

## 6 ways to avoid snoring

- 1** Keep your internal throat tissues "slim" by keeping your weight down.
- 2** Avoid alcohol, and sedative medication, such as sleeping tablets, which can overly relax your throat muscles.
- 3** Reduce airway congestion by using decongestants when you have a cold, with antihistamines or a steroid nasal spray if you're allergic, and by not smoking.
- 4** Sleep on your side, not your back; an extra pillow, or a pillow at your back, may make this easier.
- 5** Hormone replacement therapy is believed to help some women who snore.
- 6** Check out various devices designed to stop snoring — call the British Snoring & Sleep Apnoea Association on 01737 245638, or visit [www.britishtsnoring.co.uk](http://www.britishtsnoring.co.uk)

machinery or driving (OSA must be reported to the DVLA) and also puts you at risk of high blood pressure and cardiovascular disease.

### When to see your doctor

If you suffer from severe tiredness, your doctor can test your Epworth score and also rule out other causes of fatigue. She can examine your nose, mouth or throat, and measure your neck (OSA is more common in people whose neck measures more than 16.5in). Treatment for an allergy and other simple advice (above) may help you to stop snoring. If not, she may refer you to an ear, nose and throat (ENT) specialist who can examine the back of your nose and throat with a flexible telescope (nasendoscopy) to see whether surgery might help (for example, removing polyps).

### Treating OSA

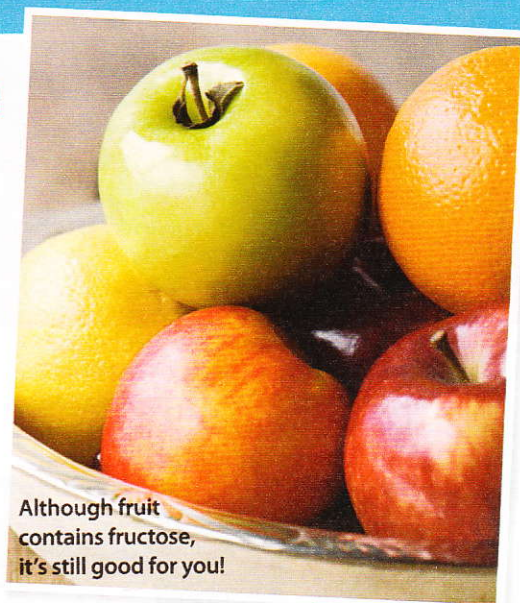
If the ENT specialist thinks you may have OSA, you'll be referred for "sleep studies". These involve a night in hospital, being filmed while you sleep wired up to machines that monitor your breathing, heart rate and blood pressure. If these show that you wake up repeatedly after stopping breathing, you'll be given a CPAP (continuous positive airway pressure) machine to use at home. You'll need to wear a mask during sleep, which pushes air into your lungs. It sounds uncomfortable, but OSA sufferers are usually delighted because they wake feeling refreshed instead of exhausted — and can legally drive again.

## This week I've been asked...

**Q** Is fructose (the sugar found in fruit) healthier than ordinary sugar?

**A** Fructose is a form of sugar (as are glucose, sucrose and dextrose), and we all need sugar in our diet. It provides energy that makes our bodies work, and our insulin hormone means we can store it for later, ready for immediate use. If we eat too much sugar, we put on weight, build up damaging fat layers around our hearts, livers and other body organs, and may develop diabetes.

Worryingly, American researchers now think that the way fructose reacts with the body's insulin may make it more likely than other sugars to trigger diabetes or heart disease. Fructose is also a major ingredient of corn and glucose-fructose syrups, which are relatively cheap, and are often added to cakes, biscuits, pastries and soft drinks to make them sweeter or add texture. So it's important to read the label, and avoid foods



Although fruit contains fructose, it's still good for you!

with high levels of added sugar.

Although many fruits naturally contain fructose, we should definitely continue to eat fruit every day, as it contains lots of other protective vitamins, minerals and antioxidants, and cut down on other sugary foods instead. By the way, processing fruit releases its sugar, so protect teeth by drinking juice or smoothies only at mealtimes, and brush teeth regularly.

**Q** My sister has just been diagnosed with Hughes Syndrome — should I be tested?

**A** Hughes Syndrome is also known as "sticky blood" or antiphospholipid syndrome (APS). It's an autoimmune disease, meaning the immune system produces antibodies that attack the body's own tissues.

APS can have a wide variety of symptoms, including fatigue, headaches and migraine, memory loss and other neurological symptoms, recurrent miscarriage, leg ulcers, blood clots, liver, kidney and lung damage. It may also be responsible for one in five strokes and heart attacks in people under 45

years of age, although other factors, such as smoking, may help to trigger these.

Around one in 100 of us have APS — which is sometimes linked to other autoimmune conditions such as thyroid disease — and women are affected twice as often as men. It can be diagnosed from blood tests that detect abnormal antibodies, including lupus anticoagulant and anticardiolipin, and can be treated with anticoagulants to "thin" the blood and prevent complications.

APS can run in families, so you definitely need to speak to your GP about this. Find out more from the Hughes Syndrome Foundation — call 020 7188 8217, or visit [www.hughes-syndrome.org](http://www.hughes-syndrome.org)

## Advice on the telephone — can we help?

Our phone lines give you access to professionals who can give you personal advice.

**Dr Melanie Wynne-Jones helplines** (last approx. four minutes)

Stress.....0904 470 0681  
 Migraine.....0904 470 0682  
 IBS.....0904 470 0683  
 Varicose Veins.....0904 470 0684  
 Heartburn.....0904 470 0685  
 Heavy Periods.....0904 470 0686

**Jan de Vries alternative health lines** (last approx. three minutes)

Flus and Colds.....0904 470 0816  
 Detoxification.....0904 470 0817  
 Tiredness.....0904 470 0818  
 Allergies.....0904 470 0819  
 Viral Conditions.....0904 470 0820  
 Memory Problems.....0904 470 0821

BT calls cost 65p per minute. Cost from other networks may be higher. Service provider: Eckoh 0870 880 4869.