



Sleep Apnea & Orthodontic Care: A Pediatric Perspective

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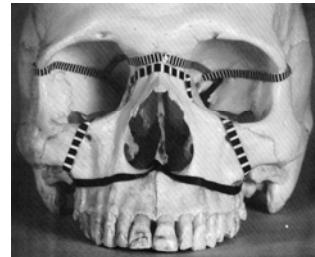
OSA & Snoring in Kids

- Common, Differences from Adult OSA
- Spectrum of severity
 - UARS: upper airway resistance syndrome
 - Breathing-related micro-arousals
 - Chronic snoring, 3-12%
 - Nasal vs pharyngeal (tongue base)
 - Frank OSA “syndrome”, 1-3%
 - Gas exchange abnormalities
 - ~50% of apneic events assoc with EEG arousal

Risk Factors for OSA

- Enlarged tonsils +/or adenoids, +/or turbinates
- Other medical: Obesity, GERD, Seizures
- Muscle tone / strength abnormalities
 - Static: Hypo or Hypertonic
 - Progressive: Myopathies, Duchenne
- Craniofacial: A-P and Lateral dimensions
 - Mid-facial hypoplasia
 - Mandibular retrusion / micrognathia
 - High-arched palate, narrow mid-face

Maxillary Advancement



Mandibular Advancement



Consequences

- Cardio-respiratory:
 - Low O₂, high CO₂
 - Airflow limitation
- Neurobehavioral: Due to sleep fragmentation
 - Fatigue vs hyperactivity / ADD or ADHD-like
 - Morning headache
 - Moodiness / Irritability
 - Impaired Learning / Memory / Motor / Language
- Growth / Failure to Thrive
- Facial / Anatomic: “adenoid facies”

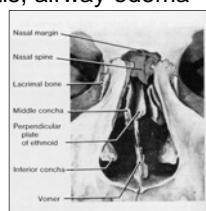
Clinical Evaluation

- History of clinical signs & symptoms
- Exam: Facies, Oropharynx, Habitus
- Rarely: Imaging, Lab work (ABG), EKG
- Nasendoscopy: site of obstruction
- Gold Standard: Laboratory Sleep Study
 - “Polysomnogram” (PSG): scoring criteria
 - Poor correlation: screening Qs & PSGs
- Home studies
- Autonomic Tools (PAT, PTT)



Treatment of OSA

- T &/or A, Turbinate reduction, Septoplasty
- Nasal Steroid, Allergen Elimination
- Treat GERD: sinusitis, airway edema
- (Weight Loss)
- CPAP / Bilevel PAP



Treatment of OSA

- Orthognathic surgery
- Tracheostomy (ultimate tx; rare!)
- Oral Appliances
 - (Adults, Older adolescents)
- Newer: Orthodontic—more research needed, mild OSA
 - Rapid Maxillary Expansion

Rapid Maxillary Expansion

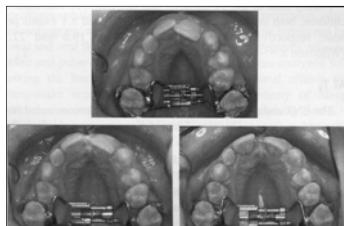
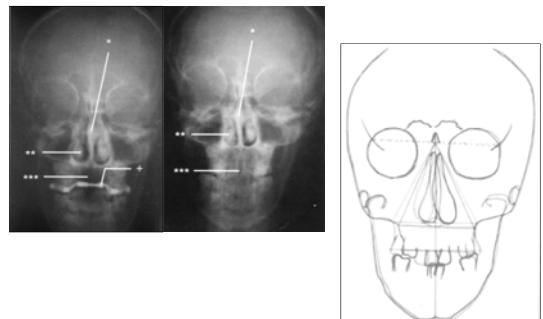


Figure 2—Occlusal sequence of treatment with rapid maxillary expansion, from crowding in the upper central incisors (upper left) to a wide space (lower image). Note how the palatal vault has changed.

Rapid Maxillary Expansion



Perioperative and Sedative Complications

- Age < 3 years
- Severe OSA on PSG (e.g. growth issues)
- Morbid Obesity
- Cardiopulmonary effects of OSA
 - HTN, pulmonary HTN, RVH, cor pulmonale
- Craniofacial dx
- Neuromuscular dx
- Ex-premies, more vulnerable

Thank You for my family's smiles!

