'My husband's snoring could rattle the bed. Now he's been cured by radio waves'

By VICTORIA LAMBERT

By his own admission, Glen Hilton's snoring problem was transforming him into a desperate man. Despite trying numerous remedies, he had been banished from the marital bed, and the nights on the sofa, away from his wife, were taking their toll both mentally and physically

'At its worst, my snoring was so bad I could rattle the bed,' admits Glen - and he's far from alone. About 60 per cent of adults suffer from this antisocial condition, according to the National Sleep Foundation.

Glen says: 'It's always been bad. I've known I've snored every night since I was a child. I've even woken myself up.'

The 34-year-old from Northallerton, Yorkshire, who works in mental health support, had, like many snorers, turned to everything from adhesive strips placed across the nose to nasal sprays. These improve the passage of air and keep the nostrils wide open when you sleep.

Relief: Glen, with his wife Suzanne, had snored every night since childhood

. And Glen's long-suffering wife Suzanne, 36, an occupational therapist, continued to wear ear plugs in bed. They didn't help

However, when the couple started a family four years ago (they now have three girls: Emily, four, Holly, two, and Sophie, 11 months), sleep became more vital - and Glen was sent to the sofa bed.

'My GP referred me to an ear, nose and throat [ENT] consultant and I tried a face mask and gum shields,' he says. The mask delivered a continuous pressure of air to keep his passages open, and the shields were to prevent the vibration of the soft tissues at the back of the throat which causes the noise, but these, too, failed to make a difference.

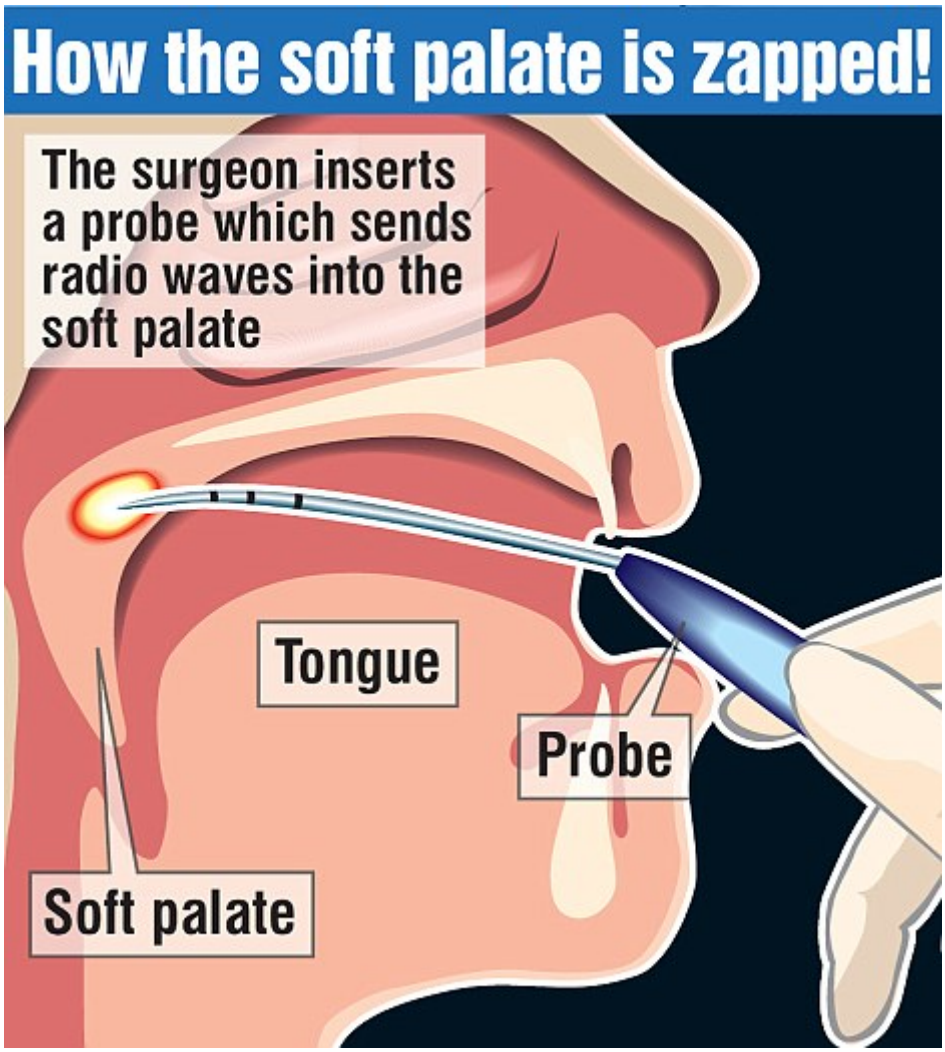
By now, nights on the sofa bed were causing Glen back problems. 'Your body can take only so much of sleeping on a sofa,' he says ruefully. 'I was a wreck, and never sleeping in the

same bed as your wife can take its toll on your relationship, although Suzanne has always been supportive.'

By January this year, Glen was desperate. He went to see Mr Bannerjee, an ENT surgeon who examined him again and concluded the main contributing factor was Glen's soft palate - the flesh that hangs at the back of the throat to prevent food getting into the nasal passage.

Says Mr Bannerjee: 'There are many reasons for snoring. In some cases it is related to the nose or the tongue, but in Glen's case the palate was at fault. This can be due to genetics or poor muscle tone. The consequence is it vibrates like a reed in a wind instrument. Being overweight can be a factor, too. The fatter you are, the more restricted your airway becomes, so I ask overweight patients to diet before I try surgery.'

Glen, who is 5ft 10in, was about 14 stone at the time so he agreed to lose weight first. He dropped two stone but there was no improvement.



So in July, Mr Bannerjee suggested surgery instead. Traditionally, the procedure, called UPPP (or uvulopalatopharyngoplasty), is carried out under general anaesthetic, with patients in hospital for three or four days and in often excruciating pain for the next ten days, needing up to three weeks off work.
This is always a last resort, according to Mr Bannerjee. 'Trimming back the palate, so that it scars which stiffens the tissue making it less likely to vibrate, is known as the most painful operation in throat surgery.'

Instead, Glen was offered a new procedure carried out under local anaesthetic. Crucially, it is less painful and, at £1,495 including consultations, about £2,000 cheaper, too.

Radiofrequency palatal stiffening - nicknamed 'snoreplasty' - takes about 20 minutes to perform. Glen was placed in a chair to keep him upright and given a series of injections into the palate to numb it.

After each injection, Mr Bannerjee would insert a probe into the tissue of the palate to send radio waves into the flesh. This causes damage, which the body heals with scarring. Over the next three years, the scar tissue will continue to thicken and make the palate too stiff to vibrate.

'There was no smell or noise and it was painless and quick,' says Glen. 'I felt weak for the next day or so, but was soon back to work. All I needed was paracetamol for the pain, which was no worse than a sore throat.'

Mr Bannerjee will see Glen again in October and will repeat the procedure if the palate is not stiff enough. But the effects should last for at least three years, if not for life.

'This is effective and a lot less painful,' he says. 'It is walk-in, walkout, with no in-patient stay or a long recovery time. I can only offer it privately at the moment, but I am hopeful my NHS practice at the James Cook University Hospital, Middlesbrough, will give the go-ahead to use it soon as it is much more cost-effective.'

Martin Allen, a consultant physician and spokesman for the British Thoracic Society, the official body of respiratory specialists, says causing lesions or damage to the soft palate is well established for treating snoring.

'It could be one of several possible interventions to stop snoring, including giving up alcohol, stopping smoking, laser treatment to the palate and losing weight,' he says.
But he warns that if the snoring is caused by sleep apnoea - when airwaves regularly collapse altogether --a snoreplasty will not be enough, and that for these patients a mask delivering air under continuous pressure to keep the airways open is required.
For Glen, though, the results have been impressive. Ten days after the procedure, he was back in the marital bed - and Suzanne reports that there has been no snoring.

And now Glen is off the sofa, his general health has improved. 'My body feels 100 per cent better. I hope this lasts a long time. I'd have no hesitation in going back. I didn't enjoy the injections, but they were certainly worth it.'