

SNORING in children

Many children snore. In fact, it is estimated that between 3% and 12% of preschool age children snore. The majority of these children are well, without other symptoms, and have **primary snoring**.

Other children that snore, about 2%, have obstructive sleep apnoea (OSA), a condition that is being increasingly recognized as leading to school and behavioral problems in children.

Snoring and Sleep apnoea in children IS NOT the same as in ADULTS

The most likely cause is enlarged tonsils AND adenoids. This is NOT the only cause but accounts for 95% of cases.

One form of definitive treatment is removing the adenoids and tonsils BUT there are more conservative approaches, which can be trialed.

AT NIGHT just before the child goes to sleep:

1. Use FESS little noses to clear the mucous from both nostrils
 2. For the FIRST week ONLY use Otrivin junior nasal drops – 3 drops to each nostril followed by a topical steroid
 3. Topical steroids include:
 - a. Nasonex (mometasone) spray OR
 - b. Flixonase (fluticasone) nasules (drops)
- Continue the FESS little noses and topical steroids until your next appointment.
 - Try and observe your child's sleep patterns. It is best to write down any changes. Improvement is often gradual.
 - o Is the snoring louder or softer?
 - o Does the child stop breathing? More or less often?
 - o Are they more or less irritable in the morning
 - o Has their behaviour improved?