Sleepiness and driving

Holding a driver's license in New Zealand requires criteria to be met, including being medically fit to drive.

Some warning signs that you need to discuss with your Doctor are:-

- Difficulty focusing, slow blinking or heavy eyelids. Yawning repeatedly.
- Difficulty concentrating.
- Drifting in your lane, swerving, hitting markers or loose material on road.
- Missing exits or traffic signs. Inability to remember the last few kilometres driven.
- Falling asleep at traffic lights or having an accident which may be due to loss of attention or delayed reactions.

Your doctor may advise you not to drive until you have been investigated for a sleep disorder.

> The Bay of Plenty District Health Board has an active commitment to the Treaty of Waitangi and the improvement of Māori health.

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Our Values

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Your referral to the sleep service



What to expect ...

Why have you been referred?

Your GP has referred you to the service as you may have obstructive sleep apnoea (OSA).

Normally when you go to sleep the muscles in your throat relax but still hold your airway open. In your case the muscles in the throat may relax too much when you are asleep and block off your airway (this is called obstructive sleep apnoea or OSA).



When this happens you may stop breathing for a brief time until your body realizes it is not getting enough oxygen and your brain tells you to wake up and take a breath.

Although you may not be aware of it, you may be waking hundreds of times a night and therefore you are not getting a good sleep. This may result in day time tiredness and impact on your health and wellbeing. In severe cases OSA may also impact a person's ability to complete tasks which require concentration, such as driving a motor vehicle. Falling asleep at the wheel can be fatal for yourself as well as others.

How will you know you have OSA?

You will be assessed by a sleep physiologist who is trained in identifying risk of OSA. Following this assessment you may be sent home with equipment to measure how you are sleeping at home or it will be arranged for you to attend an overnight study in the sleep lab at Tauranga Hospital.

What is the treatment if you have OSA?



The usual treatment for OSA is to wear a night time positive pressure machine (CPAP) which provides a flow of air to keep your airway open. Many people find this treatment life changing in terms of reduction of tiredness and improved general health. When you attend clinic you will be given the opportunity to see and try the mask and machine.

Is there anything you can do?

There are some lifestyle things that you can try which may improve your sleep quality and reduce your tiredness while you wait to be assessed:

Weight management

Research has shown that OSA may be associated with being overweight. Some people find that even a small reduction in weight can reduce snoring and mild OSA.

Avoidance of evening alcohol and sedatives (sleeping tablets)

These are known to relax the muscles in your airway and worsen snoring, and can make mild OSA, that does not need treatment, into severe OSA.

Changing sleeping position

Sleeping supine (lying on your back) can make OSA worse. A change of position to sleeping on your side will reduce snoring and may control OSA. Taking simple measures such as sewing a tennis ball on the back of night wear has been proven to help this.

Managing nasal disease or symptoms

Having a blocked or congested nose will worsen snoring and OSA. This may be manage with nasal steroids, antihistamines or possibly surgery. Your GP will be able to advise you.

Smoking cessation

Smoking is known to be the leading cause of a number of diseases and will worsen snoring and OSA by aggravating the nasal passages. Giving up smoking will offer much more health benefits than helping reduce snoring and OSA alone.