

Informed Consent for the Treatment of Sleep Disordered Breathing

You have been diagnosed by your physician as requiring treatment for sleep-disordered breathing (snoring and /or sleep apnea). Obstructive sleep apnea is a medical condition that may pose serious health risks since it disrupts normal sleep patterns and can reduce normal blood oxygen levels. This condition can increase a person's risk for excessive daytime sleepiness, fatigue, driving and work-related accidents, high blood pressure, heart disease, stroke, diabetes, obesity, memory and learning problems, and depression. Oral appliance therapy is one option to help control obstructive sleep apnea.

What Is Oral Appliance Therapy?

Oral appliance therapy for snoring/obstructive sleep apnea attempts to assist breathing during sleep by keeping the tongue and jaw in a forward position during sleeping hours with the use of a mandibular advancement device (MAD). Oral appliance therapy has effectively treated many patients, however there are no guarantees that it will be effective for you, since every one is different and there are many complex factors influencing the upper airway during sleep and these are not all completely understood. The effects of MADs on sleep-disordered breathing are usually inferior to CPAP, especially for apnea-hypopnoea index (AHI) reductions, but patient acceptability appears to be better with similar improvements in quality of life and symptoms.

It is important to recognize that even when the therapy is effective, there may be a period of time before the appliance functions maximally. During this time you may still experience the symptoms related to your sleep disordered breathing. **Whether you suffer any residual symptoms or you do not, a post-adjustment polysomnogram (sleep study) is necessary to objectively assure effective treatment.**

Side-Effects and Complications of Oral Appliance Therapy

Published studies show that short-term side-effects of oral appliance use may include excessive salivation, difficulty swallowing (with appliance in place), sore teeth, jaw joint or muscle pain, dry mouth, gum pain, loosening of teeth and short-term bite changes (how the upper teeth and lower teeth come together). There are also reports of dislodgement of ill-fitting dental restorations. Most of these side-effects are minor and resolve in time on their own, with minor adjustments of the appliance or by employing simple jaw exercises. Long-term complications include bite changes that may be permanent resulting from tooth movement or jaw joint repositioning. Expert consensus is that use of the morning occlusal guide provided for you will help reduce the likelihood and severity of most of these side-effects.

These complications may or may not be fully reversible once appliance therapy is discontinued. If not, restorative treatment or orthodontic intervention may be required for which you will be responsible. Treatment for bite changes bothering the patient may require discontinuing oral appliance therapy and the use of an alternate therapy such as CPAP.

If unusual symptoms or discomfort occur that keep you from using your appliance, or if pain medication is required to control discomfort, it is recommended you contact our office immediately to resolve these issues. It is your responsibility to report the occurrence of side-effects that may be related to the therapy, and to address any questions to this office.

Initial

Alternative Treatments for Sleep Disordered Breathing

Other accepted treatments for sleep-disordered breathing include behavioral modifications, avoidance of sleeping on your back, positive airway pressure (CPAP) and various surgeries. It is your decision to have chosen oral appliance therapy to treat your sleep disordered breathing and you are aware that it may not be completely effective for you.

Treatment Follow-up

Follow up visits with our office are mandatory to ensure proper fit and allow an examination of your mouth to assure a healthy condition. Proper management of obstructive sleep apnea with oral appliance therapy requires careful follow-up to ensure adequate effectiveness of the therapy and control of undesirable side effects. Once you have become used to your appliance therapy **a sleep study administered by a sleep physician is necessary** to ensure this therapy is adequately reducing your risk for excessive daytime sleepiness, fatigue, driving and work-related accidents, high blood pressure, heart disease, stroke, diabetes, obesity, memory and learning problems, and depression. Failure to treat sleep-disordered breathing may increase the likelihood of significant medical complications.

Long-term follow-up is required to ensure continued effectiveness of the therapy. Some individuals may need to consider other treatment options after many years of oral appliance therapy due to the nature of changes in their condition

It is important that you maintain normal dental check-ups and tooth and gum care with your regular dentist. While we will contact your dentist to let them know you now have an oral appliance treating your sleep breathing be sure to remind your dentist you use an oral appliance. Most routine dental care will require little or no modification of your oral appliance and may be managed by your regular dentist. In the event of dental care requiring appliance adjustment or modification by Better Sleep Dental a fee will be charged to you.

Guarantees

Like most medical procedures it is not possible to guarantee success of oral appliance therapy for snoring and obstructive sleep apnea. Success depends on appliance choice, patient cooperation, adequate follow-up and factors beyond the patient's and dentist's control that cannot be determined at the time of initiating therapy. There can be no guarantee that oral appliance therapy will be efficacious in a particular individual over a period of time. In the event that oral appliance therapy does not adequately control your sleep apnea, or you choose to abandon the therapy you will be referred to your sleep physician for discussion of possible treatment alternatives.

Dental Sleep Medicine is not a recognized dental specialty. Dr. Farquhar is a Diplomate of the American Board of Dental Sleep Medicine and as such has demonstrated knowledge and clinical proficiency in this field of dentistry.

The treatment fee covers all care related directly to oral appliance therapy for one year. Recommended annual check-up visits are charged separately.

If you understand the explanation of the proposed treatment, have asked any questions you may have about this form of treatment, please sign and date this form below.

You will receive a copy.

Signed _____ Print Name _____

Date _____ Dentist _____