

Sawbones 200: Snoring

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Intro (Clint McElroy): Sawbones is a show about medical history, and nothing the hosts say should be taken as medical advice or opinion. It's for fun. Can't you just have fun for an hour and not try to diagnose your mystery boil? We think you've earned it. Just sit back, relax and enjoy a moment of distraction from that weird growth. You're worth it.

[theme music plays]

Justin: Hello everybody, and welcome to Sawbones: a marital tour of misguided medicine. I'm your cohost, Justin McElroy.

Sydnee: And I'm Sydnee McElroy.

Justin: Hi Syd.

Sydnee: Hey, Justin.

Justin: Congratulations. [sings] Looks like we made it.

Sydnee: We did. Congratulations to you too.

Justin: This is episode 200 of Sawbones, the podcast.

Sydnee: That's right.

Justin: You wouldn't think— you know, your body doesn't even have 200 parts.

Sydnee: Well—

Justin: It's amazing that we managed to do 200 episodes.

Sydnee: No. I think it's really just a testament to how much ridiculous stuff we've done in medical history. Like, not us, not you and me personally. We didn't make this stuff up. But, as humans. You know?

Justin: I've made a few of them up over the years. Sort of seeded them on the internet. Get rich quick schemes, et cetera.

Sydnee: No, don't say that. [laughs] Oh, but not on our show. We seek to provide truth in the form of entertainment.

Justin: My only worry, Syd, is that this week's episode is gonna be... a bit of a snooze.

Sydnee: Is that how you're going with it?

Justin: That's what I'm doing for this one.

Sydnee: That's what you're doing?

Justin: That's my thing this week.

Sydnee: Okay. That's... okay. Well, I'll go with it. Justin's trying to hint to you that we're gonna talk about snoring this week.

Justin: I'm succeeding in hinting.

Sydnee: Yes.

Justin: I think.

Sydnee: That's true. Trying to cleverly hint, how about that?

Justin: Snoring. How did we decide on this one? We were talking about CPAP machines, right?

Sydnee: Yes.

Justin: Yeah, that's right.

Sydnee: And so, I also will talk about obstructive sleep apnea. What that is and kinda— because that is closely linked to snoring and there have been some creative ways of addressing both.

Justin: Cool.

Sydnee: And I think this is also appropriate to do for our 200th episode, because as I looked back, a lot of people have suggested this. Some of the people I'm

gonna thank have actually even suggested it more than once. They're just desperate to hear about it.

Justin: That's the Sawbones community. This is a collaborative effort between you and us, listener. Sawbones@maximumfun.org by the way, is the email address.

Sydnee: We don't say it enough.

Justin: We don't say it enough. Make sure you put, you know, 'topic suggestion,' and then whatever you wanna suggest in the subject line, and you could be like one of these people who is about to get thanked.

Sydnee: Thank you to James and Karina and Lynsey and Dora and Grace and Brad and Casey and Erica and Jennifer and Andy and Tamara and Michael for suggesting snoring, sleep apnea or some combination of the two.

Justin: Syd, they waited long enough.

Sydnee: So Justin, do you know what snoring is? [laughs]

Justin: Uh... gosh, I hate when we have to do this—

Sydnee: It's pretty straight forward.

Justin: Is it?

Sydnee: It really is. It's hard, I mean—

Justin: It's when you breathe in while you're sleeping and because your nose has too much snot in it, it makes a [snort] sound.

Sydnee: Well... okay. I mean, yes. That is an example of a reason why you snore. So you're not wrong. Generally speaking, snoring is—

Justin: Hear that, folks? I'm not wrong.

Sydnee: [laughs] —is a sound made while sleeping that would indicate there is some sort of resistance or turbulence in your upper airway. Which could be caused by snot. There are other reasons, you know, there are other things that could block the airways.

Justin: Your nose is too small. It's all goofy, gaga, weird up in there.

Sydnee: That's my problem.

Justin: Too small nose.

Sydnee: My nose is too small.

Justin: You offer some hot, fresh peanuts to Sydnee, you say, 'Sydnee get a snooof full of these,' and she says, 'I smell nothing'.

Sydnee: No, I smell things, but my nostrils are very small and they're hard to breathe through. If I try to breathe through my nose only, it's very difficult.

Justin: I like your small nose holes, Syd.

Sydnee: Thank you. [laughs] But I'm explaining to you why I do occasionally snore, I know.

Justin: Oh, yeah.

Sydnee: Thanks honey.

Justin: Little bit more than occasionally.

Sydnee: Okay, you do sometimes, too.

Justin: It's because I stay up too late reading those Poirot novels and you always fall asleep before me.

Sydnee: [laughs] Almost half of people snore. About 45% of people snore sometimes. Not all the time, but about 45% of people at some point or other snore.

Justin: And have you ever noticed that even though the numbers are pretty much in favor of a lot of people snoring— okay, you said sometimes. Who does all the time?

Sydnee: 25% snore all the time.

Justin: Have you ever noticed that some people get a rep for, like— it's not just like snoring or not snoring, it's not binary. Some people get a rep for, like, devastating snoring.

Sydnee: Yes. Well, usually, and we'll kind of get into this, people who have devastating snoring, there could be another problem going on. There could be other issues.

Justin: Mm-hmm.

Sydnee: Most people who snore aren't, like, devastating snorers. But I've known some.

Justin: When I was working at Joystiq, I roomed with a guy who snored so bad that while he was mid-snooze I turned on the loudest alarm that my phone had until I saw he was sufficiently woken up, and then quickly fell asleep while he was trying to get back to sleep. Like, I had to create sleep windows for myself.

Sydnee: The self-defense, to fall asleep.

Justin: Yeah.

Sydnee: So, risk factors for snoring: We tend to be at higher risk for snoring as we get older, because the muscles that kinda support our airway will get weaker over time and allow them to kind of collapse on themselves, which creates some resistance and then noise.

Justin: One day we'll find something that gets better as you get older, but we just haven't cracked it yet.

Sydnee: Uh, wine?

Justin: [laughs] Fine. Sure. I do know there's a lot of old people who seem to like wine, sure.

Sydnee: Cheese? [laughs] Obesity is a risk factor because some of the adipose tissue, or like, fatty tissue, can deposit around your airways, again making it heavier and harder to support. Things like sleeping position. You're more likely to snore if you sleep on your back. That doesn't mean everybody who sleeps on their back snores, but it's more likely to snore.

And in many cases, some of these things that I mentioned are also risk factors for obstructive sleep apnea, which does cause severe snoring. What that basically means is that you have so much resistance to airflow, your airways are collapsing at night to such an extent that you're actually not getting oxygen properly through the night. So you're either having episodes like apneic episodes where you stop breathing,

Justin: Not great.

Sydnee: Or you're having episodes of hypoxia, low oxygen. Where you didn't completely stop breathing, but your oxygen dropped really low because you couldn't get a lot through your collapsed airway. That's not good either. And it leads to you being incredibly sleepy all day long.

Justin: Because you couldn't get that good oxygen that your body craves.

Sydnee: Well, every time your brain isn't getting enough oxygen it wakes you up a little bit, so that you'll breathe and get oxygen. But every time you wake up a little bit, you'll disturb your sleep cycles and you never really get that—

Justin: Can't get that good REM.

Sydnee: Exactly, you never get good REM and you never get good deep, stage four sleep. So as a result, it's basically like you're sleep deprived, even if you felt like you were asleep for a long time.

Justin: And it steals your dreams.

Sydnee: And that— well, yeah, it does.

Justin: Think about that.

Sydnee: All your dreams.

Justin: All you dreams.

Sydnee: And you would know if somebody had sleep apnea. If you've ever heard anybody not just snore but kinda do that choky, gaspy, scary sound in the middle of the night, that person probably needs checked out for sleep apnea.

Justin: Hmm.

Sydnee: Um, did you know some animals snore?

Justin: Really?

Sydnee: Dogs can snore, lions can snore.

Justin: Our cat wheezes when she sleeps.

Sydnee: Yeah.

Justin: Not really snoring.

Sydnee: I think our cat has obstructive sleep apnea though.

Justin: Yeah.

Sydnee: I worry about that with her.

Justin: She does seem a little tired.

Sydnee: Yes. [laughs] But she's also a cat, so. Snoring has been documented since ancient times. A lot of—

Justin: I really hope so. I mean, that would be weird if they were like, "A few hundred years ago, people started snoring".

Sydnee: "We discovered snoring".

Justin: "What?"

Sydnee: No, and a lot of what is written, when you start to read papers about snoring, a lot of it is citing, like, great works of literature or epic poems and things like that. Where it's like, we mention so-and-so was also a terrible snorer. The Greeks and the Romans actually, they associated it with a couple different things. One, it was just a good proof that somebody was sleeping.

Justin: [laughs]

Sydnee: You know they're sleeping, they're snoring. Although they knew that not everybody who sleeps snores, and then they even suggested that sometimes people did it deliberately. [laughs]

Justin: Sure.

Sydnee: Just to be really rude.

Justin: To show off how good they were sleeping.

Sydnee: “I’m such a good sleeper, watch me snore”. But it was generally associated with, kind of like, uncouth behavior.

Justin: It does seem to be. It’s used a lot, I feel like, in media to represent somebody’s who’s, like, slovenly, you know?

Sydnee: That association is ancient. I mean, it’s not true. It’s just something that has stuck around for a really long time. Some of the things were grounded in some actual fact. So, it was thought that if somebody snored, it was a sign that maybe they ate too much. Especially right before they went to bed, so like, a big dinner or something. They kinda were gorging themselves. Or that they drank too much alcohol. Somebody who was drunk. These actually are risk factors for snoring.

So, while they certainly have nothing to do with being slovenly or uncouth if you snore, eating and drinking too much could make you snore. It was also, though, seen— because, I think, of these kind of behaviors of eating too much, drinking too much— it was seen as, like, a sign of amorality, or depravity. You would use that to describe somebody, like a snorer, as like, “and, they snore”.

Justin: “And also, yuck”.

Sydnee: Right. Which, obviously, is not true.

Justin: It is annoying though, and I think people do project— I can understand why you would project intentionality, intent, I guess, onto snorers. If you are somebody who’s being kept awake by a snorer, it can feel very personal.

Sydnee: Yeah. I think that’s true. I think that’s true. I remember many, many nights, my dad from downstairs waking me up with his snoring. And feeling like, “Dad!”

Justin: Your reaction is always like, “How could you? How could you do this?”

Sydnee: [laughs] They also noted some more true factors, like laying on your back is a risk factor for snoring. If your neck was thicker. They would talk about people with thicker necks. And that is true. But then they also described that you could sometimes see snoring, so who knows what they were talking about.

Justin: Well, it Japanese cartoons, yes.

Sydnee: The little, like, bubbles?

Justin: Yeah. Did you know those are snot bubbles?

Sydnee: Ew.

Justin: That's what they are. Doesn't that make them a lot less cute?

Sydnee: Yeah. I prefer the giant drop of sweat.

Justin: Yeah.

Sydnee: Yeah. That indicates stress, or anxiety, or nervousness. Yeah. I really wanted Pliny the Elder to give me a lot of good suggestions about snoring. He didn't.

Justin: Aww.

Sydnee: The only association I could find with Pliny and snoring is that it was actually recorded by his nephew, Pliny the Younger, that when Mt Vesuvius was erupting, the night before he actually— you know, because he went on a rescue mission, we've talked about this before, he went on a rescue mission to save people in Pompeii— and the night before he died of inhaling noxious gases, he slept and they went to wake him suddenly and they knew he was in a deep sleep because he was snoring loudly. They woke him up and told him, "Hey, the volcano's— it's getting bad out here, buddy".

Justin: "Come on, time to go".

Sydnee: And I bring up Pliny in part because why not, we love Pliny here, but also because I thought, a little news break. Special Sawbones news break.

Justin: [sings breaking news tune]

Sydnee: As many of you have been so kind as to tweet at us, or post on our Facebook page, they may have found Pliny's remains.

Justin: Ooh.

Sydnee: Now, it actually, as I was reading about it, they actually were possibly found back in the early 20th century by Gennaro Matrone, and he discovered these remains in the location that fit Pliny the Younger's description of where Pliny the Elder would have died, and based on the fact that he had this ornately decorated sword and all this jewelry on, he theorized this must have been someone of a higher class, so this could very well be Pliny. And at the time, other archaeologists were like, "Pliny would not wear all that jewelry. You don't know Pliny like we know Pliny. He would not wear all those bangles, that's not Pliny". Well, Matrone kinda said, "Well, forget you guys, then". He sold all the jewels.

Justin: [laughs]

Sydnee: Because back then, the rules were a little looser on what you could with that stuff.

Justin: Right.

Sydnee: So he sold all the jewels, he tossed some of the bones back in the ground.

Justin: Cool.

Sydnee: He sent the skull to a tiny museum and said, "Here, you keep the skull".

Justin: "Hey, see if you can find room for this in your tiny museum".

Sydnee: "I'm done with you people, whatever".

Justin: "Your comically small museum".

Sydnee: Well, now we know that someone of Pliny's rank, he was from the equestrian class, probably would have worn all that fancy stuff. And we have the tools now to try and maybe pinpoint exactly when this skull came from, what exact period. And by examining the teeth, we can tell what kinds of foods they ate, and things.

Justin: Fascinating.

Sydnee: And this might pinpoint the place they lived, and if it's the same as Pliny's we could reasonably deduce that this may well be Pliny the Elder. So anyway, this might be his skull, there's a crowdfunding effort, I think they need

like 10,000€ or something, to try to raise the money to do the science to figure this out.

Justin: Oh, man. I hope they can do it.

Sydnee: I know. I hope they can too, I don't know— just so we know. It's Pliny the Elder!

Justin: Yeah, it'd be good.

Sydnee: It might be his head.

Justin: I mean, I'm pretty sure he's not alive.

Sydnee: No, I mean, it's his skull. There's no doubt. This is not to figure out could he still be alive.

Justin: But could we Jurassic World him?

Sydnee: Well.

Justin: If we needed someone to be wrong about modern day things.

Sydnee: Did we find any mosquitoes nearby, trapped in amber, that may have—

Justin: [laughs]

Sydnee: Anyway, so there you go. There's your update on Pliny the Elder. Everybody was dying to know the latest news on Pliny the Elder.

Justin: Still dead.

Sydnee: The Egyptians had a unique solution for snoring. They had these very uncomfortable looking wooden pillows.

Justin: What? No you can't. I love you, sweetie, you can't have wooden pillows. That can't be a thing.

Sydnee: Well, they kind of look like— they're like head stands. They're like human head stands.

Justin: Literally.

Sydnee: It's like a wooden stand with, like, a curved part that you lay your head on. And it could be, like, very ornate. You could decorate it. And then you just sleep on that, and it raises your head up really high, which would make it harder to snore because of the position, you're elevating your head quite a bit.

Justin: Okay.

Sydnee: Which, elevating you head, like sleeping on several pillows or a wedged pillow or something like that, could help with snoring.

Justin: Yeah, I guess.

Sydnee: I don't know. It seems incredibly uncomfortable.

Justin: Yeah, it seems like a wild leap to make, from like... more pillows to wood. [laughs] But I guess they didn't have a lot of pillows back then.

Sydnee: I don't know.

Justin: That was before pillows were invented, and feathers and stuff.

Sydnee: It seemed very stately, maybe.

Justin: Yeah, maybe.

Sydnee: Shakespeare described what seems to be an early account of sleep apnea in Falstaff, in Henry IV.

Justin: Oh.

Sydnee: He talks about him snoring loudly and needing to catch his breath while asleep.

Justin: Huh.

Sydnee: So that's probably an early description.

Justin: So Shakespeare invented sleep apnea. Wow.

Sydnee: Well.

Justin: Thanks everybody for listening to Sawbones. [laughs]

Sydnee: [laughs] No, Shakespeare didn't invent it. It just happened.

Justin: Okay. He invented lots of words though, like sleep apnea.

Sydnee: No, he didn't. No. He did not invent sleep apnea.

Justin: Okay.

Sydnee: Please stop misinforming the public.

Justin: [laughs]

Sydnee: Dickens wrote also about what we kinda think of as sleep apnea today in *The Posthumous Papers of the Pickwick Club*. He wrote about Joe, who snored very loudly and was obese and was tired all the time. And so this was probably a description of somebody who had sleep apnea. The reason I mention this is simply because it led to a term that I still sometimes hear used today, which is "pickwickian".

Justin: "Pickwickian", okay.

Sydnee: To describe patients with this constellation of symptoms. They could be pickwickian, meaning that they have sleep apnea, perhaps it has to do with something we call Obesity Hyperventilatory Syndrome, where it has to do with the weight of the tissues of the neck compressing the airways. So anyway, that's a term that was first used in describing some of the original cases in medical literature of sleep apnea. Like, actual medical cases back in the late 1800s. And like I said, it persists. I still hear physicians refer to patients as pickwickian to this day.

Justin: Now Syd, we've talked a lot about snoring and what it actually is, but we have not given any solution. Like, I wanna fix it. Let's fix it in the modern era.

Sydnee: Well Justin, we're gonna fix it.

Justin: Okay, good.

Sydnee: But first we're gonna head to the billing department.

Justin: Let's go.

[ad break]

Justin: Sydnee, let's fix yawning.

Sydnee: So, in, as I mentioned, the late 1800s we get some of the first—

Justin: I said yawning.

Sydnee: Right.

Justin: I meant snoring.

Sydnee: Yeah.

Justin: That was a test, and you failed, Doc.

Sydnee: [laughs] I did fail.

Justin: Doctor Sydnee McElroy doesn't know the difference between yawning and snoring.

Sydnee: No, I've just learned—

Justin: Would you trust her with your medical care?

Sydnee: I've just learned when I need to listen to you and when I don't.

Justin: Okay, well that was a time you should have listened, Syd.

Sydnee: [laughs] As I mentioned, in the late 1800s we had some actual medical case descriptions of what we would now call sleep apnea, what was then called more like Pickwick Syndrome. In the early 1900s, we didn't really know much of what to do about it yet, other than some of the things that the ancient Greeks and Romans and everybody were telling us to do. Which was like, don't eat too much, don't get drunk, try to sleep on your side.

Justin: Spay and neuter your pets.

Sydnee: Yeah. No, they didn't really tell us that.

Justin: No, not that one. They only had like, eight dogs back then, so it wasn't a big problem. [laughs] "Make as many as you can. We all want dogs".

Sydnee: [laughs] "Please, why can't there be more dogs?"

Justin: “Please! Put on some sexy music for your dogs, please. So we can all have dogs, instead of just Jerry”.

Sydnee: And it’s really interesting, as a side note, you don’t get a ton of treatments for snoring up until, like, this point in history. And sleep apnea too. And a lot of it has to do with, like, as you read, people didn’t live on such rigid schedules. So like, if you weren’t getting enough slept you just slept more. Or like, they would keep really weird sleep schedules. So they would wake up after four hours of sleep and go do something, and then sleep some more after that, because, you know, people weren’t running the nine to five.

Justin: I know they all died at, like, 27 years old or something, but like, that does sound pretty good.

Sydnee: Now see, again, the life span was skewed by an increase in mortality under the age of two. So there were people who lived a long time.

Justin: Cheery thoughts with Sydnee McElroy.

Sydnee: No, I’m just saying it’s not that— not everybody died in their 20s.

Justin: Fair, okay.

Sydnee: The point is, our schedule in the modern era necessitated that we sleep at night and stay awake all day. And so, as the industrial age comes upon us, we see more and more weird devices to help you get sleep, and lots of solutions for various sleeps problems. You know, whether it be insomnia, or grinding your teeth, or snoring.

Justin: It’s interesting that some people just sort of default to certain times that they— some people just seem to be people who like to go to sleep later, or like to wake up, like they’re put together that way.

Sydnee: It has to do with their circadian rhythms and probably the release of melatonin and whatnot. So anyway, in the early 1900s we made a bunch of weird devices to try to help with snoring. So you see, like, some of these really look like medieval torture devices. Where like, your arms and chest are strapped really tightly to you and then you can’t breathe very deeply. And that was thought to help with snoring.

Justin: Huh.

Sydnee: And sometimes there would be, like, a ball attached to the back of it so that if you tried to roll over on your back it would hurt a lot. There's another one that has, like, a dial right in the middle of your back, so again it's sorta like a shoulder harness with this big metal dial in the middle.

Justin: Like, "We've heard you've been sleeping bad, so we decided to make it as bad as humanly possible"?

Sydnee: Well, because they knew you were likely to snore more if you laid on your back, it was like here are things that will make it very uncomfortable if you lay on your back. Some of these attached to you with like— there was one that would hold your mouth and lips open, sorta like if you go to the dentist and you gotta get those things, the retractors. Something like that, that would hold it all open, and then it was attached to a string that you tied around your neck to keep it in place.

Justin: [cringes] Choking hazard to the max, right?

Sydnee: Yeah, I mean there was another one that was sorta like a wide, flat kazoo that you would just keep in your mouth and you had to breathe through. And then they noted that if you flipped it around the other way, it would make a lot of noise, I don't know what the purpose of that was.

Justin: Just fun for the kids.

Sydnee: Anyway, you can look up early 1900s anti-snoring devices, and they're horrifying and I don't know who came up with any of them and I don't know why.

Justin: Just one guy.

Sydnee: But really, they look like torture devices. It's funny, because we obviously had this interest in this stuff, but it really wasn't until the 1960s that anybody started actually studying it.

Justin: To do real science.

Sydnee: Yes, to do real science on it. So, that's when people started to try to define what is— specifically, when does snoring— when is it indicative of something maybe worse, like sleep apnea.

Justin: It seems a little odd, but like, we don't want to give them too much crap, because in the medical disorder power rankings there are probably a few things

we needed to bang out before we got around to snoring. Like, "Hey, I hate snoring." "Yeah, I have Polio. Can we focus on that, please?"

Sydnee: That's fair, and it is good to make a distinction. Like, yes, I don't think that just snoring necessarily needed to be high on the list.

Justin: Fair.

Sydnee: Now, sleep apnea is a whole other matter. And so we actually started studying it in the 1960s and the initial studies that they did to try to figure out how often are we missing this concluded that it was incredibly rare. They did a study in the US and found no one in their study group that had it. Like, not one. The UK study they did, which included over 1000 men found, like, three cases.

Justin: Weird.

Sydnee: And the authors actually said in one of their papers, we actually think it does not exist in Scotland at all.

Justin: What?

Sydnee: Right. So, I don't know if it was our diagnostic test. That was probably part of it. Part of it was our criteria for who had sleep apnea, who doesn't. Our understanding of what the disorder was. But as time went on, we developed better tests, how do we figure out if somebody has sleep apnea and all that kind of thing, and now we know that it is actually fairly common.

Justin: Huh.

Sydnee: Yeah. So, sleep apnea is not a new thing, we just didn't diagnose it for a really long time.

Justin: Yeah, I feel like a lot of people I know have the masks. I think both our dads.

Sydnee: Yes. So it's way more common than we ever thought, and that's one of the big things about sleep apnea, is it probably has been under-diagnosed for a long time. I think currently, physicians are way more aware of it, and more likely to ask about it, and I think patients are more likely to come in and ask about it, too. So we hear about it more. In addition to some of the things I mentioned for sleep apnea, just so you know, some of the other risk factors. We talked about

age, we talked about obesity. Just your craniofacial structure. Just the structure of your head and neck could put you at higher risk.

Justin: Like, big, like you have a big head?

Sydnee: Bigger, or thicker, or like a small area in the back of your throat. Just a smaller area back there, you know, could put you at higher risk. Smoking, alcohol consumption, sleeping on your back, family history seems to be a risk. And the reason I'm talking about this is, again, this isn't just snoring. When we're talking about sleep apnea, it's not just quality of life. People with sleep apnea that are untreated are tired. Tired like you're not just like, "Oh, I'm kinda tired," I mean, they are tired all the time. And they also are at higher risk for things like high blood pressure, heart disease, strokes, maybe even dementia, complications with operations if they need anesthesia, and they have car accidents because they can't stay awake while they're driving.

Justin: Right.

Sydnee: Nowadays we mainly treat sleep apnea with something called a CPAP that you have already alluded to. The mask.

Justin: Yeah, it's like a machine that blows air into your mouth, right?

Sydnee: That's good, yes. Continuous Positive Airway Pressure. CPAP. Positive pressure blown into your airway to, I mean, you get oxygen that way, but the most important thing is it holds your airway open. They also recommend if you are diagnosed with it that losing weight sometimes can help, decreasing alcohol intake, maybe cutting back on smoking, sleeping on your side, as I said, elevating the head of your bed. There are surgeries, but they're not always helpful. It really depends on exactly what the cause is. Like, sometimes if your tonsils are super large and they're blocking your airway, removing them.

Justin: Like, comically large.

Sydnee: Yeah, well, sometimes. Sometimes removing them could fix it, but not always. So it's not usually a first-line treatment. It's usually the mask. With snoring though, with snoring, so many options. This is a whole other world. So, some of these things you've probably heard of and tried before. Like Breathe Right strips.

Justin: Sure, yeah.

Sydnee: Have you ever used them for snoring?

Justin: Absolutely.

Sydnee: If your snoring is related to nasal congestion, like you got, like you said, snot or something blocking your airway, maybe they would help some.

Justin: Okay...

Sydnee: That's about it. If your snoring has anything to do with the back of your throat, it's not going to do anything. It just works on your nose. So if you're snoring because your allergies are really bad, maybe.

Justin: Okay, good to know.

Sydnee: But you know, the thing they help with most is the subjective sensation of nasal congestion. They make you feel less stuffy.

Justin: Yeah, sure.

Sydnee: But they're safe, so you can try them.

Justin: Yeah, give it a whirl.

Sydnee: There are mouth guards that can be effective for some people. A lot of these you actually have to be fitted for by a dentist. There are ones you can buy over the counter, but if you wanna make sure—

Justin: Not gonna get a good fit up there.

Sydnee: Yeah. If you wanna make sure it's the right thing— and they kinda move your jaw forward to open up the back of your airway more. That's how they work. And then there are all kinds of odd suggestions on the internet. Everything, like herbal things, like peppermint oil or spearmint or vitamin C or eucalyptus, humidifiers, olive oil, I saw somebody say chew raw garlic every night before you go to bed.

Justin: Charming, I'm sure.

Sydnee: Your partner will love that.

Justin: Yeah.

Sydnee: Neti pots have been suggested for this, ginger, I saw a lot of suggestions that you sew a tennis ball to the back of your shirt. Like, same idea, keep you from rolling on your back. This sounds like a wild suggestion, but I once worked with a sleep specialist, a physician who specialized in sleep medicine who would give his patients t-shirts with tennis balls sewn on the back of them.

Justin: That's confusing though, because if people see you in public with that, they're just going to assume you loooooove tennis.

Sydnee: [laughs] It's a cool new look.

Justin: Yeah.

Sydnee: There are things like nasal sprays that almost certainly don't work for the most part. Oral dissolving strips, they usually are herbal. I have no idea why these would work.

Justin: You saw somebody you were getting mad about last night.

Sydnee: I am. I'm getting to that. There are also things like rings that you stick up your nostrils, that hold your nose open.

Justin: Yeah, I had one of those.

Sydnee: Right, and again if it has to do with a stuffy nose, that might help some, but if it has anything to do with anything else it's not going to.

Justin: Now, the one I had does not hold my nostrils open, it pinched my septum.

Sydnee: Yes.

Justin: Not my septum, my... what's that thing called?

Sydnee: Your septum.

Justin: This is my septum?

Sydnee: Yeah.

Justin: This?

Sydnee: Yes.

Justin: That's my septum.

Sydnee: Yes.

Justin: You can't see this, listener, I'm sorry. I'm pinching—

Sydnee: It is. The middle of your nose.

Justin: Okay. But not the middle of my nose, that's not concrete enough.

Sydnee: The thing in the middle.

Justin: The bottom, like, the holes. Like the bull.

Sydnee: The thing in the middle, the thing that separates your two nostrils is the septum.

Justin: Right, I know what you're saying.

Sydnee: Yeah.

Justin: The lower septum, I mean. Not the upper bridge of your nose where the Opti-Grab goes. I mean, like...

Sydnee: [laughs] A couple things made me mad.

Justin: [laughs]

Sydnee: I'll start with the one that made me really mad and I'll go to the one that I think is funnier. So, there's one product I found called Nature's Right Sleep Apnea Relief Tablets. This is an herbal tablet that is supposed to work by "improving the signaling between your brain and your diaphragm", which is a big muscle that is involved in many things, including helping you breathe. And the idea is that it will regulate the amount of oxygen in your blood better.

It's made of several things, they're all herbal things. Lobelia, which, and these are quotes, "boosts respiratory wellness", thyme, which "enhances pleural activity and promotes respiratory health", and chamomile and cramp bark, which "helps the musculoskeletal system to promote relaxation". It's a tablet and it tells you it will cure your sleep apnea for the low, low price of \$45.99 for a month's supply.

Which is more than most people pay for prescription meds, if they have insurance.

Justin: Yeah.

Sydnee: That's ridiculous. That will not work. It does not make any scientific sense. I don't know what "boost respiratory wellness, promotes respiratory health, enhances pleural activity", I don't know what any of those things are supposed to mean. And also, if you are advising people to go treat their sleep apnea with tablets instead of actual mechanisms that address the root cause of sleep apnea, you could be killing them. So please don't take these tablets.

Justin: And this is on— like, I think sometimes we talk about this stuff and it sounds like fringe medicine. It's on Amazon. Like, just there for sale. You can just buy it on Amazon.

Sydnee: Yeah. And they are urging people— they are showing pictures of people wearing CPAPs and saying you don't want this to be you anymore. So they're urging you not to go with the gold standard, recommend medical treatment, but to go take this herbal tablet. This is unacceptable. If you wanna take one of these herbal tablets before you strap on your CPAP and go to bed... okay.

Justin: "Eliminate," this is what the listing on Amazon, a real retailer, says. "Eliminates dependence on CPAP". "Eliminates" it.

Sydnee: It doesn't. I'm telling you it doesn't. I've never used it, it doesn't.

Justin: Our policing of non-drug supplements in this country is an absolute disgrace and a nightmare. It's genuinely terrifying. Don't take anything, just don't take anything. Don't take anything.

Sydnee: This is very dangerous, because sleep apnea doesn't have to be dangerous if it's treated appropriately, and I tell that to patients all the time. It sounds really scary when I tell them all the things that could happen, but if you get diagnosed with a sleep study, and you are treated appropriately, you can have quality of life back.

Ask my dad, he's like a sleep apnea CPAP machine evangelist. He will tell you that he got his CPAP, he felt better than he had in decades, he lost 40 pounds and started playing basketball again and enjoyed life once more. And he sleeps with it

every single night and he is so thankful for it. So, my point is don't take these stupid sleep apnea relief tablets. Go get treated for your sleep apnea.

This is funnier. The Orbit Bio Anti Snore Pendant.

Justin: Okay?

Sydnee: This has nothing to do with sleep apnea, this is just for snoring. It's a stainless steel pendant, it's just like a little ring, like a little steel donut on a cord, and you wear it around your neck at night while you sleep, and it's supposed to stop you from snoring by improving the flow of energy in your body.

Here's their explanation of how this works. "Specialists have developed and patented a technology of applying a range of healthy energy vibrations, frequencies of light, oxygen, negative ions, earth, into the anti snore pendant and as human body harmonizes with the above mentioned vibrations, anti snore pendant is able to stabilize and relax the respiratory system, relieve stress, calm the nervous system, strengthen the immune system," blah blah blah. And of course, "promote deep, sound sleep without snoring".

You wear it, it'll work in two to four weeks. It's good for all genders, they want you to know. So don't feel like it's just for you dudes.

Justin: It's for everybody.

Sydnee: It's for everybody. It's only \$89.95, low, low price, and also can relieve any pain you're having. [laughs] As a side note.

Justin: Oh really? Cool!

Sydnee: Any pain you're having.

Justin: Well that's excellent.

Sydnee: Just wear this. It works better, it noted, if you put it on the area of pain.

Justin: [laughs] The pendant?

Sydnee: The pendant that makes you stop snoring. That also will relieve your pain.

Justin: I need that up here, where the snoring is happening! I can't put it on my knees!

Sydnee: Well, I guess once it fixes your snoring then you can put it on your knee.

Justin: And if you see the snoring getting bad, move it back up.

Sydnee: Right, they want you to get your money's worth. You've paid \$90 for this worthless pendant.

Justin: Right. Don't sell it to your friend for \$80.

Sydnee: [laughs] And it fixed your snoring in two to four weeks, you gotta find something else to do with it.

Justin: Sure, it's not just gonna be kicking around your house. You wanna dunk on anybody else before we end the show?

Sydnee: No, I think that was my—

Justin: Let me ask you this, super quick. If I think I might have sleep apnea, what should make me suspect, hey I should go talk to a doctor about this?

Sydnee: So, some of the things that I've mentioned, and here's what I would focus on: First of all, as you mentioned, if you're not just a snorer, but like, a really righteous snorer, that would be something to talk to your doctor about. Sure, some people just are snorers, and if you feel great all the time and your sleep is excellent and you just happen to snore, whatever. But if you're a really bad snorer, especially if it's to the point where it's disturbing other people maybe around you, or disturbing your own sleep, or if you are told, "Hey, you know what, sometimes you stop breathing at night, I hear you gasp and choke." If you have ever noticed that, if you wake up in the middle of the night gasping and are choking like you stopped breathing, or again, if somebody in your house or your partner has said, "you scare me, you sound like you stop breathing at night," those would be big red flags.

If you are excessively sleepy all day. Again, I don't just mean, like, "man it's been a long day, I'm kinda worn out". I mean like, every time you sit down, you fall asleep. People with sleep apnea generally tell me that they are asleep when their head hits the pillow, they're falling asleep in movie theatres, they're falling

asleep when they watch TV, they fall asleep in conversation. Worst case scenario, they fall asleep at red lights when they're driving. So, those would be big risk factors that I would talk to your doctor about, and they can check you out for this. Because again, this is treatable. This is totally treatable. Just not with, you know—

Justin: Pills and pendants.

Sydnee: Not with pills and pendants.

Justin: Folks, that's gonna do it for us this week. We hope you have enjoyed yourself. We certainly appreciate you listening. We wanna say a big thank you to The Taxpayers for letting us use their song "Medicines" as the intro and outro of our program, and I wanna say a big thanks to you for listening. If you wouldn't mind going to iTunes and leaving us a review there and subscribing to the show, that really does help out. So if you go review Sawbones and say like, "Hey," ... whatever, just whatever nice thing you wanna say about us.

Sydnee: "Hey."

Justin: I'll take anything. We're not picky. And that's gonna do it for us this week, Sydnee. So, my name is Justin McElroy.

Sydnee: I'm Sydnee McElroy.

Justin: And as always, don't drill a hole in your head.

[theme music plays]

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