

Is Snoring a Sign of Something More Serious?

家族や友人から「いびきがすごいよ」と言われた経験はありますか。自分では気づきにくいものですが、一緒に暮らす人にとっては気になることのひとつかもしれません。最近では、タレントの北斗晶さんが家族の体験を通して、いびきが病気のサインかもしれないと語りました。睡眠中の小さな変化は、体の不調を知らせるサインかもしれません。こうしたサインに、私たちはどう気づけばよいのでしょうか。あなたは睡眠と健康の関係をどう考えますか。



1. Article

Read the following article aloud.

Snoring is a problem that's easy to overlook. Even when it's severe enough to seriously disrupt sleep, many people leave it untreated. In 2025, the Japanese Society of Sleep Research took a step toward changing that, formally requesting that sleep disorders be recognized within the names of existing medical specialties, such as internal medicine, to make it easier for patients to find appropriate care. But what are the real health risks of leaving snoring unaddressed?

In January, a public awareness event on sleep apnea syndrome (SAS) was held in Tokyo. Former professional wrestler and TV personality Kensuke Sasaki, 59, spoke candidly about the moment a doctor first raised the possibility that he might have SAS.

"I never imagined that my breathing could stop for nearly two minutes while asleep — like I was drowning," Sasaki said. "I was shocked and knew right away that I couldn't ignore it."

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1. Article

Sasaki had long been warned by his wife, former professional wrestler and TV personality Akira Hokuto about his loud snoring. Even other family members had noticed it during trips together. As a precaution, he underwent a sleep study to monitor his breathing overnight. At its worst, he had stopped breathing for nearly two minutes. "Even when I felt tired during the day, I just put it down to getting older," he said. "I finally understood that my body had been sending me signals all along."

Reflecting on the experience, Hokuto said, "It hit me that snoring could actually be a sign of something serious. I came to see that speaking up about a partner's snoring is, in its own way, an act of love."

A November 2025 survey by Teijin Pharma, a Tokyo-based company that rents SAS treatment devices, polled 2,350 men and women across Japan who had been told by a family member that they snore.

About 80% said they wanted to address their snoring or apnea, yet roughly 70% had taken no concrete steps to do so, underscoring just how common it is for the problem to go unaddressed. A separate survey found that many people also hesitate to bring up a spouse's snoring in the first place.

Snoring occurs when the upper [airway](#) narrows during sleep. If the condition worsens and the airway becomes fully blocked, breathing stops altogether, which is what defines SAS. When this happens repeatedly over time, chronically low oxygen levels can cause the body to rouse itself, fragmenting sleep and leaving sufferers exhausted.

According to a 2023 survey by the health ministry, an estimated 475,000 people in Japan have been [diagnosed](#) with SAS. The true number, however, is thought to be far higher, with many cases going [undetected](#).

"When sleep problems arise, it's important to see a medical professional promptly. But in Japan, it often takes a long time before someone actually gets examined," says Dr Naohisa Uchimura, president of Kurume University. He is also the chair of the Japanese Society of Sleep Research.

To help ensure that sleep problems, including snoring that may signal SAS, lead to proper medical care, the society submitted a formal request to the health ministry in April 2025. The request called for sleep disorders to be recognized as an official sub-designation within existing medical specialties. If approved, patients would begin seeing signage at clinics and hospitals listing specialties such as "Internal Medicine (Sleep Disorders)" or "Psychiatry (Sleep Disorders)," making it easier to identify where to seek help.

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1. Article

Currently, SAS is mainly diagnosed and treated by cardiologists, pulmonologists, and ear, nose and throat specialists. If the society's proposal is approved, a wider range of specialties could serve as entry points for care, allowing patients to be identified and treated earlier. The society is also working on guidelines to improve coordination between hospitals.

"If SAS goes untreated, it can lead to serious **complications** such as high blood pressure or stroke," says Uchimura. "Early detection and treatment can make a real difference to overall health."

Treatment options include CPAP (Continuous Positive Airway Pressure) therapy, which keeps the airway open during sleep by delivering pressurized air through a mask. Another option is a custom mouthpiece that holds the lower jaw slightly forward to prevent the airway from narrowing.

"When diagnosis and treatment go smoothly, patients often see a meaningful improvement in their daily quality of life," Uchimura adds. He encourages anyone who snores heavily to consult a doctor sooner rather than later.



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2. Key phrases and vocabulary

First repeat after your tutor and then read aloud by yourself.

1. **snoring** いびき

The old dog's loud **snoring** could be heard from the hallway.

2. **airway** 気道

The doctor explained how the **airway** carries air into the lungs.

3. **diagnose** 診断する

The mechanic used a computer to **diagnose** the problem with the car.

4. **detect** 検出する

Scientists can **detect** tiny changes in temperature with special tools.

5. **complication** 合併症

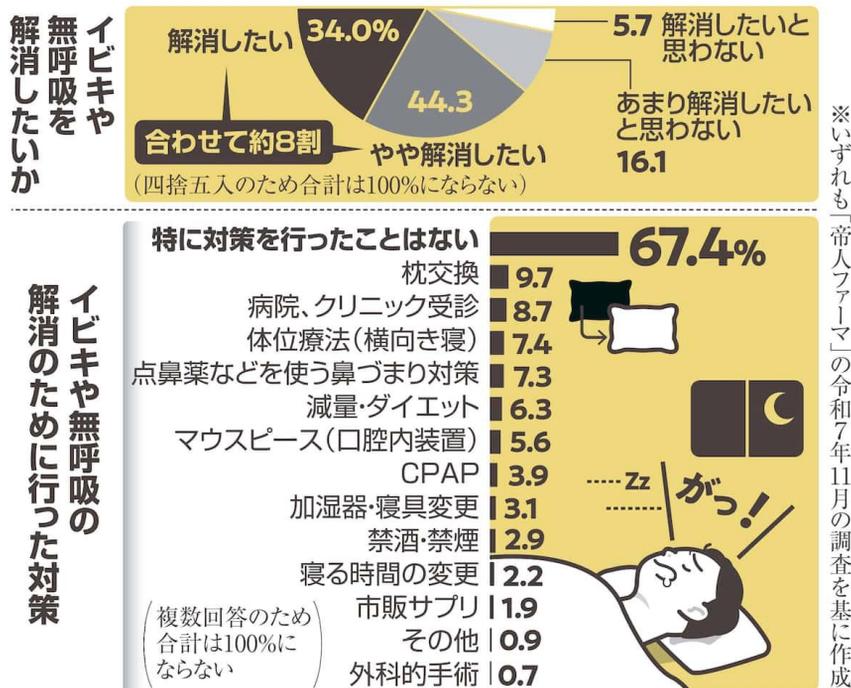
Ignoring a small injury sometimes leads to a serious **complication**.

3. Questions

Read the questions aloud and answer them.

1. What health condition can loud snoring sometimes signal?
2. What can happen to oxygen levels when the airway becomes blocked during sleep?
3. What serious health problems can untreated sleep apnea cause?
4. Why might some people feel embarrassed to talk about snoring or sleep problems?
5. What habits do you think help people get better sleep?

4. 7割放置のイビキ「病気のサインかも」と北斗晶さん、診療科に「睡眠障害」併記を学会要望



自覚しづらいイビキの悩み。ひどくて睡眠に支障を来しても、そのまま放置されていることが多い。そんな不調を適切な医療につなげようと、日本睡眠学会は昨年、内科など既存の診療科名に「睡眠障害」を付記できるようにとの要望書を提出した。イビキの放置は、どんな不調を招く可能性があるのか。

「まさか自分が寝ているときに、溺れるように2分も呼吸をしていなかったなんて…。驚くと同時に、これは放っておいてはいけなかったと思いました」

今年1月、東京都内で開催された睡眠時無呼吸症候群（SAS）の啓発イベント。元プロレスラーでタレントの佐々木健介さん（59）は真剣なまなざしで、SASの可能性を医師に指摘されたときの驚きを語った。

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佐々木さんは、かねて、妻で元プロレスラーでタレントの北斗晶さん（58）から、「イビキがうるせえ」と言われ、旅行中にほかの家族にも指摘されてきた。念のためにと、睡眠中の呼吸の状態を検査すると、「無呼吸」の状態が最長で約2分間も続いていた。「日中に疲れを感じても、年齢を重ねたせいだと思っていました。体が悲鳴を上げていたと、やっと気付きました」（佐々木さん）

北斗さんも、「イビキは病気のサインかもしれないと痛感しました。イビキを指摘することは『愛』だと気付きました」と振り返った。

SAS治療機器のレンタル事業を行う帝人ファーマ（東京都千代田区）は昨年11月、家族からイビキを指摘された全国の男女2350人に意識調査を実施。イビキや無呼吸を解消したいと思う人は約8割に上ったが、特に対策を行ったことはないとの回答が約7割を占め、放置する人が大半を占める実態が浮き彫りになった。また同時に行われた別の調査では、配偶者のイビキを指摘するのをためらう人が多いことも分かった。

睡眠中、ひどいイビキをかくのは上気道が狭くなっているから。その状態が進行し、完全に上気道が塞がってしまうと呼吸が止まる。それがSASだ。常態化すると低酸素で息苦しくなり、睡眠が妨げられる。

厚生労働省の令和5年の調査ではSAS患者は推計47万5000人。潜在患者はさらにいるとみられる。

睡眠の悩みに適切な医療を

「睡眠に問題が生じた場合は速やかに医療機関を受診するのが大事ですが、今の日本では受診までに時間がかかることが少なくありません」

こう語るのは、日本睡眠学会理事長で久留米大学学長の内村直尚医師（69）＝睡眠医学＝だ。

出典：7割放置のイビキ「病気のサインかも」と北斗晶さん、診療科に「睡眠障害」併記を学会要望
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SASの兆候ともなるイビキをはじめ、睡眠の悩みを適切な医療につなげようと、日本睡眠学会は7年4月、「睡眠障害」という症状名を内科など既存の診療科と組み合わせて表示できるようにとの要望書を厚労省に提出した。実現すれば、「睡眠障害内科」「睡眠障害精神科」「内科（睡眠障害）」「精神科（睡眠障害）」などと表記されるようになる。

SASの診察・治療は主に、循環器内科や呼吸器内科、耳鼻咽喉科で行われている。日本睡眠学会の要望がかなえば、より多くの診療科が受け皿となり、軽度のうちに治療を始められる可能性が高まる。同学会は現在、病院間の治療連携のガイドライン作成を進めているという。

「SASは治療せず放置すると、高血圧や脳卒中などを併発しやすいといわれます。早期に発見し、治療ができれば健康増進も期待できます」と内村さん。

SASの主な治療法はマスクを通して加圧した空気を送り気道を広げる「CPAP（シーパップ）療法」や下顎を前方に固定する「専用マウスピース」の装着など。「診断や治療が円滑にできれば、普段の生活の質の改善も期待できるでしょう」と内村さん。イビキがひどい場合は早期の受診をと呼びかけている。

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