

Upper airway resistance syndrome (UARS)

Information for patients

This leaflet answers common questions about upper airway resistance syndrome. If you would like further information, or have any concerns, please do not hesitate to ask a member of the team or doctor.

What is upper airway resistance syndrome?

Upper airway resistance syndrome (UARS) is a common disorder characterised by a slight narrowing of your throat (upper airway) when you sleep. This reduces the airflow to your lungs and can consequently cause disruption to your sleep as your brain has to wake you up during deep sleep to encourage you to take stronger breaths. Some of the common symptoms of UARS you might experience are:

- snoring (often loud enough to bother other people)
- heavy breathing 'like trying to breathe through a straw'
- frequently waking up from sleep (with difficulty falling asleep)
- feeling like your sleep the night before was not refreshing
- feeling tired throughout the day and finding it difficult to concentrate
- having mood swings or feeling irritable.

UARS is a different condition to obstructive sleep apnea (OSA) where the relaxed tissues completely block the airway rather than just narrowing it.

What causes UARS?

UARS is more common in men, women after menopause and people over the age of 65. People at a higher risk of developing UARS include those with:

- enlarged tonsils and/or adenoids (glands in the roof of your mouth)
- excessive weight
- jaw problems such as micrognathia (small jaw) or retrognathia (pulled back jaw)
- pregnancy.

Why is good quality sleep important?

Poor sleep can cause the symptoms described above and can lead to an increased risk of developing a number of serious conditions such as, diabetes, heart disease, stroke, high blood pressure and depression. It can also make any other chronic illnesses worse. If you struggle with your weight, it can also make it harder to lose weight.

What can be done about UARS?

As the airway is not completely closing off, as in the condition OSA, you are unlikely to need a breathing mask. If you are overweight one of the best things you can do is try to lose weight as this will directly improve the narrowing in your throat.

Often the symptoms of UARS are worse when lying on your back, as it is the weight of the relaxed throat tissues that narrows the gap the air needs to pass through. Trying to sleep on your side or front can help.

One of the most common treatments is a mandibular advancement splint/device (MAS). This is detailed below.

Mandibular advancement splint (MAS)

The mandible is the bone in your lower jaw. Pulling this forward just a few millimetres can improve the air flow into the lungs while your airway is relaxed when asleep. The MAS is a device you wear at night which helps do this and is typically worn over the teeth.

Along with many other NHS trusts, the Royal Free London NHS Foundation Trust does not supply mandibular advancement devices. Please see the attached leaflet for advice on how to purchase one.

Sometimes these devices can cause some mild jaw pain in the first few weeks of use, but typically this improves and they are well tolerated. If the pain persists changing the device to a different type can be helpful or speaking to your dentist.

You may also need a dental review prior to purchasing a MAS if you have gum disease or have lost many of your teeth.

More information

For more information about the respiratory medicine service at the Royal Free London, please visit our website: www.royalfree.nhs.uk/services/services-a-z/respiratory-medicine

Your feedback

If you have any feedback on this leaflet or for a list of references for it please email:

rf.communications@nhs.net

Alternative formats

This leaflet is also available in large print. If you need it in another format – for example braille, a language other than English or audio - please ask a member of staff.

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Service: Respiratory medicine
Version number: 2
First approved: November 2018
Approval date: April 2021
Review date: April 2023
www.royalfree.nhs.uk