

**SNOREPLASTY OF THE PALATE AND/OR UVULA**  
By [Samuel A. Mickelson](#) MD  
**Advanced Ear Nose & Throat Associates PC**  
**Director of The Atlanta Snoring & Sleep Disorders Institute**

**BACKGROUND**

Snoring is caused by vibration of floppy excessive tissue in the upper part of the airway. The most frequent cause is vibration of the soft palate and uvula. Snoring may also be due to nasal obstruction with vibration of nasal tissues or narrowing behind the tongue with vibration between the tongue and the back of the throat.

Snoreplasty is a procedure for the treatment of bothersome snoring. The procedure takes 15-20 minutes and is performed in the office under local anesthesia. Most patients have a mild sore throat lasting for 2 weeks after each treatment. Snoreplasty is done in 1-3 stages, with each stage causing more tightening of the soft palate and uvula. If symptoms persist, the next stage is performed 6-8 weeks later. Snoreplasty causes scar tissue by injecting a chemical (Sotradecol) into the soft palate and uvula. The Sotradecol causes an inflammatory reaction and leads to scar tissue at the site of injection. As the scar tissue contracts, the palate and uvula tighten up and become shorter, thereby reducing snoring.

Since Snoreplasty treats only snoring caused by palate and uvula vibration, a thorough examination by an Ear Nose & Throat Specialist is required to determine the sites of tissue vibration and airway narrowing in the throat. In addition, a careful history of symptoms is required to ensure that there is no sleep apnea. If sleep apnea is suspected, a sleep study would be performed prior to scheduling the Snoreplasty.

**SUCCESS RATE**

Snoring is significantly improved in 80-85 percent of patients undergoing Snoreplasty. At the current time, there is insufficient data available to know whether Snoreplasty may also be helpful for sleep apnea.

In patient's with sleep apnea who undergo surgical trimming of the soft palate, the apnea related symptoms (daytime sleepiness, morning headaches, irritability and difficulty concentrating) improve in 75-85 percent while apnea improves in approximately 50 percent of patients. Snoring or apnea may persist if there is narrowing of the nasal passages or lower part of the throat behind the tongue.

**ALTERNATIVE TREATMENTS**

There are three categories of treatment for snoring: Behavior treatment, devices, and surgical treatments.

Behavior treatments include any treatment that can be done by the patient. The most beneficial are weight loss (in people that are significantly overweight), avoiding alcohol and sleeping pills before sleep, and avoiding sleeping on the back.

The best device for snoring is a custom made adjustable oral appliance. This device is made by an Ear Nose and Throat Specialist or dentist. The device is custom fit over your teeth and pulls your lower jaw forward while sleeping. By pulling the jaw forward, it also pulls the tongue away from the palate and uvula. CPAP (Continuous Positive Airway Pressure) is an air compressor device worn at night that is generally used only for patients with sleep apnea.

Other surgeries or procedures for snoring include Somnoplasty of the palate and uvula (which shrinks and stiffens the palate and uvula from inside) and Laser Uvulopalatoplasty (LAUP) which trims off the

elongated tissues. In comparison to Snoreplasty, the Somnoplasty procedure is less painful but may require more treatment sessions and the LAUP is extremely painful. If snoring is caused by the nose or tongue, then treatment of these areas would be needed.

### **POTENTIAL COMPLICATIONS**

Complications are extremely rare. While rare, possible complications are listed below:

- Bleeding is rare. If bleeding occurs, it could require cauterization in the office or rarely, control of the bleeding in the operation room.
- Infection is rare.
- Allergic reaction to the anesthetic is rare.
- A dry, tight, lump or excess mucous sensation in the throat may occur. This sensation is usually temporary, and is rare to persist.
- Swallowing may be affected after the procedure. Liquids could enter your nose with swallowing or go down your throat too quickly and make you cough. While rare, some patient's may notice more difficulty with drinking from a drinking fountain or drinking carbonated beverages such as soda.
- Voice may be altered after the procedure. You could have difficulty making certain sounds such as the "French rolling R" or the "CH guttural sound of Greek, Arabic, and Hebrew". You could have a more nasal quality to your voice or have difficulty playing a wind or brass instrument. All of these are extremely rare.
- A fistula (hole) in the palate may occur and is also rare.

### **WHAT TO EXPECT AFTER YOUR TREATMENT**

**FOR DISCOMFORT:** Due to the anesthetic, the numbness in the throat will last 1-2 hours. A very mild sore throat can be expected for up to 14 days after the procedure. Most patients require only plain Tylenol (Acetaminophen) for pain. You may also use topical Chloroseptic spray, or Cepastat lozenges (available without a prescription). Patients should not take Aspirin, Aspirin containing products, or Ibuprofen (Motrin, Advil, Aleve) for 7 days before or after the procedure due to blood thinning and increased risk of bleeding.

**DIET:** For the first 2 days, you should avoid hot temperature drinks and food because they may worsen swelling. You should drink a lot of cold drinks, and suck on ice cubes or popsicles since they will help reduce swelling. You may also wish to avoid spicy foods if they cause more pain. Most patients are otherwise able to eat what ever they want.

**ACTIVITY:** You may resume your regular activities and work the same day. Some patients will note some increased soreness if they talk excessively the first day. Swelling of the uvula may occur and may make your voice temporarily different.

**MOUTH CARE:** You may brush your teeth and use dilute mouth wash as usual.

**INFECTIONS:** As with any surgery, an infection is always a risk. In order to try to prevent this, as well as to speed up healing, your physician may prescribe an antibiotic.

**SWELLING:** Mild swelling is expected at the treatment site and may feel like a lump sensation. If your throat feels swollen, you should sleep with your head elevated on several pillows. A steroid pill may be prescribed to reduce swelling.

**SCHEDULING:** Procedures are usually scheduled 6-8 weeks apart if snoring continues to be loud.

