee)
- Falling asleep when you don't want to (for example, while eating or while at work)
- Bed partners may notice that you stop breathing while you sleep - they may say that you snore loudly, gasp, choke, or toss and turn

Note: Almost all people with OSA snore but not all people who snore have OSA. For more information on snoring, see: Snoring and Obstructive Sleep Apnea (Link: myhealth.alberta.ca/health/pages/conditions.aspx?hwid=hw48243&lang=en-ca).

Risks of Obstructive Sleep Apnea

If you experience any of these symptoms or have risk factors for sleep apnea, it's a good idea to speak with your healthcare provider as early as possible. They can help assess your risks and find out if you do have OSA. They can then guide you on steps to take to manage your OSA.

Signs that you may have sleep apnea:

- **Snoring** - loud, regular snoring
- **Witnessed apneas** - someone notices you stop breathing or make choking sounds while you sleep
- **Nocturnal choking/gasping** - waking up choking or gasping for air during the night
- **Restlessness** - moving around a lot; may cause you to wake up feeling unrested
- **Excessive daytime sleepiness** - feeling very tired or falling asleep during the day, even after a full night's sleep



Factors that may increase your risk for OSA or make it worse include:

- **Family history** - if someone else in your family has it
- **Aging**
- **Being male**
- **Menopause** - risk of OSA increases after menopause in women
- **Extra weight (overweight and obesity)** - body mass index (BMI) is 30 or higher
- **History of hypertension, stroke or heart failure**
- **Neck circumference** - extra tissue around the neck
- **Bone deformities in the nose, mouth, or throat** - such as a small, receding jaw
- **Enlarged tissues in the nose, mouth, or throat** - can block your airways while you sleep
- **Alcohol or medicines** - alcohol or taking medicines (like sleeping pills, opioids, or sedatives) before bed can make sleep apnea worse
- **Sleeping on your back** - this position may make sleep apnea worse
- **Smoking** - nicotine relaxes the muscles that keep your airways open
- **Hormonal disorders** - conditions like hypothyroidism (low thyroid hormone) or acromegaly (too much growth hormone)

Complications of Obstructive Sleep Apnea

When you stop breathing for periods during sleep, the oxygen levels in your blood may go down and carbon dioxide may levels go up. Your heart and blood vessels have to work harder and this can impact your heart and nervous system (for example, your brain). This may increase your risk for:

- High blood pressure and heart problems
- Pulmonary hypertension (high blood pressure in the blood vessels of your lungs)
- Stroke
- Depression
- Blood sugar may be harder to control if you have diabetes

Safety Critical Occupation: Jobs that require alertness, like professional driving or operating heavy machinery, can be risky if you have sleep apnea due to excessive sleepiness during waking hours.



Before your appointment

Here are a few tips to help you get ready for your appointment with your healthcare provider:

- Consider using a symptom tracker to write down important information to share with your healthcare team about your symptoms.
 - When you first noticed symptoms. Have they changed over time?
 - What you've tried to help manage sleep and fatigue.
 - Some people find using a [sleep journal](#) helps them monitor their sleep.
- Make a list of the prescription and non-prescription (over-the-counter) medicines you use, including any vitamins, herbs, and supplements.
- Ask someone you trust to go with you to your appointment. They can help you ask questions, write down instructions, and remember explanations.



Helpful tools and resources

- Use a **symptom tracker**: hqa.ca/symptom-tracker (Health Quality Alberta)
- To get the most out of your visit, plan to write notes during the visit or see the Alberta Health Services **My Care Conversations app** (ahs.ca/careapp) website for more information about recording your conversation with your healthcare provider.
- Sleep Journal: myhealth.alberta.ca/health/pages/conditions.aspx?Hwid=tm4434





Healthcare provider's assessment

Your healthcare provider will ask you questions to help them understand if you have obstructive sleep apnea (OSA). Your healthcare provider will also look at your throat and airway. They will do a thorough assessment to help them understand your symptoms and rule out other possible causes. This is an important step in diagnosing OSA and deciding on the best treatment. Here's what you can expect during the exam:

- **Airway inspection:** You may be asked to open your mouth and say "ah" while your healthcare provider looks at the back of your throat. Your airway will be checked for any physical issues that may be contributing to your sleep apnea.
- **Neck measurement:** The measurement around your neck is called the circumference. For men, a neck circumference more than 17 inches (43 cm), and for women, more than 16 inches (41 cm), can increase the risk of OSA. Extra tissue around the neck can contribute to airway blockage during sleep.
- **Height and weight:** Your height and weight may be checked to find your [body mass index \(BMI\)](#). It uses a formula to compare how much you weigh with how tall you are. This can help find out if you're at risk for OSA.

This physical exam helps your healthcare provider understand how your body might be affecting your sleep. Based on the findings, they can recommend further tests to find out if you have OSA and then help you decide on the most appropriate treatment for you.

Driving Safety and Sleep Apnea

If you feel very sleepy during the day or if your job requires you to stay alert (like driving or operating heavy machinery), your healthcare provider will talk to you about driving safety. Sleep apnea can make you very tired, and this can be dangerous when you're on the road. It's important to take steps to keep yourself and others safe while driving.

What you need to know about driving in Alberta with OSA

- **Reporting requirements:**
In Alberta, if you have a medical condition that could affect your ability to drive safely, you are required by law to report it. This includes conditions like OSA that might make you feel very tired during the day. If you don't know if you need to report your condition, your healthcare provider will guide you through the process.
- **When to report:**
In most cases, if your condition is well-controlled and you're able to drive safely, there is no need to report it. However, if your healthcare provider feels that your condition may affect your ability to drive, they may suggest that you report it. This will help keep you and others safe on the road.



- **Commercial Drivers:**

If you drive commercially (like a truck driver or bus driver), you must complete a [Medical Examination for Motor Vehicle Operators](#) form. This form helps assess your health and your ability to drive safely. If your sleep apnea is stable and well-managed, you are not required to report it beyond this form.

What to do if you're concerned about driving safety

Your health and safety are important, and there are steps to take if driving may become a safety risk. If you or someone you know has concerns about driving safely due to sleep apnea or other medical conditions, there is a way to report it. In Alberta, unsafe drivers can be reported confidentially to **Alberta Transportation** through their website. They will review the report and take appropriate steps, which may include medical evaluations or restrictions on the driver's license.

Remember: Always talk to your healthcare provider if you have any concerns about your ability to drive. They are there to help you stay safe on the road.

What should I watch for (symptoms of concern)?

Watch for and let your healthcare provider know if you:

- Feel very sleepy or tired during the day even after a full night's sleep
- Have noticed problems with your memory or ability to concentrate
- Have mood changes (for example, anxiety, depression, grumpiness)
- Wake up with a headache or sore (dry) throat
- Get up often at night to urinate (pee)
- Fall asleep when you don't want to (for example, while eating or while at work)
- Have been told that you snore, gasp, choke, or toss and turn while you sleep
- Feel drowsy or have ever fallen asleep while driving

What should I share with my healthcare provider?

- Report the symptoms that you have noticed and when you first started to notice them
- What impact sleep apnea is having on things that are important to you, like your job, hobbies and interests, and relationships

There are lots of things in your life that can impact your ability to manage your health, like:

- Problems with money, housing, and access to transportation
- Alcohol or substance use
- Not enough support or help
- Childhood experiences



It's important to talk about these things with your healthcare provider because they all play a role in your health and well-being.

You are the most important part of your healthcare team.

If you don't understand what your healthcare team is telling you, let them know right away. Be open and honest. You might say:

"This is new to me. Could you please explain it slowly, using language that is easier to understand?"

"It sounded like you said that I should... Did I understand that correctly?"

"Can you show me a picture or model to help me understand?"



Helpful tools and resources

- Making the most of your appointment (MyHealth Alberta)
myhealth.alberta.ca/health/pages/conditions.aspx?Hwid=hw226888
- Working with your healthcare team: hqa.ca/info (Health Quality Alberta)





Get your tests

There are effective treatments for obstructive sleep apnea (OSA) and having a sleep study is the first step in determining whether the treatments available could help you. If your healthcare team suspects that you have OSA and would benefit from treatment, you may be referred for a sleep study. Sleep studies are a series of tests that can provide information about what happens to the body during sleep. They measure how often you stop breathing and how much oxygen is moving through your body while you sleep. Having a sleep study is the only way to know for sure if you have sleep apnea.

Sleep studies can be done in two ways: At **home** or at a **sleep lab**. Both options help your healthcare provider understand your sleep patterns and determine the best treatment for you.

Home Sleep Apnea Test

Most people will be referred to a CPAP (Continuous Positive Airway Pressure) provider in their community to have a home sleep study. CPAP providers may be homecare companies, CPAP vendors or respiratory homecare companies. Your healthcare team may suggest a CPAP provider that they are familiar with, or they may ask you to find a CPAP provider that works best for you.

It is important to note that you may need to pay to complete the home sleep apnea test with the CPAP provider. The cost can vary.

If you are going to find a clinic on your own, make sure that you call around and ask questions about what services they offer and their costs.



Helpful tools and resources

The College of Physicians and Surgeons of Alberta (CPSA) has a listing of accredited Sleep Medicine Diagnostic facilities throughout the province:

[cpsa.ca/FacilityListing/Accredited Facility Listing Sleep Medicine.pdf](https://cpsa.ca/FacilityListing/Accredited%20Facility%20Listing%20Sleep%20Medicine.pdf)



A **home sleep study** involves using a small, portable device that measures things like how often you stop breathing while you sleep, how much oxygen is in your blood, and other factors that can help diagnose sleep apnea. Your CPAP provider will provide you with a machine to use at home, and it will track key information about your sleep overnight.

How to get ready for a home sleep study

- **Sleep diary:** Your healthcare provider may ask you to keep a sleep diary for a week or two before the study. This will help track your sleep habits and patterns, which can provide more insight into your condition.
- **Medicines:** Let your healthcare provider know about all the medicines you're taking, as some might affect the results of the study. Avoid alcohol or sedatives the night before the test, as they can influence your sleep patterns.
- **Sleep environment:** Try to sleep in your usual environment for the test to get the most accurate results. Make sure your bedroom is quiet, dark, and free of distractions.



Image 2: [AASM Home Sleep Apnea Testing \(HSAT\) Position Statement](#) (American Academy of Sleep Medicine)

How a home sleep study is done

1. **Getting ready:**
 - Before your test, your CPAP provider will give you the equipment you need, explain how it works, and guide you on how to set it up.
 - The device usually includes sensors for your finger, nose, chest, and sometimes a small microphone or movement detector. These sensors will collect data while you sleep.
2. **Setting up the equipment:**
 - **Finger sensor:** This will measure your oxygen levels and heart rate during sleep.
 - **Nose and face sensors:** These sensors track your airflow to see if your breathing is interrupted.
 - **Chest strap:** This will monitor your breathing patterns and chest movements.
 - **Body movement sensors:** Some devices will track your movements during the night.
3. **Sleeping with the equipment:**
 - Once everything is set up, you'll sleep as you normally would. Though it may feel unusual at first, the equipment is designed to be as comfortable as possible.
 - Try to relax and get comfortable with the sensors in place. Remember that the goal is to record important information to help diagnose any sleep issues.

4. After the test:

- In the morning, you'll remove the equipment and return it to your CPAP provider or the sleep center.
- You may need to wash your hair if glue was used to attach some of the sensors. Conditioner can help remove any sticky residue.

What to expect during a home sleep study

- **Comfort:** While wearing the equipment may feel a bit strange, it should not be painful or uncomfortable. Many people find it easy to fall asleep while using the device.
- **Monitoring sleep:** The device will record information, such as how often your breathing stops, how much air is flowing through your nose and mouth, how much oxygen is in your blood, and how active you are during the night. This helps your healthcare provider assess your risk for sleep apnea.

Home sleep study results

Your healthcare provider will look at information such as:

- Your blood oxygen levels
- Your heart rate
- How often your breathing stops each hour
- Your snoring and airflow
- Sleeping position

In some cases, your doctor may recommend that you do not start CPAP or oxygen unless you have had more testing. Always make sure you follow the recommendations from your healthcare team.

Sleep Lab Study

A **sleep lab study** (also called polysomnography) involves spending the night at a sleep center. This is usually done in a hospital setting and you will need a referral from your family doctor. This option is usually recommended if your healthcare provider needs more detailed information or if they believe your symptoms may be severe.

How to prepare for a sleep study:

- Keep a sleep diary for a few weeks before your study, or as instructed by your healthcare provider.
- Avoid taking naps on the day of your study.
- Let your healthcare provider know about any medications you take, as some may affect the results.
- Avoid caffeine in the afternoon or evening. The Health Canada website gives examples of foods and drinks that have caffeine and how much: canada.ca/en/health-canada/services/food-nutrition/food-safety/food-additives/caffeine-foods.html



- If you're going to a sleep lab, shower before your test and avoid using hair sprays, oils, or gels. Don't wear makeup or nail polish.
- Bring personal items like a toothbrush, toothpaste, pillow, blankets, book, and night clothes for your overnight stay.
- Bring your usual medicines.

How it is done:

- Typically, your sleep test will be scheduled during "normal" sleep hours, such as 10 p.m. to 6 a.m. If you're a shift worker or have unique "normal" sleep hours, be sure to inform the team conducting the test.
- In the sleep lab, you'll sleep in a private room.
- During the test, sensors will be attached to your body to measure things like brain activity, eye movement, muscle activity, and heart rate.
- The setup may feel unusual, but it won't be painful or uncomfortable. Try to relax and get comfortable.

Results:

The information your healthcare provider may look at include:

- Blood oxygen levels
- Estimated blood carbon dioxide levels (if available)
- Heart rate and rhythm
- How often your breathing stops each hour
- Snoring and airflow from your nose and mouth
- How long it takes you to fall asleep
- How long you sleep and stay awake
- Body movements, like in your chest, belly, arms, and legs while you sleep

Understanding How Severe Your Sleep Apnea Is

To understand how serious your sleep apnea is, healthcare providers will use your sleep study tests to understand how often your breathing stops or becomes shallow during sleep. These tests include the **Apnea-Hypopnea Index (AHI)** for a polysomnography (sleep lab study) and the **Respiratory Disturbance Index (RDI)** for a home sleep apnea test (HSAT). Both tests count how many breathing problems happen per hour during sleep.

Here's what the results mean:

- **Normal:** AHI or RDI is less than 5 events per hour.
- **Mild OSA:** AHI or RDI is between 5 and 14 events per hour.
- **Moderate OSA:** AHI or RDI is between 15 and 29 events per hour.
- **Severe OSA:** AHI or RDI is 30 or more events per hour.

The higher the number, the more severe your sleep apnea is. Your healthcare team will use these results to recommend the best treatment for you.





Helpful tools and resources

You may find some of your results and health records using secure online tools:

MyHealth Records

See your lab results, immunizations, and some other results with a MyHealth Records account. Sign up at myhealth.alberta.ca/myhealthrecords.

MyChart

See your health information, manage your Alberta Health Services appointments, and interact directly with some members of your healthcare team. Ask your healthcare provider how to access your MyChart account. Learn more at ahs.ca/mychart.





Review your treatment and management options

The goal of treating OSA is to reduce symptoms, improve quality of life, prevent serious health problems like heart disease, daytime sleepiness, and accidents caused by drowsy driving. How OSA is treated depends on how severe the condition is. This is determined by your sleep study results. Your treatment plan should be personalized to meet your specific needs.

Normal: AHI or RDI is less than 5 events per hour

- If your results show that you have less than 5 events per hour, it means you **do not have sleep apnea**. Your healthcare team will continue to monitor your health and determine what else may be needed based on your symptoms.

Mild OSA: AHI or RDI is from 5 and 14 events per hour

- If you have mild sleep apnea, your healthcare team will consider whether you have symptoms (like daytime sleepiness or snoring) and what matters most to you in your daily life.
- **Treatment may not be necessary** if you don't have significant or bothersome symptoms.
- Mild sleep apnea is not known to be a risk for any serious health problems.
- Your healthcare provider may suggest lifestyle changes as outlined below.

Moderate OSA: AHI or RDI is from 15 to 29 events per hour

- If your results show moderate sleep apnea, you may be asked to try **CPAP** (Continuous Positive Airway Pressure) therapy. A CPAP machine helps keep your airway open while you sleep, reducing your symptoms and improving sleep quality.
- You can find more information below about CPAP.
- A CPAP trial may be recommended to see if it helps you feel better and reduces your symptoms, like daytime sleepiness or fatigue.

Severe OSA: AHI or RDI is 30 or more events per hour

- If your results show severe sleep apnea, your healthcare provider will strongly encourage you to try **CPAP** therapy. Severe sleep apnea can be dangerous and puts you at risk for serious health problems, like heart disease or high blood pressure.
- CPAP is often the most effective treatment for severe OSA, helping you breathe more easily during the night and reducing the risks associated with this condition.

No matter your diagnosis, your healthcare provider will help guide you through the treatment options that are right for you and your specific needs. It's important to talk openly about your symptoms, concerns, and what you want from your treatment plan.

There are several ways to manage OSA, and lifestyle changes can play a big part in improving your symptoms.



Healthy Habits

One of the key steps in managing OSA is to make healthy choices. These habits can help reduce symptoms and improve your overall health:

- **Balanced nutrition:** Eat a well-balanced diet to help you manage your weight and improve your sleep. Focus on eating fruits, vegetables, lean proteins, and whole grains.
- **Regular activity:** Get regular physical activity, as it can help reduce the severity of OSA. Exercise strengthens muscles, can help with weight control, and helps you get better sleep.
- **Sleep hygiene:** Keep a regular sleep schedule and create a comfortable sleep environment to help you get the best rest possible. This means going to bed and waking up at the same time each day, keeping your bedroom cool and dark, and avoiding screens before bed.
- If you need support:
 - Alberta Healthy Living Program offers free services to Albertans, like health and nutrition education and individual support from dietitians. Learn more at ahs.ca/ahlp.
 - Making small changes that you can stick to over time is the best way to manage OSA in the long term.

Weight loss (if appropriate):

- Being overweight, especially carrying extra weight around the neck and upper airway, can make OSA worse. Losing even a small amount of weight can improve your breathing and reduce the severity of your symptoms. Work with your healthcare provider to set up a realistic weight loss plan that includes healthier eating and more physical activity.
- If you need support:
 - [MyHealth.Alberta.ca](https://myhealth.alberta.ca) has online learning modules to help with weight management. Visit [MyHealth.Alberta.ca](https://myhealth.alberta.ca) and type “Weight Management Learning Modules” into the search bar.
 - Health Link has registered dietitians available to answer nutrition questions. Complete a self-referral at ahs.ca/811 or call 811 and ask to talk to a dietitian.

Limit alcohol use:

- Alcohol relaxes the muscles in your throat, which can make the airways more likely to collapse. This can cause more breathing pauses during sleep. It’s important to limit alcohol intake, especially before bed, as this can worsen OSA symptoms. Cutting back on alcohol can help improve your sleep and the effectiveness of other treatments.



Sleep position:

- The way you sleep can also affect how much OSA affects you. For some people, sleeping on their back makes symptoms worse, and sleeping on their side can help reduce apnea episodes. This may be helpful if you have mild to moderate OSA. Changing your sleep position alone might not completely fix OSA, but it may work well when combined with other treatments.

Continuous Positive Airway Pressure (CPAP)

This is one of the most effective treatments for sleep apnea. CPAP involves a small machine that you use every night while you sleep. The machine increases the air pressure in your throat to keep your airway open so you can sleep and breathe better. It is important that you wear your CPAP during the entire time that you sleep, every night. You may also use it during your daytime naps.



Image 3: Continuous positive airway pressure (CPAP) for sleep apnea [Sleep Apnea](#) (MyHealth Alberta).

Different mask types are available for your CPAP machine:

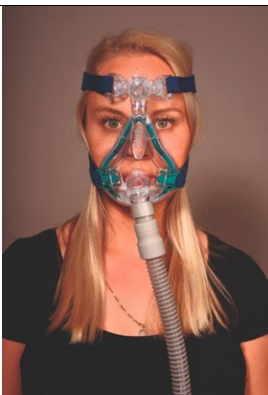


Full face: Covers both your nose and mouth	Nasal: Fits over your nose	Nasal pillow: Sits below your nose and covers only the openings of your nose
		

Image 4: [DynaMed](#)

Watch: Sleep Apnea: Using CPAP (Link: myhealth.alberta.ca/Health/pages/conditions.aspx?hwid=abp6083)



Goal of CPAP therapy

The goal is to use your CPAP machine for at least **4 hours a night** at least **5 nights a week**.

Most people need to use a CPAP machine every night for the best results. If it's working, you should feel less tired during the day, have more energy, and notice an overall improvement in how you feel.

Follow-up appointments

When you first start using your CPAP, you may need to meet with your CPAP provider often to adjust your CPAP machine settings, mask fitting, or to make sure that your CPAP therapy is working. This is very normal. You will have your first follow-up appointment with your CPAP provider within **2 to 4 weeks** after starting CPAP therapy. If needed, you can also request an appointment with your primary care provider.

Once you are set up with a CPAP therapy that works well for you, your CPAP provider will work with you to schedule regular follow-up appointments (at least once a year). At these appointments they will make sure that your CPAP therapy is still working well for you, check to see if additional setting adjustments are needed, and inspect your mask and tubing to see if anything needs to be replaced.

CPAP maintenance

Your CPAP machine needs water to run properly. Your CPAP provider will show you how to fill the humidifier water tub in your machine. It is important that you use only distilled water in your CPAP machine. You can buy distilled water at most grocery stores and pharmacies.

It is very important that you clean your CPAP equipment regularly. Clean your mask cushion and humidifier water tub every day. Clean your full mask and air tubing at least once every week. Always follow the cleaning instructions from the manufacturer. The weekly cleaning of your CPAP equipment should only take 5 minutes. To clean your equipment, you will need a sink or tub, warm (86°F or 30°C) drinking quality water, mild liquid detergent and a clean towel.

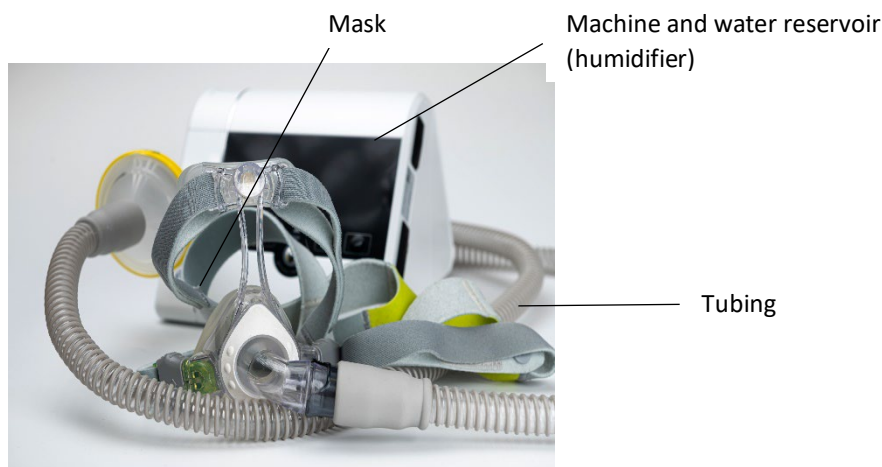


Image 5: Photographer: Askolds from iStock

Troubleshooting CPAP issues

Sometimes, people have trouble using their CPAP machine as recommended. Common reasons for this are **discomfort**, feeling **claustrophobic**, the **noise**, or they just can't get used to it. Here are some solutions to make it easier:

- **Check the mask fit:** Make sure the mask fits well and is comfortable. Sometimes, issues like **facial hair** or weight changes can make it harder for the mask to fit. The mask should be replaced every **6 to 12 months** to keep it in good condition.
- **Humidifier:** Using a **humidifier** with your CPAP machine can help with dryness in your nose and throat.
- **Practice:** Try wearing the CPAP during the day for short periods to get used to it.
- **Support:** Sometimes emotional or psychological issues can make it hard to stick with CPAP. Talking to a counselor or getting support from others can help.

It may take some time to get used to using your CPAP. If you are having trouble wearing your CPAP or have any side effects (dry or stuffy nose or a sore throat; irritated skin on your face; or bloating), talk to your healthcare team. They may have suggestions to help.

Watch: Sleep Apnea: Having Trouble with CPAP (Link: myhealth.alberta.ca/health/tests-treatments/pages/conditions.aspx?hwid=abp6089)

Information about buying a CPAP machine can be found at:

myhealth.alberta.ca/Alberta/Pages/Buyers-Information-for-CPAP-Therapy-Equipment.aspx

In Alberta the cost of CPAP can vary depending on the CPAP provider. Here are some estimated costs:

- CPAP Trial \$100 to \$250
- CPAP Purchase \$1500 to \$3000 (costs typically include education, troubleshooting, and service by CPAP provider)
- You may have ongoing costs for items such as machine replacements, distilled water, and maintenance. Prices for these items will vary.

In Alberta, people diagnosed with OSA may receive support for the funding of CPAP machines through the Alberta Health Care Insurance Plan (AHCIP) and other provincial programs, depending on the specific circumstances.

1. Alberta Health Care Insurance Plan (AHCIP):

- AHCIP generally covers the diagnostic testing for OSA, such as sleep studies (polysomnography), when ordered by a doctor. However, CPAP therapy and equipment are **not directly covered** by AHCIP for all patients.



2. **Private insurance and supplementary health plans:**

- Many people in Alberta have supplementary health insurance, either through private providers or employer health plans. These may cover part or all of the cost of CPAP machines and related accessories. The coverage varies by plan, and you are encouraged to check with your insurance provider for specifics on CPAP coverage.

3. **Alberta Aids to Daily Living (AADL):**

- For people with financial need, **Alberta Aids to Daily Living (AADL)** may provide funding help for CPAP machines and related supplies. AADL is a provincial program that offers financial help to residents with long-term disabilities or chronic conditions that affect daily living.
- Eligibility for AADL funding is based on medical need, income, and other criteria. To qualify, people typically need a referral from a doctor or healthcare provider and must show that CPAP therapy is essential for managing their OSA.

4. **Veterans Affairs Canada (VAC) and other special groups:**

- For eligible veterans and certain other groups, CPAP machines may be covered through **Veterans Affairs Canada (VAC)** or other government-funded programs, depending on your circumstances.

It is important for you to consult with your healthcare provider and explore available resources, including private insurance and provincial programs, to understand their funding options for CPAP machines.

Travel

As it is important that you wear your CPAP every night, you will need to take it with you when you travel. A CPAP machine can be taken on the airplane as part of your carry on baggage. More information about flying with your CPAP machine can be found on the Canadian Air Transport Security Authority website (catsa-acsta.gc.ca/en/what-can-bring/item/continuous-positive-airway-pressure-cpap-device). Other countries may have different regulations.



Customized Oral Appliance

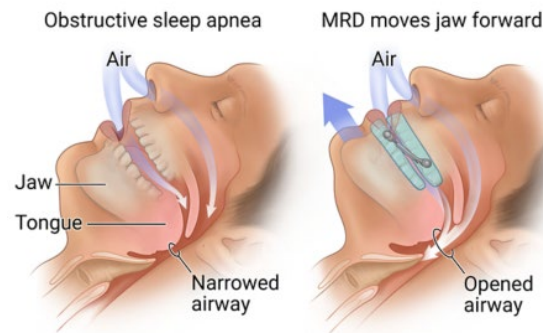


Image 6: Mandibular repositioning device [Sleep Apnea](#)
(MyHealth Alberta). Healthwise Staff, July 10, 2023

For patients with moderate or severe OSA, a customized oral appliance may be an option for treatment. This device is often called a mandibular repositioning device (MRD) or mandibular advancement device (MAD). Your mandible is your lower jaw. Customized means that it was made specifically for you.

These devices work by gently pushing your lower jaw forward while you sleep. This helps to open your airway, allowing better airflow and reducing the chances of airway blockage. The MRD can also help prevent the tissue in your throat from collapsing and narrowing your airway, making it easier for you to breathe throughout the night.

A certified sleep dentist who has experience fitting these devices will make sure your device is customized to fit comfortably in your mouth and shifts your lower jaw like it should. It's important that you work with a certified sleep dentist, as your appliance needs to be properly fitted and adjusted for your needs. If a specialized sleep dentist isn't available in your area, you may need to travel to get to one. Over-the-counter oral devices are not recommended as they have not been proven to help with OSA.

You will need to wear the device every night to help reduce breathing problems during sleep. Oral appliances are often not covered by Alberta Health Care, so you may need to pay for them.

Your healthcare provider will work with you to determine if an MRD is a good fit for your treatment plan.

Watch: Sleep Apnea: How treatment can improve your life. (Link: myhealth.alberta.ca/health/pages/conditions.aspx?hwid=abp8875)

Surgery

Surgery may be an option for some people who have moderate or severe OSA. There are several surgical treatment options available. Some patients may need a surgery to remove enlarged tissue that may block the throat and cause sleep apnea. Others may need jaw surgery. Surgery may be considered for some people who cannot tolerate a CPAP machine or an oral appliance.

Surgery for OSA is often not covered by the Alberta Health Care and can vary significantly in cost.

Ask the following questions to help you make an informed decision about your treatment options and decide which ones will work best for you:

“What are the advantages and disadvantages of each treatment or management option?”

“Can I use any of these options together?”

“How will this make me feel? Will it have side effects?”

“What results can I expect?”



Talk with your healthcare provider about a referral

Not all people with OSA need a referral to see a specialist. Whether you need to see a sleep or respiratory specialist depends on your medical history, symptoms, and what treatments you've already tried.

- **Respirologist:** A respirologist is a doctor who specializes in lung and breathing problems. They can help with conditions like sleep apnea, asthma, and other respiratory issues. If your OSA is more complex or if treatments are not working well, a respirologist can provide advanced care. You should receive an update about the progress of your referral to a respirologist within **3 months**.
- **Sleep specialist:** A sleep specialist is a doctor who focuses on sleep disorders, including sleep apnea, insomnia, and restless leg syndrome. They can help diagnose your condition and find the best treatment options.
- **Respiratory therapist:** A respiratory therapist is a healthcare professional who specializes in the diagnosis and management of breathing problems, including sleep apnea. They have experience with CPAP therapy and can help you with CPAP therapy setup and troubleshooting.



- **CPAP community provider:** Local CPAP providers will help support you to buy a CPAP machine that is right for you. They will fit you for a CPAP mask, help you with your equipment if you have trouble using it, and will help monitor your OSA long term with follow-up appointments. They also sell replacement parts and equipment. Some CPAP providers may have respiratory therapists who also support you with your OSA care.



Helpful tools and resources

To learn about how to prepare for your specialist appointment, check out the QuRE Patient and Caregiver Journal by visiting ahs.ca/quire.



Start your treatment and watch your symptoms

As you try the treatment options you chose, and if something doesn't work the way you thought it would, you can think about other options. Connect with your healthcare provider to find a treatment that works for you.

- **Monitor your symptoms:** Pay attention to how you're feeling during the day and night. Are you still feeling tired? Are there any changes in how you're sleeping? This information can help your healthcare provider adjust your treatment if needed.
- **Ask your bed partner:** Talk to your bed partner (if you have one) and ask if they've noticed any changes in your sleep or symptoms. Sometimes, they see things that you don't notice, and their observations can help guide your treatment.

Managing sleep apnea is a process, and with the right support, you'll find the treatment that works for you. You might feel like you don't want to bother your healthcare team, but no detail is too small to share. If it matters to you, it matters to your healthcare team.



Helpful tools and resources

If you can't reach your healthcare team and need health advice or information, call Health Link anytime, day or night, by dialing **811**.





Keep taking care of yourself

Remember that a diagnosis of OSA is part of your medical history. If you see another healthcare provider, are being admitted to hospital, or are going for surgery, it is very important that you let those healthcare teams know that you have OSA. Tell them what therapy you use, for example, a CPAP machine. This will help your healthcare teams support you and take care of you.

Whole-person health

Supporting whole-person health is important at all times. Many resources are available to help you.



Helpful tools and resources

Find programs and resources in your community:

211 connects Albertans to the programs and resources they need, anytime, day or night. Whether you're looking for help with mental health, financial assistance, basic needs, or other challenges, 211 is here to help you find supports. It's free, confidential, and available in over 170 languages by phone, making it easy to access help when you need it. To connect with **211 Alberta**:

- Call 211
- Text INFO to 211
- Chat or search at ab.211.ca

The **Alberta Healthy Living Program** offers free workshops, classes, and supervised exercise and nutrition services to adults living with a variety of chronic conditions and diseases. Many education classes and workshops are available province wide. Learn more by visiting ahs.ca/ahlp.

Chronic Disease Management support: ahs.ca/cdm

Health Information & Tools: myhealth.alberta.ca/Pages/HealthInfoToolsDefault.aspx



Resources

There's lots of information out there, and it can be confusing to know what information is accurate and true. Here are some great resources that may be helpful for you.

Visit [MyHealth.Alberta.ca](https://myhealth.alberta.ca) and search for "Sleep Apnea" for resources. Some examples:

- [Sleep Apnea](#): Provides an overview of the causes, tests, and treatment options
- [Continuous Positive Airway Pressure \(CPAP\) Therapy for Obstructive Sleep Apnea](#)
- [Buyer's Information for CPAP Therapy Equipment](#)
- [Sleep Studies](#)
- [Sleeping Better](#)

Get help now:

- Emergency: **Call 911**
- Health Link: Call 811

Mental health, addiction, and crisis support:

- 811 or [Addiction Helpline](#): 1-866-332-2322
- 811 or [Mental Health Helpline](#): 1-877-303-2642
- Crisis Text Line: Text CONNECT to 741741
- Crisis Services Canada: Call 988, or visit talksuicide.ca

Helpful tip

If you can't print this resource at home, ask a family member, friend, or your healthcare provider to print it for you. You can also use a computer and printer at your local library.

Community and social supports:

- 211 Alberta: Call 211, or visit ab.211.ca
- Family Violence Info Line: 310-1818, or visit alberta.ca/family-violence-find-supports.aspx
- Income Support: 1-866-644-5135, or visit alberta.ca/income-support.aspx

Alberta Health Services programs:

- Home Care: ahs.ca/homecare
- Find a Dietitian: ahs.ca/nutrition
 - Health Link has dietitians to answer nutrition questions. Call Health Link at 811 and ask to talk to a dietitian or complete the self-referral form on ahs.ca/811.
- Spiritual Care Services: ahs.ca/spiritualcare

Primary care (family doctors and nurse practitioners):

- Find a doctor or nurse practitioner: ahs.ca/findadoctor
- Virtual care guide: ahs.ca/virtualhealth

Patient concerns and feedback:

- Office of Alberta Health/Mental Health Patient Advocates: alberta.ca/office-of-alberta-health-advocates.aspx
 - Offers coaching to help you advocate for yourself in the health system, and supports learning how the health system works and how to navigate through it.
- Alberta Health Services Patient Relations: 1-855-550-2555, or visit ahs.ca/patientfeedback



Important phone numbers for you to write down

Name or clinic name:

Phone number:

Name or clinic name:

Phone number:

Name or clinic name:

Phone number:

Important notes for you to remember

Use this space to take your notes.



About this Pathway

The Provincial Pathways Unit co-developed this patient pathway in partnership with:

- Respiriologists and sleep specialists
- Primary care providers including physicians
- Patient and family advisors
- Alberta Health Services professionals

It is current as of May 2025.

Authors & Conflict of Interest Declaration

This pathway was reviewed and revised by a multi-disciplinary co-design team including respirologists, sleep specialists, primary care providers and patient and family advisors from across Alberta.

Pathway Review Process

Primary care pathways undergo scheduled review every three years, or earlier if there is a clinically significant change in knowledge or practice. The next scheduled review is Spring 2028. However, we welcome feedback at any time. Please send your [feedback here](#), or email comments to albertapathways@primarycarealberta.ca.

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Disclaimer

This pathway represents evidence-based best practice but does not override the individual responsibility of healthcare professionals to make decisions appropriate to their patients using their own clinical judgment given their patients' specific clinical conditions, in consultation with patients/alternate decision makers. The pathway is not a substitute for clinical judgment or advice of a qualified healthcare professional. It is expected that all users will seek advice of other appropriately qualified and regulated healthcare providers with any issues transcending their specific knowledge, scope of regulated practice, or professional competence.

