

# 日本口臭学会 第8回学術大会

プログラム・抄録集

にのいの科学を多面的に考える

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会場

岡山大学創立五十周年記念館

大会長

森田 学

(岡山大学大学院医歯薬学総合研究科  
予防歯科学分野)





## 口臭といびき・無呼吸の関連について ～口臭を主訴に受診した患者が重症無呼吸症を併発していた一症例～

The relation between halitosis and snore, apnea:

A case of patients developing of halitosis and severe obstructive sleep apnea

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In September, 2012, Keiyu Ginza Clinic started out-patient service for halitosis. The number of patients has steadily increased and as of February 2017 there have been 1,530 patients.

Many factors can cause halitosis, such as localized problems in the oral cavity, systemic disease, and natural causes. As an otolaryngological clinic, we focus on the cause and provide treatment from the point of view of otolaryngology. Along with collecting information through the medical interview, we also examine the sinus by X-ray, examine the pharynx and larynx by nasopharyngeal endoscopy, examine the tongue, and measure the severity of halitosis by Oral Chrome. Common causes of halitosis are sinusitis, chronic nasal inflammation, pharynx or larynx inflammation, and tonsillolith. These conditions can be improved by medications, which then often improves the halitosis. In addition, breathing from the mouth during sleep causes dry mouth, which can also lead to halitosis. These patients also often snore during their sleep. So, during their first visit, our clinic asks all patients if they snore. As a result, halitosis patients are relatively more often to report snoring at night. Also, snoring is representative of sleep apnea syndrome. If patients report snoring, their family members report them snoring, or it is identified by the doctor during examination, we strongly recommend them to take a sleep examination.

Out of all the patients who came to our clinic for halitosis in 2016, 158 also took a sleep examination. 63 (approximately 40%) of these patients were diagnosed with obstructive sleep apnea syndrome (OSAS). Therefore, halitosis and sleep apnea, snoring appears to be highly related.

In this presentation, we report on a patient who came to our clinic for only halitosis but was also diagnosed with severe OSAS, started CPAP treatment, and afterwards, both the halitosis and OSAS improved. Based on this case, we discuss the relationship between halitosis and sleep apnea, snoring. In addition, the purpose of this case report is to examine whether or not halitosis can be a symptom of OSAS.