

Sleep Apnea

And sleep studies

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Sleep Apnea

- May cause or help contribute to
- Hypertension
- Diabetes
- Depression
- Hyperlipidemia
- CHF
- Insomnia

Sleeping and apnea

- Definition of sleep apnea
- AHI >5
- What is AHI?
- Obstructive vs. Central

What is considered good sleep?

- N1-N3
- Deep sleep
- REM

- Should have greater than 50% of time spent in deep sleep or REM sleep.

- Apnea may disrupt this by.....

Fight or flight

- Increased catecholamine release
 - Increased blood pressure
 - Increased heart rate
 - Increased sugar release
 - All While sleeping
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- Its all a matter of math!!
 - Lack of quality sleep+ increased catecholamine activity = multiple co morbidities

It starts with primary care

- Subjective questions
- **Think SNORE !!!**
- Do you snore(usually witnessed)
- Has anyone told you that you stop breathing while sleeping
- Do you grind your teeth
- Do you wake up exhausted or with a headache
- Do you have heartburn at night
- Do you ever wake up gasping for air or sweating

Objective

- Uncontrolled Blood pressure(usually on two or more meds)
- Depressed affect(usually combined with other symptomology)
- High morning blood sugars
- Uncontrolled or challenging diabetes
- Ground down molars
- Scalloped tongue
- Neck girth of > 15 inches(DOT Standards)

YKHC

Specialty clinic.....will coordinate with respiratory and perform follow up care.

Orders....., Under respiratory, Take home sleep study in Hostel(only will detect OSA)

Contract with neurology to read sleep studies and provide CPAP to provide equipment just signed last friday

Follow up required(machine has chip) patient must be encouraged to use machine.

Thank You