Is snoring a problem in your household? Are you tired of not getting restful sleep?
If you answered yes, then you need to take this test...

### THE BERLIN QUESTIONNAIRE:

1. **Do you snore?**  
   - a) Yes  
   - b) No  
   - c) Don’t know

2. **How loud is your snoring?**  
   - a) Breathing  
   - b) Talking  
   - c) Louder than talking  
   - d) Very loud - can be heard in adjacent room

3. **How often do you snore?**  
   - a) Nearly every day  
   - b) 3-4 /wk   
   - c) 1-2/wk  
   - d) 1-2 times/mo  
   - e) Almost Never

4. **Has your snoring ever bothered others?**  
   - a) Yes  
   - b) No  
   - c) Don’t know

5. **Do you stop breathing during sleep?**  
   - a) Nearly every day  
   - b) 3-4 /wk   
   - c) 1-2/wk  
   - d) 1-2 times/mo  
   - e) Almost Never

6. **How often do you feel tired after sleep?**  
   - a) Nearly every day  
   - b) 3-4 /wk   
   - c) 1-2/wk  
   - d) 1-2 times/mo  
   - e) Almost Never

7. **While awake, do you feel tired?**  
   - a) Nearly every day  
   - b) 3-4 /wk   
   - c) 1-2/wk  
   - d) 1-2 times/mo  
   - e) Almost Never

8. **Have you ever fallen asleep while driving?**  
   - a) Yes  
   - b) No

9. **If yes, How often does this occur?**  
   - a) Nearly every day  
   - b) 3-4 /wk   
   - c) 1-2/wk  
   - d) 1-2 times/mo  
   - e) Almost Never

10. **Do you have high blood pressure?**  
    - a) Yes  
    - b) No  
    - c) Don’t know

**Score yourself on the back.**

<table>
<thead>
<tr>
<th>Section</th>
<th>Question</th>
<th>Option a</th>
<th>Option b</th>
<th>Option c</th>
<th>Option d</th>
<th>Option e</th>
</tr>
</thead>
<tbody>
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### SELF SCORING

**Score 1 point for the following:**
1) a
2) c or d
3) a or b
4) a
**Score 2 points for the following:**
5) a or b
6) a or b
7) a or b
8) a
9) note only
10) a or BMI > 30

### RESULTS

**High risk** - 2+ sections with 2 or more points  
**Low risk** - 0-1 sections with 2 or more points

Bring these results to your next appointment.
What you should know about Snoring and Obstructive Sleep Apnea:

Loud and frequent snoring is a common sign of Obstructive Sleep Apnea (OSA), a potentially life threatening condition. If left untreated, OSA can increase the risk for serious health problems from congestive heart failure, stroke, high blood pressure and heart disease to diabetes, obesity, depression and impotence.

The American Sleep Apnea Association (ASAA) estimates 22 million U.S. adults have obstructive sleep apnea, which causes them to stop breathing hundreds of times a night for anywhere from a few seconds to more than a minute.

Blocked or narrowed airways cause sleep apnea and may be due to large tonsils, a large tongue, or the jaw structure. OSA occurs when the tongue and soft palate collapse onto the back of the throat, blocking the upper airway.

OSA can be controlled with appropriate treatment. ASAA estimates that 80% of moderate and severe OSA cases remain undiagnosed.

How do I know if I have Obstructive Sleep Apnea or sleep-disordered breathing?

- They are diagnosed by a board certified sleep physician.
- Symptoms include: loud and frequent snoring, tooth grinding, gasps and a choking sensation while sleeping, daytime fatigue from lack of nightly restful sleep and headaches.

How is Obstructive Sleep Apnea treated?

OSA has been most commonly treated long-term with Continuous Positive Airway Pressure (CPAP). The patient sleeps connected to a machine that blows sufficient air into a mask to keep the airway from collapsing during sleep.

While CPAP is standard treatment, up to 50% of sleep apnea patients do not comply with or tolerate CPAP for a variety of reasons, including: difficulty traveling with the machine, mask discomfort, air leaks, dry mouth and noise.

Patients are also advised to make lifestyle changes and some are treated surgically to correct the compromised airway function.

A Better Night’s Sleep with Oral Appliance Therapy.

At Lima Oral Sleep Center we treat mild to moderate Obstructive Sleep Apnea with oral appliance therapy.

In contrast to a CPAP machine, an oral appliance is a ‘mouth-guard-like’ device worn only during sleep in order to maintain an open, unobstructed airway.

Patients like the oral appliance because it is easy to wear; comfortable, quiet, easy to care for and portable.

Open airway; with an oral appliance.

Closed airway; without an oral appliance.

Oral Appliance Therapy is an effective alternative to CPAP and can equal CPAP in effectiveness. Studies by the American Academy of Dental Sleep Medicine have also shown a higher patient compliance rate — as high as 75% with an oral appliance for the treatment of obstructive sleep apnea.

Oral Appliance Therapy is also an effective and non-invasive treatment for snoring that does not require weight loss or behavioral changes.

Like CPAP, oral appliance therapy can have side effects and are generally minor; most of which improve within a few weeks. Side effects can range from excessive salivation to more uncommonly slight tooth movement. Visit LimaDental.net/sleepapnea for a complete list.

Let Dr. Risolvato and Your Sleep Doctor Help You Enjoy a Soothing and Safer Sleep, Night After Night.

If you believe you may suffer from sleep apnea and/or habitual snoring, visit your physician or board certified sleep physician. Only a board certified sleep physician can diagnose Obstructive Sleep Apnea.

If you have OSA, you may be a candidate for Oral Appliance Therapy and can be treated by Dr. Risolvato in conjunction with your physician. Dr. Risolvato is trained in dental sleep medicine and is a member of the American Academy of Dental Sleep Medicine (AADSM), the national society dedicated to the practice of dental sleep medicine.