

Science & Research
on Breathing

For Children

Sleep disorder breathing affects 12-15% of children, peaking between 3-5yrs

Lumeng & Chervin. Epidemiology of paediatric obstructive sleep apnea. 2008

Obstructive sleep apnea has become widely recognised as a frequent & common disorder with potentially serious clinical implications in childhood, with a prevalence of 1-5% in children.

Derdik et al. Sleep architecture in children with common phenotype of OSA. 2018

Of 578 children, only 157 (27.2%) has complete resolution of obstructive sleep apneas following adenotonsillectomy.

Bhattacharjee et al. Adenotonsillectomy outcomes in treatment of OSA in children. 2010

When teeth are absent or extracted early in life during growth, this can lead to bone retraction and affect the facial growth. Including extraction of wisdom teeth.

Guillemault et al. Paediatric sleep disorder breathing; new evidence on its development. 2015

For Children continued...

Treatment of paediatric obstructive sleep apnea (OSA) & sleep disordered breathing (SDB) means restoration of nasal breathing continually during wakefulness and sleep.

Guillemaut et al. Paediatric sleep disorder breathing; new evidence on its development. 2015

If nasal breathing is not restored, despite short term improvements after Adenotonsillectomy, continued use of oral breathing may be associated with abnormal impact on airway growth.

Guillemaut et al. Paediatric sleep disorder breathing; new evidence on its development. 2015

If the tongue is tied, the baby may not be able to express milk from the mother. Breast feeding causes manipulation of muscles necessary for craniofacial growth.

Guillemaut C. Bordeaux, France. 2016

Statistically, if a child snores by the age of 8 and is untreated, there is an 80% chance the child will have a permanent 20% reduction in mental capacity.

Catalano & Walker. Understanding nasal breathing. The key to evaluating and treating sleep disorder breathing in adults and children. 2018

For Children continued...

Parent report of special educational needs (SEN) at 8 years was available for 11,049 children with sleep disordered breathing.

Bonuck et al. Paediatric sleep disorders and special educational need at 8 years. 2012

Sleep disordered breathing, overall was associated with a near 40% increased odds of SEN

Bonuck et al. Paediatric sleep disorders and special educational need at 8 years. 2012

Mouth breathers show cognitive impairment as well as attention deficit hyperactive disorder (memory, concentration, attention, learning disability, low perception and sensorimotor integration). It has been shown children with excessive day time sleepiness have almost 10x risk of learning difficulties.

Bonuck et al. Paediatric sleep disorders and special educational need at 8 years. 2012