Summary

Introduction. The treatment of snoring and obstructive sleep apnea syndrome comprises preventive behavior, conservative methods (CPAP) and surgical treatment. In the diagnostic procedures the most important aim is to determine whether the patient is an habitual snorer or OSA patient. Very important thing is also patient’s qualification for proper mode of treatment. The aim of the surgical treatment is to remove all the reasons that obstruct the upper airways and cause the increasing of respiratory air stream resistance. The most collapsible airway region during sleep is oropharynx involves the soft palate, uvula, tonsils, tonsillar pillars, base of the tongue and pharyngeal muscles. Material and methods. In the study the results of surgical treatment of 138 patients suffering from breathing disturbances during sleep treated at the ENT Department Silesian Medical University in Zabrze in the years 1997 to 2002 were presented. In the evaluated group were 51 habitual snorer and 87 OSA patients. Various type of surgical procedures were performed depend on the airway obturation level (septoplasty, tonsillectomy, LAUP, arytenoidectomy). The postoperative control sleep studies were performed in 68 patients (49,3%) 6 to 12 weeks after the end of the surgical treatment. In all the patients the subjective improvement were evaluated. Results. In 35 from 45 OSA patients (77,8%) RDI decreased after the surgical treatment more than 50% of the preoperative value or was lower than 10 (RDI lower than 10 was in 16 patients, in 19 patients decreased more than 50%). The subjective radical improvement was obtained in 107 patients (77,5%), moderate improvement in 19 cases (13,8%) and no improvement in 12 patients (8,7%). Conclusions. On the base of our results we concluded that surgery is successful method for treatment of selected patients with breathing disturbances during sleep.