



Obesity, Sleep Apnea and Anesthesia

If you're overweight or obese, you likely already know that extra weight can affect your health. It also can make surgery more challenging, especially when it comes to the anesthesia used to control your pain. One of the biggest concerns is that being overweight makes you more likely to have a condition called obstructive sleep apnea, which causes you to temporarily stop breathing while you sleep. Sleep apnea can make anesthesia more risky. If you think you might have sleep apnea or are concerned about anesthesiology risks related to being overweight, talk to your physician anesthesiologist. He or she will work closely with your health care team to make sure you get safe and effective care before, during and after surgery.

How Can Being Overweight Cause Problems During Surgery?

Being overweight or obese can lead to a number of anesthesia-related challenges, including:

- Making it more difficult for physicians or nurses to find veins to deliver anesthesia and life-saving emergency medications.
- Making it harder to determine the right dose of medications.
- Adding to your recovery time because it takes longer for the effects of anesthesia to wear off.
- Increasing your risk of breathing problems caused by pain medications.
- Making it more difficult to place a breathing tube.
- Increasing the likelihood of having obstructive sleep apnea, which can make it more challenging to ensure you get enough oxygen and breathe properly before, during and after surgery.

What is Obstructive Sleep Apnea?

Obstructive sleep apnea means the soft tissue at the back of your throat collapses and closes while you sleep, causing you to stop breathing. Your body restarts your breathing by waking you up. This cycle can happen many times – possibly hundreds of times – a night. The condition is most common in men who are 40 or older and overweight. But anyone can have it – even children – regardless of age or weight. You might not even realize you have obstructive sleep apnea; about 18 million Americans have the condition, and nearly 90 percent don't know it. Signs that you may have obstructive sleep apnea include being tired during the day or told you make snorting noises during sleep.

Having sleep apnea can cause high blood pressure, heart disease, impotence and even behavior and thinking problems because you don't get enough sleep. The condition also makes anesthesia riskier because it slows down breathing and can make you more sensitive to its effects.

People with obstructive sleep apnea need to be monitored even more closely during and after surgery than those without it, because it can take awhile for the effects of anesthesia to wear off.

Reducing Anesthesia Risks

If you're overweight or obese, or have obstructive sleep apnea, the most important thing you can do to reduce risks from anesthesia is to talk to your physician or surgeon to be sure your anesthesia is led by a physician anesthesiologist who will manage your care before, during and after surgery. A physician anesthesiologist is a medical doctor who specializes in anesthesia, pain and critical care medicine and works with your other physicians to develop and administer your anesthesia care plan. With 12 to 14 years of education and 12,000 to 16,000 hours of clinical training, these highly trained medical specialists help ensure safe, high-quality care.

Physician anesthesiologists have the training and expertise to provide the best care to patients for whom surgery and anesthesia are riskier. Your physician anesthesiologist will work closely with you and your care team to ensure the best, safest care.

Signs you may have sleep apnea

Feeling tired – You wake up not feeling refreshed, or find you're frequently tired and dragging during the day.

Difficulty staying asleep – You stop breathing so your body wakes you up, repeatedly.

Snoring – You've been told you often snore or stop breathing during the night.

Moving a lot at night – Your arms and legs jerk while you're asleep, or you toss and turn a lot during the night.

Making snorting noises while you sleep – You make abrupt snorting noises during sleep because you've stopped breathing and are trying to catch your breath.

Before surgery – Your physician anesthesiologist will talk to you before surgery and ask detailed questions about your health and medications, as well as answer your questions about the surgery and anesthesia. If you know you have obstructive sleep apnea, be sure to tell the doctor. If you aren't aware of having sleep apnea but know that you snore, move a lot during sleep, wake up often during the night and are frequently tired, be sure to mention this. The physician anesthesiologist can take precautions to decrease potential problems, such as choosing certain anesthesia medications over others to reduce your risks.

During surgery – The physician anesthesiologist will lead the Anesthesia Care Team that manages your pain control and closely monitors your anesthesia and vital body functions during the procedure. Your physician anesthesiologist will manage any problems if they occur during surgery, such as a sleep apnea incident.

After surgery – Because sleep apnea can prolong the effects of anesthesia, it can decrease your ability to recover quickly, so your physician anesthesiologist will closely monitor your recovery and quickly address any concerns.

If your surgery isn't urgent, consider losing weight under a physician's supervision first, which will help make your surgery as safe as possible, decrease your chances of complications and help you get back on your feet faster.

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