WEBVTT

NOTE duration:"01:01:30" NOTE recognizability:0.880

NOTE language:en-us

NOTE Confidence: 0.824757143636364

00:00:00.000 --> 00:00:01.896 Something is making a very weird

NOTE Confidence: 0.824757143636364

 $00{:}00{:}01.896 --> 00{:}00{:}05.210$  noise in this call room. Oh no.

NOTE Confidence: 0.859208505

 $00:00:05.210 \longrightarrow 00:00:06.438$  Will have a disclaimer

NOTE Confidence: 0.863766164545455

 $00:00:07.130 \longrightarrow 00:00:08.258$  will be like when I run

NOTE Confidence: 0.863766164545455

 $00:00:08.258 \longrightarrow 00:00:09.290$  out of the screen just.

NOTE Confidence: 0.86701247

 $00:00:12.580 \longrightarrow 00:00:16.370$  Alright, so good afternoon everyone.

NOTE Confidence: 0.86701247

 $00:00:16.370 \longrightarrow 00:00:17.924$  So as usual I'm going to start

NOTE Confidence: 0.86701247

 $00{:}00{:}17.924 \dashrightarrow 00{:}00{:}19.845$  with a few announcements before I

NOTE Confidence: 0.86701247

 $00:00:19.845 \longrightarrow 00:00:22.148$  introduce our speaker first that

NOTE Confidence: 0.86701247

 $00{:}00{:}22.148 \dashrightarrow 00{:}00{:}24.918$  these sleep seminar lectures are

NOTE Confidence: 0.86701247

 $00{:}00{:}24.918 \dashrightarrow 00{:}00{:}27.860$  available for CME Credit Wendy.

NOTE Confidence: 0.86701247

 $00:00:27.860 \longrightarrow 00:00:29.444$  In real time and to receive

NOTE Confidence: 0.86701247

 $00:00:29.444 \longrightarrow 00:00:31.331$  credit you do need to text the

 $00:00:31.331 \longrightarrow 00:00:33.137$  ID for the lecture to Yale Cloud.

NOTE Confidence: 0.86701247

 $00:00:33.140 \longrightarrow 00:00:34.512$  See any by 3:15 PM today and

NOTE Confidence: 0.86701247

00:00:34.512 --> 00:00:35.864 there will be more information in

NOTE Confidence: 0.86701247

 $00:00:35.864 \longrightarrow 00:00:37.530$  the chat on his lecture goes on

NOTE Confidence: 0.86701247

 $00:00:37.581 \longrightarrow 00:00:39.096$  recordings of the lectures are

NOTE Confidence: 0.86701247

 $00:00:39.096 \longrightarrow 00:00:40.611$  available in approximately 2 weeks

NOTE Confidence: 0.86701247

 $00:00:40.620 \longrightarrow 00:00:42.300$  and the site will be in the chat.

NOTE Confidence: 0.86701247

 $00:00:42.300 \longrightarrow 00:00:43.710$  There is no CME credit

NOTE Confidence: 0.86701247

00:00:43.710 --> 00:00:44.838 available for later viewings.

NOTE Confidence: 0.86701247

00:00:44.840 --> 00:00:46.358 If you have questions please type

NOTE Confidence: 0.86701247

 $00{:}00{:}46.358 \mathrel{--}{>} 00{:}00{:}48.105$  them into the chat and we'll get

NOTE Confidence: 0.86701247

 $00:00:48.105 \longrightarrow 00:00:49.701$  to them at the end and otherwise.

NOTE Confidence: 0.86701247

 $00:00:49.710 \longrightarrow 00:00:52.678$  Please keep your microphone muted so

NOTE Confidence: 0.86701247

 $00:00:52.678 \longrightarrow 00:00:55.542$  today it is my pleasure to introduce our

NOTE Confidence: 0.86701247

 $00:00:55.542 \longrightarrow 00:00:58.019$  seminar speaker who's one of our own.

NOTE Confidence: 0.86701247

 $00{:}00{:}58.020 \dashrightarrow 00{:}01{:}00.484$  Doctor Melissa Canaller Dr Can Art is

 $00{:}01{:}00.484 \dashrightarrow 00{:}01{:}02.644$  an assistant professor in the Yale

NOTE Confidence: 0.86701247

 $00:01:02.644 \longrightarrow 00:01:04.720$  School of Medicine with a secondary

NOTE Confidence: 0.86701247

00:01:04.720 --> 00:01:06.717 appointment in the L School of Nursing.

NOTE Confidence: 0.86701247

00:01:06.720 --> 00:01:08.463 She received her pH D and her

NOTE Confidence: 0.86701247

 $00{:}01{:}08.463 \dashrightarrow 00{:}01{:}09.850$  medical degree from Yale School

NOTE Confidence: 0.86701247

 $00:01:09.850 \longrightarrow 00:01:11.908$  of Medicine and then she moved to

NOTE Confidence: 0.86701247

00:01:11.908 --> 00:01:13.378 Philadelphia for Internal Medicine,

NOTE Confidence: 0.86701247

 $00{:}01{:}13.380 \dashrightarrow 00{:}01{:}15.530$  internship and residency at the

NOTE Confidence: 0.86701247

 $00{:}01{:}15.530 \dashrightarrow 00{:}01{:}16.820$  University of Pennsylvania.

NOTE Confidence: 0.86701247

 $00:01:16.820 \longrightarrow 00:01:18.472$  She returned to Yale to do her

NOTE Confidence: 0.86701247

 $00{:}01{:}18.472 \dashrightarrow 00{:}01{:}19.827$  pulmonary and critical care and

NOTE Confidence: 0.86701247

00:01:19.827 --> 00:01:21.015 her Sleep Medicine fellowships,

NOTE Confidence: 0.86701247

 $00{:}01{:}21.020 \dashrightarrow 00{:}01{:}23.022$  and then she Subs when we stayed

NOTE Confidence: 0.86701247

 $00:01:23.022 \longrightarrow 00:01:24.480$  on here as faculty,

NOTE Confidence: 0.86701247

 $00:01:24.480 \longrightarrow 00:01:26.605$  she is active clinically in

 $00:01:26.605 \longrightarrow 00:01:27.880$  education and research.

NOTE Confidence: 0.86701247

 $00{:}01{:}27.880 \dashrightarrow 00{:}01{:}29.520$  She attends in Sleep Medicine.

NOTE Confidence: 0.86701247

00:01:29.520 --> 00:01:31.753 And in the medical ICU she's currently

NOTE Confidence: 0.86701247

00:01:31.753 --> 00:01:33.960 on jeopardy and working as we speak,

NOTE Confidence: 0.86701247

 $00:01:33.960 \longrightarrow 00:01:35.936$  so we give her a lot of credit

NOTE Confidence: 0.86701247

 $00:01:35.936 \longrightarrow 00:01:37.120$  for doing this talk.

NOTE Confidence: 0.86701247

 $00{:}01{:}37.120 \dashrightarrow 00{:}01{:}39.619$  Today she served as the associate program

NOTE Confidence: 0.86701247

 $00:01:39.619 \longrightarrow 00:01:42.076$  director for the Yale Sleep Medicine

NOTE Confidence: 0.86701247

 $00:01:42.076 \longrightarrow 00:01:44.486$  Fellowship program from 2013 to 2021,

NOTE Confidence: 0.86701247

 $00:01:44.486 \longrightarrow 00:01:46.296$  and she's been an inspirational

NOTE Confidence: 0.86701247

 $00:01:46.296 \longrightarrow 00:01:48.702$  mentor and role model for multiple

NOTE Confidence: 0.86701247

 $00{:}01{:}48.702 \dashrightarrow 00{:}01{:}50.318$  trainees during this time.

NOTE Confidence: 0.86701247

00:01:50.320 --> 00:01:51.126 She's lectured,

NOTE Confidence: 0.86701247

00:01:51.126 --> 00:01:52.738 know locally and nationally,

NOTE Confidence: 0.86701247

00:01:52.740 --> 00:01:55.239 on topics and sleep in circadian science,

NOTE Confidence: 0.86701247

 $00{:}01{:}55.240 \dashrightarrow 00{:}01{:}56.600$  and she's regularly participated in

 $00:01:56.600 \longrightarrow 00:01:58.470$  the American College of Chest Physicians.

NOTE Confidence: 0.86701247

 $00:01:58.470 \longrightarrow 00:02:00.670$  Sleep four to review course.

NOTE Confidence: 0.86701247

 $00:02:00.670 \longrightarrow 00:02:02.878$  Her research centers on sleep and

NOTE Confidence: 0.86701247

 $00:02:02.878 \longrightarrow 00:02:04.860$  circadian disruption in critical illness.

NOTE Confidence: 0.86701247

 $00:02:04.860 \longrightarrow 00:02:06.904$  She is a recipient of numerous grants,

NOTE Confidence: 0.86701247

 $00:02:06.910 \longrightarrow 00:02:08.646$  including from the NHLBI,

NOTE Confidence: 0.86701247

00:02:08.646 --> 00:02:10.816 the National Center for Advancing

NOTE Confidence: 0.86701247

00:02:10.816 --> 00:02:11.850 Translational Sciences,

NOTE Confidence: 0.86701247

00:02:11.850 --> 00:02:13.900 the National Institute on Aging,

NOTE Confidence: 0.86701247

00:02:13.900 --> 00:02:15.450 American Academy of Sleep Medicine,

NOTE Confidence: 0.86701247

 $00:02:15.450 \longrightarrow 00:02:16.626$  and other agencies.

NOTE Confidence: 0.86701247

 $00:02:16.626 \longrightarrow 00:02:18.586$  She is currently principal investigator

NOTE Confidence: 0.86701247

 $00{:}02{:}18.586 \dashrightarrow 00{:}02{:}20.820$  on three ongoing clinical trials,

NOTE Confidence: 0.86701247

 $00:02:20.820 \longrightarrow 00:02:22.384$  including circadian rhythm as

NOTE Confidence: 0.86701247

 $00:02:22.384 \longrightarrow 00:02:24.339$  a novel the rapeutic target in

 $00:02:24.339 \longrightarrow 00:02:26.039$  the intensive care unit.

NOTE Confidence: 0.86701247

 $00:02:26.040 \longrightarrow 00:02:28.308$  Randomized control trial of daytime bright,

NOTE Confidence: 0.86701247

 $00:02:28.310 \longrightarrow 00:02:30.630$  light, circadian abnormalities and delirium.

NOTE Confidence: 0.86701247

 $00{:}02{:}30.630 \dashrightarrow 00{:}02{:}32.514$  In medical ICU patients and a

NOTE Confidence: 0.86701247

 $00:02:32.514 \longrightarrow 00:02:33.770$  randomized controlled trial of

NOTE Confidence: 0.86701247

 $00:02:33.825 \longrightarrow 00:02:35.649$  intermittent feeding in mechanically

NOTE Confidence: 0.86701247

 $00{:}02{:}35.649 \dashrightarrow 00{:}02{:}37.017$  ventilated ICU patients.

NOTE Confidence: 0.86701247

 $00:02:37.020 \longrightarrow 00:02:38.112$  She wasn't invited.

NOTE Confidence: 0.86701247

 $00{:}02{:}38.112 \dashrightarrow 00{:}02{:}39.932$  ASM representative at the recent

NOTE Confidence: 0.86701247

 $00:02:39.932 \longrightarrow 00:02:41.880$  Sleep Research Society Workshop on

NOTE Confidence: 0.86701247

00:02:41.880 --> 00:02:43.815 Sleep and circadian rhythm disorders,

NOTE Confidence: 0.86701247

 $00:02:43.820 \longrightarrow 00:02:45.535$  so we are really pleased to have

NOTE Confidence: 0.86701247

 $00:02:45.535 \longrightarrow 00:02:46.025$  Doctor Canal.

NOTE Confidence: 0.86701247

 $00:02:46.030 \longrightarrow 00:02:47.983$  Join us today and she's going to

NOTE Confidence: 0.86701247

00:02:47.983 --> 00:02:49.181 be discussing sleep deficiency

NOTE Confidence: 0.86701247

 $00:02:49.181 \longrightarrow 00:02:50.975$  in the ICU beyond the brain.

 $00{:}02{:}50.980 --> 00{:}02{:}51.560 \ \mathrm{Welcome},$ 

NOTE Confidence: 0.966108988571429

 $00:02:51.920 \longrightarrow 00:02:53.260$  thanks so much Janet.

NOTE Confidence: 0.966108988571429

 $00:02:53.260 \longrightarrow 00:02:54.265$  Thank you everyone.

NOTE Confidence: 0.966108988571429

 $00:02:54.270 \longrightarrow 00:02:56.398$  It's really a pleasure to be here.

NOTE Confidence: 0.966108988571429

 $00:02:56.400 \longrightarrow 00:02:58.776$  I am over in the hospital and if I

NOTE Confidence: 0.966108988571429

 $00:02:58.776 \longrightarrow 00:03:01.139$  for some reason get disconnected.

NOTE Confidence: 0.966108988571429

00:03:01.140 --> 00:03:02.956 Or frozen, I'm just gonna jump back on

NOTE Confidence: 0.966108988571429

 $00{:}03{:}02.956 \dashrightarrow 00{:}03{:}05.318$  or or pause and wait for it to keep going.

NOTE Confidence: 0.966108988571429

 $00:03:05.320 \longrightarrow 00:03:06.840$  It seems like the connection is pretty good,

NOTE Confidence: 0.966108988571429

 $00:03:06.840 \longrightarrow 00:03:09.420$  but I apologize for the logistics.

NOTE Confidence: 0.966108988571429

 $00:03:09.420 \longrightarrow 00:03:11.429$  It really is my pleasure today to

NOTE Confidence: 0.966108988571429

 $00:03:11.429 \longrightarrow 00:03:13.427$  talk to you about safe deficiency

NOTE Confidence: 0.966108988571429

 $00:03:13.427 \longrightarrow 00:03:15.557$  in the ICU beyond the brain.

NOTE Confidence: 0.966108988571429

 $00{:}03{:}15.560 \to 00{:}03{:}18.160$  This is a new talk for me in a really

NOTE Confidence: 0.966108988571429

00:03:18.235 --> 00:03:19.995 fun talk and sort of scientifically,

 $00:03:19.995 \longrightarrow 00:03:21.520$  really exciting that there's there's

NOTE Confidence: 0.966108988571429

 $00{:}03{:}21.520 \dashrightarrow 00{:}03{:}23.188$  something a little bit to talk about

NOTE Confidence: 0.966108988571429

 $00:03:23.188 \longrightarrow 00:03:24.883$  because I think this is something that's

NOTE Confidence: 0.966108988571429

00:03:24.883 --> 00:03:27.458 been emerging for much of my my career,

NOTE Confidence: 0.966108988571429

 $00:03:27.460 \longrightarrow 00:03:29.880$  and so glad that we've

NOTE Confidence: 0.966108988571429

 $00:03:29.880 \longrightarrow 00:03:31.816$  taken some steps forward.

NOTE Confidence: 0.966108988571429 00:03:31.820 --> 00:03:32.490 Uhm?

NOTE Confidence: 0.930561768

 $00:03:47.030 \longrightarrow 00:03:48.030$  I have nothing to disclose.

NOTE Confidence: 0.812127436666667

00:03:55.820 --> 00:03:58.676 I'm sorry, who is that work?

NOTE Confidence: 0.812127436666667

00:03:58.680 --> 00:04:01.810 OK sorry, sorry nothing to disclose

NOTE Confidence: 0.812127436666667

 $00{:}04{:}01.810 \dashrightarrow 00{:}04{:}04.214$  and also the CME code is here on

NOTE Confidence: 0.812127436666667

 $00:04:04.214 \longrightarrow 00:04:06.262$  this slide and will also be in the

NOTE Confidence: 0.812127436666667

 $00:04:06.326 \longrightarrow 00:04:08.336$  chat as doctor Hilbert mentioned.

NOTE Confidence: 0.90845822

 $00:04:12.720 \longrightarrow 00:04:14.392$  OK, so today we're gonna do a little

NOTE Confidence: 0.90845822

 $00:04:14.392 \longrightarrow 00:04:15.980$  bit of work on definitions and

NOTE Confidence: 0.90845822

 $00{:}04{:}15.980 \dashrightarrow 00{:}04{:}17.648$  background so that you know where

 $00{:}04{:}17.699 \dashrightarrow 00{:}04{:}19.397$  I'm coming from with sleep and

NOTE Confidence: 0.90845822

 $00{:}04{:}19.397 \dashrightarrow 00{:}04{:}20.884$  circadian disruption in the ICU.

NOTE Confidence: 0.90845822

 $00:04:20.884 \longrightarrow 00:04:23.008$  Well then go into the functional

NOTE Confidence: 0.90845822

 $00:04:23.008 \longrightarrow 00:04:24.524$  consequences of these disruptions

NOTE Confidence: 0.90845822

 $00{:}04{:}24.524 \dashrightarrow 00{:}04{:}26.888$  and all scattered in through that.

NOTE Confidence: 0.90845822

 $00:04:26.890 \longrightarrow 00:04:28.835$  I'll talk about some possible

NOTE Confidence: 0.90845822

 $00:04:28.835 \longrightarrow 00:04:30.391$  interventions that are emerging

NOTE Confidence: 0.90845822

 $00:04:30.391 \longrightarrow 00:04:32.519$  for our critically ill patients.

NOTE Confidence: 0.90845822

00:04:32.520 --> 00:04:35.740 And so sleep deficiency is a construct

NOTE Confidence: 0.90845822

00:04:35.740 --> 00:04:38.295 proposed in more recent years by any

NOTE Confidence: 0.90845822

 $00:04:38.295 \longrightarrow 00:04:41.586$  by the NIH as an attempt to really

NOTE Confidence: 0.90845822

 $00{:}04{:}41.586 \dashrightarrow 00{:}04{:}44.267$  define the domains within what I would

NOTE Confidence: 0.90845822

 $00{:}04{:}44.267 \dashrightarrow 00{:}04{:}46.570$  call a syndrome of ways that sleep

NOTE Confidence: 0.90845822

00:04:46.646 --> 00:04:49.028 and circadian rhythms can go awry.

NOTE Confidence: 0.90845822

 $00:04:49.030 \longrightarrow 00:04:49.582$  There's mentioned,

 $00:04:49.582 \longrightarrow 00:04:51.238$  and these these things I think,

NOTE Confidence: 0.90845822

 $00:04:51.240 \longrightarrow 00:04:52.455$  are still evolving,

NOTE Confidence: 0.90845822

 $00{:}04{:}52.455 \dashrightarrow 00{:}04{:}54.885$  and there's been some very thoughtful

NOTE Confidence: 0.90845822

 $00:04:54.885 \longrightarrow 00:04:56.658$  efforts to formalize these domains

NOTE Confidence: 0.90845822

 $00:04:56.658 \longrightarrow 00:04:59.026$  and to really try to come come

NOTE Confidence: 0.90845822

 $00:04:59.026 \longrightarrow 00:05:01.234$  to a common nosology a bit.

NOTE Confidence: 0.90845822

 $00:05:01.240 \longrightarrow 00:05:01.870$  At this time.

NOTE Confidence: 0.90845822

 $00:05:01.870 \longrightarrow 00:05:03.340$  You know what we're really talking about.

NOTE Confidence: 0.90845822

 $00{:}05{:}03.340 \dashrightarrow 00{:}05{:}05.720$  Or abnormalities in sleep duration

NOTE Confidence: 0.90845822

 $00:05:05.720 \longrightarrow 00:05:06.708$  in the chronic literature.

NOTE Confidence: 0.90845822

 $00:05:06.708 \longrightarrow 00:05:08.190$  This can be short or long.

NOTE Confidence: 0.90845822

 $00:05:08.190 \longrightarrow 00:05:09.888$  In the ICU we most typically

NOTE Confidence: 0.90845822

00:05:09.888 --> 00:05:11.020 talk about short sleep.

NOTE Confidence: 0.90845822

 $00:05:11.020 \longrightarrow 00:05:13.348$  Also issues with sleep quality that

NOTE Confidence: 0.90845822

 $00:05:13.348 \longrightarrow 00:05:15.780$  encompass changes in sleep architecture,

NOTE Confidence: 0.90845822

 $00:05:15.780 \longrightarrow 00:05:18.126$  notably differences in REM and slow

00:05:18.126 --> 00:05:19.804 wave sleep increases in arousal

NOTE Confidence: 0.90845822

 $00{:}05{:}19.804 \dashrightarrow 00{:}05{:}21.890$  that can be quite dramatic to the

NOTE Confidence: 0.90845822

 $00:05:21.948 \longrightarrow 00:05:23.844$  tune of 30 to 40 arousals per hour

NOTE Confidence: 0.90845822

 $00:05:23.844 \longrightarrow 00:05:25.866$  of sleep and also very importantly

NOTE Confidence: 0.90845822

 $00{:}05{:}25.866 \rightarrow 00{:}05{:}27.354$  patient perception of sleep.

NOTE Confidence: 0.90845822

 $00:05:27.360 \longrightarrow 00:05:29.047$  And so there is this real disconnect

NOTE Confidence: 0.90845822

 $00:05:29.047 \longrightarrow 00:05:31.008$  between what we can measure with our

NOTE Confidence: 0.90845822

 $00:05:31.008 \longrightarrow 00:05:32.790$  objective tools and what patients perceive,

NOTE Confidence: 0.90845822

 $00:05:32.790 \longrightarrow 00:05:34.270$  and both of those.

NOTE Confidence: 0.90845822

 $00{:}05{:}34.270 \dashrightarrow 00{:}05{:}36.490$  Entities can be linked to outcomes.

NOTE Confidence: 0.90845822

 $00:05:36.490 \longrightarrow 00:05:38.706$  We also know that sleep timing is an

NOTE Confidence: 0.90845822

00:05:38.706 --> 00:05:40.410 important part of sleep deficiency,

NOTE Confidence: 0.90845822

 $00{:}05{:}40.410 \dashrightarrow 00{:}05{:}42.288$  and in this case we're talking

NOTE Confidence: 0.90845822

 $00{:}05{:}42.288 \dashrightarrow 00{:}05{:}44.253$  about sleep that does not occur

NOTE Confidence: 0.90845822

 $00:05:44.253 \longrightarrow 00:05:45.878$  during the biological night or

 $00:05:45.878 \longrightarrow 00:05:47.999$  the time that melatonin is high.

NOTE Confidence: 0.90845822

 $00{:}05{:}48.000 \dashrightarrow 00{:}05{:}49.416$  Try to keep that term consistent.

NOTE Confidence: 0.90845822

 $00:05:49.420 \longrightarrow 00:05:51.120$  I sometimes call that circadian

NOTE Confidence: 0.90845822

 $00:05:51.120 \longrightarrow 00:05:52.140$  night as well,

NOTE Confidence: 0.90845822

 $00{:}05{:}52.140 \dashrightarrow 00{:}05{:}54.138$  and So what I mean and that is the

NOTE Confidence: 0.90845822

 $00:05:54.138 \longrightarrow 00:05:55.882$  time that melatonin is high and

NOTE Confidence: 0.90845822

 $00:05:55.882 \longrightarrow 00:05:57.931$  that your body is really cute to

NOTE Confidence: 0.90845822

 $00:05:57.931 \longrightarrow 00:05:59.793$  be sleeping and also in and sleep.

NOTE Confidence: 0.90845822

 $00{:}05{:}59.800 \dashrightarrow 00{:}06{:}02.240$  Deficiency is some aspect of

NOTE Confidence: 0.90845822

 $00:06:02.240 \longrightarrow 00:06:03.698$  daytime function I think.

NOTE Confidence: 0.90845822

 $00{:}06{:}03.698 \dashrightarrow 00{:}06{:}05.610$  For the ICU I most readily think of

NOTE Confidence: 0.90845822

 $00:06:05.670 \longrightarrow 00:06:07.630$  things like alertness and cognition.

NOTE Confidence: 0.90845822

 $00:06:07.630 \longrightarrow 00:06:09.196$  This can be more expanded in

NOTE Confidence: 0.90845822

 $00{:}06{:}09.196 \dashrightarrow 00{:}06{:}10.465$  the outpatient setting and all

NOTE Confidence: 0.90845822

 $00:06:10.465 \longrightarrow 00:06:11.817$  of us are most of us are or.

NOTE Confidence: 0.90845822

00:06:11.820 --> 00:06:12.071 Sorry,

00:06:12.071 --> 00:06:14.079 I'm sure many of us are familiar with

NOTE Confidence: 0.90845822

 $00{:}06{:}14.079 \dashrightarrow 00{:}06{:}16.065$  the many cognitive domains that have

NOTE Confidence: 0.90845822

 $00:06:16.065 \longrightarrow 00:06:18.010$  been tested in sleep deficiency and.

NOTE Confidence: 0.90845822

 $00:06:18.010 \longrightarrow 00:06:20.131$  And how those can be impacted by

NOTE Confidence: 0.90845822

00:06:20.131 --> 00:06:22.329 short sleep or slow sleep quality?

NOTE Confidence: 0.90845822

 $00:06:22.330 \longrightarrow 00:06:24.286$  I think it's important at this

NOTE Confidence: 0.90845822

 $00:06:24.286 \longrightarrow 00:06:26.683$  juncture to to say that we really

NOTE Confidence: 0.90845822

00:06:26.683 --> 00:06:28.388 don't know what is normal,

NOTE Confidence: 0.90845822

 $00:06:28.390 \longrightarrow 00:06:30.442$  and therefore it's very hard to

NOTE Confidence: 0.90845822

 $00:06:30.442 \longrightarrow 00:06:32.110$  define what is abnormally ICU.

NOTE Confidence: 0.90845822

00:06:32.110 --> 00:06:34.385 There is some consideration that

NOTE Confidence: 0.90845822

 $00:06:34.385 \longrightarrow 00:06:36.205$  especially disruptions in circadian

NOTE Confidence: 0.90845822

 $00{:}06{:}36.205 \dashrightarrow 00{:}06{:}39.094$ rhythm might both be an innate aspect of

NOTE Confidence: 0.90845822

00:06:39.094 --> 00:06:41.208 acute critical illness and brain injury,

NOTE Confidence: 0.90845822

 $00:06:41.210 \longrightarrow 00:06:42.342$  as might sleep disruptions,

 $00:06:42.342 \longrightarrow 00:06:44.968$  but also that some of it may be adaptive.

NOTE Confidence: 0.90845822 00:06:44.970 --> 00:06:45.233 So, NOTE Confidence: 0.90845822

 $00:06:45.233 \longrightarrow 00:06:45.759$  for example,

NOTE Confidence: 0.90845822

 $00:06:45.759 \longrightarrow 00:06:48.030$  it may be that loss of circadian rhythmicity

NOTE Confidence: 0.90845822

 $00:06:48.030 \longrightarrow 00:06:50.620$  is in fact adaptive during acute infection.

NOTE Confidence: 0.90845822

 $00{:}06{:}50.620 \dashrightarrow 00{:}06{:}52.684$  There is very little evidence in this regard.

NOTE Confidence: 0.90845822

 $00:06:52.690 \longrightarrow 00:06:55.330$  It really is not known.

NOTE Confidence: 0.889279159166667

 $00:06:55.330 \longrightarrow 00:06:58.046$  But I share with you really this

NOTE Confidence: 0.889279159166667

 $00{:}06{:}58.046 \dashrightarrow 00{:}06{:}59.980$  fundamental question of the field.

NOTE Confidence: 0.889279159166667

 $00:06:59.980 \longrightarrow 00:07:00.990$  But I think there is.

NOTE Confidence: 0.889279159166667

 $00:07:00.990 \longrightarrow 00:07:01.846$  On the flip side,

NOTE Confidence: 0.889279159166667

 $00:07:01.846 \longrightarrow 00:07:03.527$  a sense that we know acute sleep

NOTE Confidence: 0.889279159166667

 $00:07:03.527 \longrightarrow 00:07:05.267$  deprivation can be quite detrimental,

NOTE Confidence: 0.889279159166667

 $00:07:05.270 \longrightarrow 00:07:06.662$  and while some of this might

NOTE Confidence: 0.889279159166667

 $00:07:06.662 \longrightarrow 00:07:08.010$  be innate to critical illness,

NOTE Confidence: 0.889279159166667

 $00:07:08.010 \longrightarrow 00:07:10.539$  it can't possibly be good to be waking our

 $00:07:10.539 \longrightarrow 00:07:12.805$  patients up purposely several times an hour,

NOTE Confidence: 0.889279159166667

 $00:07:12.810 \longrightarrow 00:07:14.928$  and so there's a balance there,

NOTE Confidence: 0.889279159166667

 $00:07:14.930 \longrightarrow 00:07:16.298$  and a lot to be untangled.

NOTE Confidence: 0.889279159166667

00:07:16.300 --> 00:07:18.160 But that's the context that

NOTE Confidence: 0.889279159166667

00:07:18.160 --> 00:07:19.648 we're working in today.

NOTE Confidence: 0.889279159166667

 $00:07:19.650 \longrightarrow 00:07:22.274$  We know, so that was a general description

NOTE Confidence: 0.889279159166667

 $00:07:22.274 \longrightarrow 00:07:24.879$  of the domains of sleep deficiency.

NOTE Confidence: 0.889279159166667

 $00{:}07{:}24.880 \to 00{:}07{:}27.136$  We know when the ICU that patients in

NOTE Confidence: 0.889279159166667

 $00:07:27.136 \longrightarrow 00:07:29.178$  general have a shorter sleep duration,

NOTE Confidence: 0.889279159166667

 $00:07:29.180 \longrightarrow 00:07:31.756$  and even if their duration approaches normal,

NOTE Confidence: 0.889279159166667

 $00:07:31.760 \longrightarrow 00:07:34.854$  it does not occur occur in a

NOTE Confidence: 0.889279159166667

 $00:07:34.854 \longrightarrow 00:07:37.225$  consolidated time or generally considered

NOTE Confidence: 0.889279159166667

 $00{:}07{:}37.225 \dashrightarrow 00{:}07{:}40.195$  occurs across the 24 hour period.

NOTE Confidence: 0.889279159166667

 $00:07:40.200 \longrightarrow 00:07:41.935$  We also know that patients

NOTE Confidence: 0.889279159166667

 $00:07:41.935 \longrightarrow 00:07:43.323$  have problems initiating sleep.

 $00:07:43.330 \longrightarrow 00:07:45.385$  They have the increased number

NOTE Confidence: 0.889279159166667

 $00{:}07{:}45.385 \dashrightarrow 00{:}07{:}47.440$  of arousals that I mentioned

NOTE Confidence: 0.889279159166667

 $00{:}07{:}47.511 \dashrightarrow 00{:}07{:}49.809$  decrease REM and slow wave sleep.

NOTE Confidence: 0.889279159166667

00:07:49.810 --> 00:07:50.882 Sleep occurs equally during

NOTE Confidence: 0.889279159166667

 $00:07:50.882 \longrightarrow 00:07:51.954$  the day and night.

NOTE Confidence: 0.889279159166667

00:07:51.960 --> 00:07:53.316 So while patients maybe get get

NOTE Confidence: 0.889279159166667

00:07:53.316 --> 00:07:54.919 six or even in some studies,

NOTE Confidence: 0.889279159166667

00:07:54.920 --> 00:07:55.996 7 hours of sleep,

NOTE Confidence: 0.889279159166667

00:07:55.996 --> 00:07:57.956 they're getting three or four at night

NOTE Confidence: 0.889279159166667

 $00:07:57.956 \longrightarrow 00:07:59.937$  and three or four during the daytime

NOTE Confidence: 0.889279159166667

00:07:59.940 --> 00:08:02.796 and we daytime function is also abnormal,

NOTE Confidence: 0.889279159166667

 $00:08:02.800 \longrightarrow 00:08:06.050$  and I think all of all of those who have.

NOTE Confidence: 0.889279159166667

 $00:08:06.050 \longrightarrow 00:08:08.745$  Being providers in the ICU or who

NOTE Confidence: 0.889279159166667

 $00{:}08{:}08.745 \dashrightarrow 00{:}08{:}11.153$  have visited friends or family in the

NOTE Confidence: 0.889279159166667

00:08:11.153 --> 00:08:13.840 ICU can see that this is quite clear.

NOTE Confidence: 0.889279159166667

 $00:08:13.840 \longrightarrow 00:08:17.000$  We also know that.

 $00:08:17.000 \longrightarrow 00:08:19.430$  ICU patients are generally have a

NOTE Confidence: 0.889279159166667

 $00:08:19.430 \longrightarrow 00:08:21.444$  delayed phase of circadian alignment

NOTE Confidence: 0.889279159166667

 $00:08:21.444 \longrightarrow 00:08:24.036$  and this is a very nice early study

NOTE Confidence: 0.889279159166667

00:08:24.036 --> 00:08:26.319 by Brian Gehlbach and his group

NOTE Confidence: 0.889279159166667

 $00{:}08{:}26.320 \dashrightarrow 00{:}08{:}28.602$  and what he has demonstrated for us

NOTE Confidence: 0.889279159166667

 $00:08:28.602 \longrightarrow 00:08:31.150$  here is is really just a simple.

NOTE Confidence: 0.889279159166667

 $00:08:31.150 \longrightarrow 00:08:32.806$  Illustration of alignment and so on.

NOTE Confidence: 0.889279159166667

 $00:08:32.810 \longrightarrow 00:08:35.848$  The X axis he's placed clock time.

NOTE Confidence: 0.889279159166667

 $00{:}08{:}35.850 --> 00{:}08{:}37.810$  He started in the evening at 1800

NOTE Confidence: 0.889279159166667

 $00{:}08{:}37.810 \dashrightarrow 00{:}08{:}39.670$  and then preceded to the next evening

NOTE Confidence: 0.889279159166667

 $00:08:39.670 \longrightarrow 00:08:41.458$  of 1800 and then in that solid

NOTE Confidence: 0.889279159166667

 $00:08:41.458 \longrightarrow 00:08:43.418$  black rectangle that you see at the

NOTE Confidence: 0.889279159166667

 $00{:}08{:}43.418 \dashrightarrow 00{:}08{:}45.856$  bottom of the screen with radiating

NOTE Confidence: 0.889279159166667

 $00:08:45.856 \longrightarrow 00:08:49.270$  dashed lines that I confess I added.

NOTE Confidence: 0.889279159166667

 $00:08:49.270 \longrightarrow 00:08:50.817$  He has just drawn and what he

00:08:50.817 --> 00:08:52.510 thinks is a normal sleep time,

NOTE Confidence: 0.889279159166667

 $00{:}08{:}52.510 --> 00{:}08{:}54.400$  and so he's trying to Orient

NOTE Confidence: 0.889279159166667

 $00:08:54.400 \longrightarrow 00:08:56.628$  us to when the sleep period,

NOTE Confidence: 0.889279159166667

 $00:08:56.628 \longrightarrow 00:08:59.232$  and also when the melatonin elevation should

NOTE Confidence: 0.889279159166667

 $00:08:59.232 \longrightarrow 00:09:01.350$  be or the biologic night as I called her.

NOTE Confidence: 0.889279159166667

 $00:09:01.350 \longrightarrow 00:09:02.582$  Earlier in this talk,

NOTE Confidence: 0.889279159166667

 $00:09:02.582 \longrightarrow 00:09:04.430$  and then each of these striped

NOTE Confidence: 0.889279159166667

 $00{:}09{:}04.497 \dashrightarrow 00{:}09{:}06.420$  record rectangles represents a

NOTE Confidence: 0.889279159166667

 $00{:}09{:}06.420 \dashrightarrow 00{:}09{:}07.720$  subject that he took urinary,

NOTE Confidence: 0.88927915916666700:09:07.720 --> 00:09:08.060 excel,

NOTE Confidence: 0.889279159166667

00:09:08.060 --> 00:09:08.400 photography,

NOTE Confidence: 0.889279159166667

 $00:09:08.400 \longrightarrow 00:09:10.440$  melatonin and made an estimate of

NOTE Confidence: 0.889279159166667

 $00:09:10.440 \longrightarrow 00:09:12.388$  when their biologic night would be

NOTE Confidence: 0.889279159166667

 $00:09:12.388 \longrightarrow 00:09:14.206$  when their time of high melatonin

NOTE Confidence: 0.889279159166667

00:09:14.259 --> 00:09:15.981 would be and what he's illustrating

NOTE Confidence: 0.889279159166667

 $00:09:15.981 \longrightarrow 00:09:17.880$  and then excuse me and then he

 $00:09:17.880 \longrightarrow 00:09:19.630$  put him in in order of estimated

NOTE Confidence: 0.889279159166667

 $00:09:19.691 \longrightarrow 00:09:21.167$  dim light melatonin onset.

NOTE Confidence: 0.889279159166667

 $00:09:21.170 \longrightarrow 00:09:23.450$  So what he's illustrating really is

NOTE Confidence: 0.889279159166667

 $00:09:23.450 \longrightarrow 00:09:26.063$  that these bottom two individuals are

NOTE Confidence: 0.889279159166667

 $00:09:26.063 \longrightarrow 00:09:29.117$  perhaps slightly advanced compared to normal.

NOTE Confidence: 0.889279159166667

 $00:09:29.120 \longrightarrow 00:09:30.290$  The next few,

NOTE Confidence: 0.889279159166667

 $00:09:30.290 \longrightarrow 00:09:32.240$  the next two or three.

NOTE Confidence: 0.889279159166667

00:09:32.240 --> 00:09:34.310 Maybe four if you're generous,

NOTE Confidence: 0.889279159166667

 $00:09:34.310 \longrightarrow 00:09:35.288$  are normally aligned,

NOTE Confidence: 0.889279159166667

 $00{:}09{:}35.288 \dashrightarrow 00{:}09{:}37.570$  and they have a dim light melatonin

NOTE Confidence: 0.889279159166667

00:09:37.628 --> 00:09:39.784 onset not too far away from that

NOTE Confidence: 0.889279159166667

 $00:09:39.784 \longrightarrow 00:09:41.060$  first vertical dashed line,

NOTE Confidence: 0.889279159166667

 $00:09:41.060 \longrightarrow 00:09:42.608$  but then the remainder of the

NOTE Confidence: 0.889279159166667

 $00{:}09{:}42.608 \dashrightarrow 00{:}09{:}44.507$  subjects as you go up further on

NOTE Confidence: 0.889279159166667

 $00:09:44.507 \longrightarrow 00:09:46.390$  the graph are really delayed all the

 $00:09:46.447 \longrightarrow 00:09:47.737$  way to the last subject,

NOTE Confidence: 0.9081542956

00:09:47.740 --> 00:09:49.588 who is almost eight or nine hours delayed.

NOTE Confidence: 0.9081542956

 $00:09:49.590 \longrightarrow 00:09:52.803$  And So what he's trying to convey is the

NOTE Confidence: 0.9081542956

 $00:09:52.803 \longrightarrow 00:09:55.647$  spectrum of of circadian alignment in ICU.

NOTE Confidence: 0.9081542956

 $00:09:55.650 \longrightarrow 00:09:57.938$  In this small study, and also to demonstrate,

NOTE Confidence: 0.9081542956

 $00:09:57.940 \longrightarrow 00:10:00.040$  as I said at the start of this slide that

NOTE Confidence: 0.9081542956

 $00:10:00.096 \longrightarrow 00:10:02.144$  most patients in the ICU have a delayed.

NOTE Confidence: 0.9081542956

 $00:10:02.150 \longrightarrow 00:10:04.326$  Phenotype and this makes a lot of sense

NOTE Confidence: 0.9081542956

 $00:10:04.326 \longrightarrow 00:10:06.805$  when you think about the light patterns and

NOTE Confidence: 0.9081542956

 $00:10:06.805 \longrightarrow 00:10:09.644$  exposures in the ICU in the fact that it is

NOTE Confidence: 0.9081542956

 $00:10:09.644 \longrightarrow 00:10:13.070$  easier to delay humans in circadian phase.

NOTE Confidence: 0.9081542956

 $00:10:13.070 \longrightarrow 00:10:15.135$  This is another study done by Kyle

NOTE Confidence: 0.9081542956

 $00:10:15.135 \longrightarrow 00:10:17.409$  goes in them at all these studies.

NOTE Confidence: 0.9081542956

 $00:10:17.410 \longrightarrow 00:10:19.795$  Patients have been in the ICU for quite a

NOTE Confidence: 0.9081542956

00:10:19.795 --> 00:10:22.235 bit of time on average of 20 or 30 days,

NOTE Confidence: 0.9081542956

 $00{:}10{:}22.240 \dashrightarrow 00{:}10{:}24.578$  but they looked at core body temperature

 $00:10:24.578 \longrightarrow 00:10:27.381$  and so I've just have a descriptive table

NOTE Confidence: 0.9081542956

 $00{:}10{:}27.381 \dashrightarrow 00{:}10{:}30.221$  here on the left telling you a little

NOTE Confidence: 0.9081542956

 $00:10:30.221 \longrightarrow 00:10:32.650$  bit about the patients whose 21 subjects.

NOTE Confidence: 0.9081542956

 $00:10:32.650 \longrightarrow 00:10:33.776$  They were.

NOTE Confidence: 0.9081542956

00:10:33.776 --> 00:10:38.280 About roughly half and Half Men and women,

NOTE Confidence: 0.9081542956

 $00:10:38.280 \longrightarrow 00:10:40.450$  they were in their 60s.

NOTE Confidence: 0.9081542956

 $00:10:40.450 \longrightarrow 00:10:44.546$  They had a Apache three score around 49.

NOTE Confidence: 0.9081542956

 $00:10:44.550 \longrightarrow 00:10:46.080$  And at the bottom here,

NOTE Confidence: 0.9081542956

 $00:10:46.080 \longrightarrow 00:10:48.061$  the first day of core body temperature

NOTE Confidence: 0.9081542956

 $00{:}10{:}48.061 \dashrightarrow 00{:}10{:}49.589$  recording was an average day.

NOTE Confidence: 0.9081542956

 $00:10:49.590 \longrightarrow 00:10:50.550$  Twenty of their admission.

NOTE Confidence: 0.9081542956

 $00:10:50.550 \longrightarrow 00:10:52.672$  So a bit of a different population from

NOTE Confidence: 0.9081542956

 $00:10:52.672 \longrightarrow 00:10:54.550$  with Doctor Gehlbach shared with us.

NOTE Confidence: 0.9081542956

00:10:54.550 --> 00:10:56.405 But what they show on this right

NOTE Confidence: 0.9081542956

 $00:10:56.405 \longrightarrow 00:10:58.319$  hand panel that I've included is

00:10:58.319 --> 00:11:01.031 that on the X axis is the Apache

NOTE Confidence: 0.9081542956

00:11:01.031 --> 00:11:03.250 Three score 0 being low acuity,

NOTE Confidence: 0.9081542956

 $00:11:03.250 \longrightarrow 00:11:05.320$  low severity of illness and 100

NOTE Confidence: 0.9081542956

00:11:05.397 --> 00:11:07.497 being high severity of illness.

NOTE Confidence: 0.9081542956

 $00:11:07.500 \longrightarrow 00:11:09.804$  And then on the Y axis degree of

NOTE Confidence: 0.9081542956

00:11:09.804 --> 00:11:11.225 circadian displacement in hours and

NOTE Confidence: 0.9081542956

00:11:11.225 --> 00:11:12.797 what the authors want to impress

NOTE Confidence: 0.9081542956

00:11:12.797 --> 00:11:14.688 upon you is that the more severely.

NOTE Confidence: 0.9081542956

 $00{:}11{:}14.690 \mathrel{--}{>} 00{:}11{:}16.840$  Our patients have much more

NOTE Confidence: 0.9081542956

00:11:16.840 --> 00:11:17.700 circadian displacement,

NOTE Confidence: 0.9081542956

 $00:11:17.700 \longrightarrow 00:11:20.948$  so this attempt to to look together at

NOTE Confidence: 0.9081542956

 $00:11:20.948 \longrightarrow 00:11:23.893$  how circadian delay may be associated

NOTE Confidence: 0.9081542956

 $00:11:23.893 \longrightarrow 00:11:26.453$  with increased severity of illness.

NOTE Confidence: 0.9081542956

00:11:26.460 --> 00:11:27.376 And since that time,

NOTE Confidence: 0.9081542956

 $00:11:27.376 \longrightarrow 00:11:29.180$  these are two of the earlier studies.

NOTE Confidence: 0.9081542956

 $00{:}11{:}29.180 \dashrightarrow 00{:}11{:}31.598$  There's there's been a fair amount

00:11:31.600 --> 00:11:32.985 of work really demonstrating that

NOTE Confidence: 0.9081542956

00:11:32.985 --> 00:11:35.099 in a wide variety of ICU patients.

NOTE Confidence: 0.9081542956

00:11:35.100 --> 00:11:36.600 Neurologic, critical illness,

NOTE Confidence: 0.9081542956

00:11:36.600 --> 00:11:38.100 surgical critical illness,

NOTE Confidence: 0.9081542956

 $00:11:38.100 \longrightarrow 00:11:39.324$  medical critical illness,

NOTE Confidence: 0.9081542956

 $00:11:39.324 \longrightarrow 00:11:41.772$  that there is considerable loss of

NOTE Confidence: 0.9081542956

00:11:41.772 --> 00:11:43.468 circadian amplitude and rhythm,

NOTE Confidence: 0.9081542956

 $00:11:43.470 \longrightarrow 00:11:46.880$  but also delay and misalignments.

NOTE Confidence: 0.9081542956

00:11:46.880 --> 00:11:48.700 I included this slide just to remind

NOTE Confidence: 0.9081542956

 $00{:}11{:}48.700 \dashrightarrow 00{:}11{:}50.714$  us of the fundamentals of the two

NOTE Confidence: 0.9081542956

00:11:50.714 --> 00:11:53.043 process model and so this is a cartoon

NOTE Confidence: 0.9081542956

 $00:11:53.043 \longrightarrow 00:11:54.821$  along the again along the X axis

NOTE Confidence: 0.9081542956

 $00{:}11{:}54.821 \dashrightarrow 00{:}11{:}56.844$  is time starting the even boxes we

NOTE Confidence: 0.9081542956

 $00:11:56.844 \longrightarrow 00:11:58.725$  starting in the morning going into

NOTE Confidence: 0.9081542956

 $00:11:58.725 \longrightarrow 00:12:00.651$  the evening and then double plotted

 $00:12:00.651 \longrightarrow 00:12:03.360$  so repetition we have the homeostatic

NOTE Confidence: 0.9081542956

00:12:03.360 --> 00:12:06.450 sleep drive in purple coming up,

NOTE Confidence: 0.9081542956

00:12:06.450 --> 00:12:09.012 peaking right at bedtime and then

NOTE Confidence: 0.9081542956

 $00:12:09.012 \longrightarrow 00:12:11.262$  decreasing during the the illustrated

NOTE Confidence: 0.9081542956

 $00:12:11.262 \longrightarrow 00:12:14.082$  period of this patient sleep and

NOTE Confidence: 0.9081542956

 $00:12:14.082 \longrightarrow 00:12:16.508$  then underlying that we also have.

NOTE Confidence: 0.9081542956

 $00{:}12{:}16.510 \dashrightarrow 00{:}12{:}19.550$  Process see the circadian process

NOTE Confidence: 0.9081542956

 $00:12:19.550 \longrightarrow 00:12:21.539$  and the reason I like to see the two

NOTE Confidence: 0.9081542956

 $00{:}12{:}21.539 \dashrightarrow 00{:}12{:}22.822$  process model in this illustrated

NOTE Confidence: 0.9081542956

00:12:22.822 --> 00:12:24.707 way is that I can really imagine

NOTE Confidence: 0.9081542956

 $00:12:24.707 \longrightarrow 00:12:26.621$  that this arousal drive from the

NOTE Confidence: 0.9081542956

 $00{:}12{:}26.621 \dashrightarrow 00{:}12{:}28.286$  circadian system is tagging along

NOTE Confidence: 0.9081542956

 $00:12:28.286 \longrightarrow 00:12:30.338$  with a homeostatic drive and fighting

NOTE Confidence: 0.9081542956

 $00:12:30.338 \longrightarrow 00:12:32.574$  it all along the day so that there's

NOTE Confidence: 0.9081542956

 $00:12:32.574 \longrightarrow 00:12:34.450$  no sense of sleep pressure or no

NOTE Confidence: 0.9081542956

 $00:12:34.511 \longrightarrow 00:12:35.627$  gap between the two.

 $00:12:35.630 \longrightarrow 00:12:38.246$  And it's not until the circadian

NOTE Confidence: 0.9081542956

 $00:12:38.246 \longrightarrow 00:12:39.990$  system cycles off close

NOTE Confidence: 0.871034260769231

00:12:40.077 --> 00:12:42.660 to habitual bedtime at that dim light

NOTE Confidence: 0.871034260769231

 $00:12:42.660 \longrightarrow 00:12:44.900$  melatonin onset that you lose that alertness,

NOTE Confidence: 0.871034260769231

 $00:12:44.900 \longrightarrow 00:12:45.980$  and all of a sudden there's

NOTE Confidence: 0.871034260769231

 $00:12:45.980 \longrightarrow 00:12:46.700$  this very big difference.

NOTE Confidence: 0.871034260769231

 $00:12:46.700 \longrightarrow 00:12:48.840$  Between homeostatic Dr and circadian

NOTE Confidence: 0.871034260769231

 $00:12:48.840 \longrightarrow 00:12:51.508$  driving that that creates an opportunity

NOTE Confidence: 0.871034260769231

 $00{:}12{:}51.508 \dashrightarrow 00{:}12{:}54.182$  for sleep and what I really want to

NOTE Confidence: 0.871034260769231

 $00:12:54.182 \longrightarrow 00:12:56.640$  say here is that in the ICU it is

NOTE Confidence: 0.871034260769231

 $00:12:56.640 \longrightarrow 00:12:58.200$  very difficult to predict when when

NOTE Confidence: 0.871034260769231

00:12:58.200 --> 00:13:00.013 this is happening because it's very

NOTE Confidence: 0.871034260769231

 $00{:}13{:}00.013 \dashrightarrow 00{:}13{:}02.234$  difficult to know in real time with

NOTE Confidence: 0.871034260769231

 $00{:}13{:}02.234 \dashrightarrow 00{:}13{:}04.118$  the person circadian phases and it's

NOTE Confidence: 0.871034260769231

 $00:13:04.118 \longrightarrow 00:13:06.244$  therefore hard to know when to promote

 $00:13:06.244 \longrightarrow 00:13:08.020$  sleep and it's also therefore hard

NOTE Confidence: 0.871034260769231

 $00{:}13{:}08.077 \dashrightarrow 00{:}13{:}09.979$  to coordinate a number of biologic

NOTE Confidence: 0.871034260769231

 $00:13:09.979 \longrightarrow 00:13:11.869$  functions such as eating and exercise

NOTE Confidence: 0.871034260769231

 $00{:}13{:}11.869 \dashrightarrow 00{:}13{:}13.829$  that will talk about a little bit

NOTE Confidence: 0.871034260769231

 $00:13:13.829 \longrightarrow 00:13:16.375$  later and make these things happen

NOTE Confidence: 0.871034260769231

 $00:13:16.375 \longrightarrow 00:13:18.640$  during the right biologic time.

NOTE Confidence: 0.871034260769231

00:13:18.640 --> 00:13:21.588 And finally, you know,

NOTE Confidence: 0.871034260769231

00:13:21.588 --> 00:13:24.110 I I show this slide often in my talks.

NOTE Confidence: 0.871034260769231

 $00:13:24.110 \longrightarrow 00:13:25.881$  Just a reminder at the things that

NOTE Confidence: 0.871034260769231

00:13:25.881 --> 00:13:27.843 drive the circadian system and so the

NOTE Confidence: 0.871034260769231

 $00{:}13{:}27.843 \dashrightarrow 00{:}13{:}29.278$  site gamers are incredibly important,

NOTE Confidence: 0.871034260769231

 $00:13:29.280 \longrightarrow 00:13:31.194$  and so inasmuch as circadian health

NOTE Confidence: 0.871034260769231

00:13:31.194 --> 00:13:32.920 is important for sleep health,

NOTE Confidence: 0.871034260769231

 $00:13:32.920 \longrightarrow 00:13:34.128$  azeite keepers are important

NOTE Confidence: 0.871034260769231

 $00:13:34.128 \longrightarrow 00:13:35.034$  for circadian health.

NOTE Confidence: 0.871034260769231

 $00:13:35.040 \longrightarrow 00:13:36.696$  And we know that light is the primary side.

 $00:13:36.700 \longrightarrow 00:13:38.600$  Gave are traveling in the

NOTE Confidence: 0.871034260769231

 $00:13:38.600 \longrightarrow 00:13:40.500$  eye to the master clock.

NOTE Confidence: 0.871034260769231

 $00:13:40.500 \longrightarrow 00:13:42.505$  The central clock that then

NOTE Confidence: 0.871034260769231

00:13:42.505 --> 00:13:43.708 promotes synchronization across

NOTE Confidence: 0.871034260769231

00:13:43.708 --> 00:13:45.609 the bodies peripheral clocks,

NOTE Confidence: 0.871034260769231

 $00:13:45.610 \longrightarrow 00:13:47.647$  but also that there are non voting

NOTE Confidence: 0.871034260769231

 $00:13:47.647 \longrightarrow 00:13:49.494$  site cavers. Or sleep wake itself.

NOTE Confidence: 0.871034260769231

 $00:13:49.494 \longrightarrow 00:13:50.126$  Physical activity,

NOTE Confidence: 0.871034260769231

 $00:13:50.130 \longrightarrow 00:13:52.120$  social time and meals that

NOTE Confidence: 0.871034260769231

 $00:13:52.120 \longrightarrow 00:13:53.314$  are very important.

NOTE Confidence: 0.871034260769231

 $00:13:53.320 \longrightarrow 00:13:55.156$  And with all of that said,

NOTE Confidence: 0.871034260769231

 $00:13:55.160 \longrightarrow 00:13:56.651$  I don't think it's very surprising that

NOTE Confidence: 0.871034260769231

 $00{:}13{:}56.651 \dashrightarrow 00{:}13{:}58.218$  we have sleep deficiency in the ICU.

NOTE Confidence: 0.871034260769231

 $00{:}13{:}58.220 {\:{\circ}{\circ}{\circ}}>00{:}14{:}01.156$  We have a real lack of sleep opportunity.

NOTE Confidence: 0.871034260769231

00:14:01.160 --> 00:14:03.128 We have incredible interruptions,

00:14:03.128 --> 00:14:05.580 sound, light.

NOTE Confidence: 0.871034260769231

 $00:14:05.580 \longrightarrow 00:14:08.296$  Painful stimuli lab draws and so on,

NOTE Confidence: 0.871034260769231

 $00:14:08.300 \longrightarrow 00:14:10.708$  but we also have all these abnormal

NOTE Confidence: 0.871034260769231

 $00:14:10.708 \longrightarrow 00:14:12.762$  side keepers feeding light exposures.

NOTE Confidence: 0.871034260769231

00:14:12.762 --> 00:14:15.828 This particular picture that is not

NOTE Confidence: 0.871034260769231

00:14:15.828 --> 00:14:18.840 our ICU notably doesn't have a windows.

NOTE Confidence: 0.871034260769231

00:14:18.840 --> 00:14:20.420 There's no natural sunlight even,

NOTE Confidence: 0.871034260769231

 $00:14:20.420 \longrightarrow 00:14:22.208$  and so it's not something that

NOTE Confidence: 0.871034260769231

 $00:14:22.210 \longrightarrow 00:14:23.798$  that is counter intuitive.

NOTE Confidence: 0.871034260769231

00:14:23.798 --> 00:14:26.627 But there's a lot of opportunity here

NOTE Confidence: 0.871034260769231

 $00{:}14{:}26.627 \dashrightarrow 00{:}14{:}28.877$  to improve sleep for our patients.

NOTE Confidence: 0.871034260769231

 $00:14:28.880 \longrightarrow 00:14:30.880$  And so I'll circle back to a case.

NOTE Confidence: 0.871034260769231

 $00:14:30.880 \longrightarrow 00:14:31.554$  And again,

NOTE Confidence: 0.871034260769231

 $00{:}14{:}31.554 \dashrightarrow 00{:}14{:}34.250$  this is a case that I have presented

NOTE Confidence: 0.871034260769231

 $00:14:34.330 \longrightarrow 00:14:36.548$  quite a bit in my talks and I

NOTE Confidence: 0.871034260769231

 $00:14:36.548 \longrightarrow 00:14:37.660$  remember this patient distinctly.

 $00:14:37.660 \longrightarrow 00:14:39.403$  He was one of the first patients

NOTE Confidence: 0.871034260769231

 $00:14:39.403 \longrightarrow 00:14:40.699$  I enrolled as a fellow,

NOTE Confidence: 0.871034260769231

 $00:14:40.700 \longrightarrow 00:14:42.527$  but I think his story tells so

NOTE Confidence: 0.871034260769231

 $00:14:42.527 \longrightarrow 00:14:44.623$  many so many of the lessons of

NOTE Confidence: 0.871034260769231

00:14:44.623 --> 00:14:46.178 sleep deficiency in the ICU.

NOTE Confidence: 0.871034260769231

 $00:14:46.180 \longrightarrow 00:14:48.076$  So he was an elderly gentleman.

NOTE Confidence: 0.871034260769231

 $00:14:48.080 \longrightarrow 00:14:49.480$  He came in with a critical care.

NOTE Confidence: 0.871034260769231

00:14:49.480 --> 00:14:51.168 Chief complaint of Shock

NOTE Confidence: 0.871034260769231

 $00:14:51.168 \longrightarrow 00:14:52.434$  and respiratory failure.

NOTE Confidence: 0.871034260769231

 $00:14:52.440 \longrightarrow 00:14:54.757$  He presented to the emergency room because

NOTE Confidence: 0.871034260769231

 $00:14:54.757 \longrightarrow 00:14:57.238$  of an altered mental status and fever.

NOTE Confidence: 0.871034260769231

 $00:14:57.240 \longrightarrow 00:14:58.250$  His evaluation.

NOTE Confidence: 0.871034260769231

 $00:14:58.250 \longrightarrow 00:15:00.270$  Was not super abnormal.

NOTE Confidence: 0.871034260769231

 $00:15:00.270 \dashrightarrow 00:15:01.886$  It showed that he had low blood pressure.

NOTE Confidence: 0.871034260769231

 $00:15:01.890 \longrightarrow 00:15:04.802$  He did for some medical reasons have an

 $00:15:04.802 \longrightarrow 00:15:07.007$  indwelling Foley that there was clear

NOTE Confidence: 0.871034260769231

 $00{:}15{:}07.007 \dashrightarrow 00{:}15{:}09.096$  there was evidence not clear cloudy

NOTE Confidence: 0.871034260769231

00:15:09.096 --> 00:15:11.308 urine and also an elevated White County.

NOTE Confidence: 0.871034260769231

00:15:11.310 --> 00:15:13.800 A lactate in a positive urinalysis.

NOTE Confidence: 0.871034260769231

 $00:15:13.800 \longrightarrow 00:15:15.588$  Ultimately he was admitted to make

NOTE Confidence: 0.871034260769231

00:15:15.588 --> 00:15:17.520 you around 3:00 in the morning.

NOTE Confidence: 0.871034260769231

 $00{:}15{:}17.520 \dashrightarrow 00{:}15{:}19.626$  The team's assessment was at his

NOTE Confidence: 0.871034260769231

00:15:19.626 --> 00:15:22.129 euro sepsis and this was complicated

NOTE Confidence: 0.871034260769231

 $00:15:22.129 \longrightarrow 00:15:23.677$  by respiratory failure.

NOTE Confidence: 0.871034260769231

 $00:15:23.680 \longrightarrow 00:15:25.152$  He was mechanically ventilated.

NOTE Confidence: 0.871034260769231

00:15:25.152 --> 00:15:26.340 He went, unfortunately,

NOTE Confidence: 0.871034260769231

00:15:26.340 --> 00:15:28.140 required renal replacement basis,

NOTE Confidence: 0.871034260769231

00:15:28.140 --> 00:15:29.766 suppressor vasopressors,

NOTE Confidence: 0.871034260769231

 $00:15:29.766 \longrightarrow 00:15:31.392$  support antibiotics,

NOTE Confidence: 0.871034260769231

 $00:15:31.392 \longrightarrow 00:15:33.018$  continuous sedation,

NOTE Confidence: 0.911085258333333

 $00:15:33.020 \longrightarrow 00:15:34.325$  continues to feeding,

 $00:15:34.325 \longrightarrow 00:15:36.500$  and software Swiss wrist restraints

NOTE Confidence: 0.911085258333333

 $00:15:36.500 \longrightarrow 00:15:39.350$  out of concern that he would

NOTE Confidence: 0.911085258333333

 $00:15:39.350 \longrightarrow 00:15:41.254$  discontinue his medical equipment.

NOTE Confidence: 0.911085258333333

00:15:41.260 --> 00:15:43.040 His hospital course was notable

NOTE Confidence: 0.911085258333333

 $00:15:43.040 \longrightarrow 00:15:45.250$  for nursing reports of poor sleep.

NOTE Confidence: 0.911085258333333

 $00:15:45.250 \longrightarrow 00:15:46.438$  Family reports that the

NOTE Confidence: 0.911085258333333

00:15:46.438 --> 00:15:47.923 patient was sleeping all day,

NOTE Confidence: 0.911085258333333

 $00{:}15{:}47.930 \dashrightarrow 00{:}15{:}49.935$  delirium a delay mobility because

NOTE Confidence: 0.911085258333333

 $00:15:49.935 \longrightarrow 00:15:52.550$  of his medical severity of illness.

NOTE Confidence: 0.911085258333333

 $00:15:52.550 \longrightarrow 00:15:54.830$  He had a fib with RVR.

NOTE Confidence: 0.911085258333333

00:15:54.830 --> 00:15:57.605 Uhm, he had hyperglycemia prolonged

NOTE Confidence: 0.911085258333333

 $00{:}15{:}57.605 \dashrightarrow 00{:}15{:}59.270$  mechanical ventilation course

NOTE Confidence: 0.911085258333333

 $00{:}15{:}59.270 \mathrel{--}{>} 00{:}16{:}01.448$  and ultimately was discharged

NOTE Confidence: 0.911085258333333

 $00:16:01.448 \longrightarrow 00:16:03.436$  to skilled nursing facility.

NOTE Confidence: 0.911085258333333

 $00:16:03.440 \longrightarrow 00:16:05.792$  And often when I talk about

00:16:05.792 --> 00:16:07.750 sleep deficiency in the ICU,

NOTE Confidence: 0.911085258333333

 $00{:}16{:}07.750 \dashrightarrow 00{:}16{:}09.647$  my early work and I think I

NOTE Confidence: 0.911085258333333

00:16:09.647 --> 00:16:11.549 mean I agree a major target,

NOTE Confidence: 0.911085258333333

00:16:11.550 --> 00:16:14.198 a sleep efficiency in the ICU is delirium,

NOTE Confidence: 0.911085258333333

 $00:16:14.200 \longrightarrow 00:16:16.485$  and what what happens with

NOTE Confidence: 0.911085258333333

00:16:16.485 --> 00:16:18.313 sleep deficiency and cognition?

NOTE Confidence: 0.911085258333333

00:16:18.320 --> 00:16:20.448 But what I'd like to talk about today

NOTE Confidence: 0.911085258333333

 $00:16:20.448 \longrightarrow 00:16:22.424$  is some things that are that are

NOTE Confidence: 0.911085258333333

 $00:16:22.424 \longrightarrow 00:16:24.999$  important to us as ICU clinicians and are.

NOTE Confidence: 0.911085258333333

00:16:25.000 --> 00:16:26.800 Also probably related to sleep and

NOTE Confidence: 0.911085258333333

 $00{:}16{:}26.800 \dashrightarrow 00{:}16{:}28.250$  circadian disruption in the ICU,

NOTE Confidence: 0.911085258333333

 $00:16:28.250 \longrightarrow 00:16:30.482$  and so he also had delayed

NOTE Confidence: 0.911085258333333

00:16:30.482 --> 00:16:31.598 mobility atrial fibrillation,

NOTE Confidence: 0.911085258333333

00:16:31.600 --> 00:16:32.920 rapid ventricular response,

NOTE Confidence: 0.911085258333333

 $00:16:32.920 \longrightarrow 00:16:33.360$  hyperglycemia,

NOTE Confidence: 0.911085258333333

 $00:16:33.360 \longrightarrow 00:16:35.560$  the prolongation of his mechanical

 $00:16:35.560 \longrightarrow 00:16:37.439$  ventilation and was discharged to sniff.

NOTE Confidence: 0.911085258333333

00:16:37.440 --> 00:16:38.448 And I would argue,

NOTE Confidence: 0.911085258333333

 $00:16:38.448 \longrightarrow 00:16:40.657$  and my thesis for this talk that these

NOTE Confidence: 0.911085258333333

 $00:16:40.657 \longrightarrow 00:16:42.876$  are also related to his sleep deficiency.

NOTE Confidence: 0.911085258333333

00:16:42.880 --> 00:16:44.800 I certainly am not going to trip attribute

NOTE Confidence: 0.911085258333333

00:16:44.800 --> 00:16:46.557 all of this to sleep deficiency,

NOTE Confidence: 0.911085258333333

 $00:16:46.560 \longrightarrow 00:16:49.104$  but I do think there are some associations

NOTE Confidence: 0.911085258333333

 $00{:}16{:}49.104 \dashrightarrow 00{:}16{:}51.208$  here that we should keep in mind.

NOTE Confidence: 0.911085258333333

00:16:51.210 --> 00:16:53.406 So I'll end my background session

NOTE Confidence: 0.911085258333333

 $00{:}16{:}53.406 \dashrightarrow 00{:}16{:}55.921$  with would just touching on a little

NOTE Confidence: 0.911085258333333

 $00{:}16{:}55.921 \dashrightarrow 00{:}16{:}57.895$  bit of what's known about outcomes,

NOTE Confidence: 0.911085258333333

00:16:57.900 --> 00:17:00.196 and I'll pick the the ultimate MCU outcome,

NOTE Confidence: 0.911085258333333

 $00:17:00.200 \longrightarrow 00:17:01.223$  which is mortality.

NOTE Confidence: 0.911085258333333

 $00:17:01.223 \longrightarrow 00:17:03.960$  And still I have two studies that were

NOTE Confidence: 0.911085258333333

00:17:03.960 --> 00:17:06.142 done at Yale with my group showing

00:17:06.142 --> 00:17:08.502 that an association between sleep

NOTE Confidence: 0.911085258333333

 $00:17:08.502 \longrightarrow 00:17:10.816$  deficiency and and mortality in the hospital.

NOTE Confidence: 0.911085258333333

00:17:10.820 --> 00:17:12.512 The first we did meet significance

NOTE Confidence: 0.911085258333333

00:17:12.512 --> 00:17:14.533 and so I can formally say that

NOTE Confidence: 0.911085258333333

 $00:17:14.533 \longrightarrow 00:17:16.465$  the second I it was a trend.

NOTE Confidence: 0.911085258333333

00:17:16.470 --> 00:17:18.115 But I'll share with you that work

NOTE Confidence: 0.911085258333333

 $00:17:18.115 \longrightarrow 00:17:19.973$  and then we'll dive into some of the

NOTE Confidence: 0.911085258333333

00:17:19.973 --> 00:17:21.569 things that I think are going on.

NOTE Confidence: 0.911085258333333

 $00:17:21.570 \longrightarrow 00:17:24.405$  So first was a study of sleep loss and

NOTE Confidence: 0.911085258333333

00:17:24.405 --> 00:17:26.519 specifically abnormal sleep architecture,

NOTE Confidence: 0.911085258333333

 $00:17:26.520 \longrightarrow 00:17:28.644$  and this was a study in which I was

NOTE Confidence: 0.911085258333333

 $00:17:28.644 \longrightarrow 00:17:30.412$  assessing patients for what is called

NOTE Confidence: 0.911085258333333

 $00:17:30.412 \longrightarrow 00:17:32.347$  atypical sleep and then make you the

NOTE Confidence: 0.911085258333333

00:17:32.347 --> 00:17:34.076 most cardinal feature of which is a

NOTE Confidence: 0.911085258333333

00:17:34.076 --> 00:17:36.150 loss of stage and two sleep features,

NOTE Confidence: 0.911085258333333

 $00:17:36.150 \longrightarrow 00:17:39.270$  and so this was a 93.

 $00:17:39.270 \longrightarrow 00:17:40.305$  93 subject cohorts.

NOTE Confidence: 0.911085258333333

00:17:40.305 --> 00:17:42.375 It was from apparent cohort of

NOTE Confidence: 0.911085258333333

00:17:42.375 --> 00:17:44.116 medical ICU patients who got

NOTE Confidence: 0.911085258333333

00:17:44.116 --> 00:17:45.781 who receives continuous EEG as

NOTE Confidence: 0.911085258333333

 $00:17:45.781 \longrightarrow 00:17:47.488$  part of their routine care.

NOTE Confidence: 0.911085258333333

 $00:17:47.490 \longrightarrow 00:17:48.878$  So a very unique.

NOTE Confidence: 0.8472702245

00:17:52.970 --> 00:17:55.448 Shouldn't we excluded acute brain injury

NOTE Confidence: 0.8472702245

 $00{:}17{:}55.448 {\:\dashrightarrow\:} 00{:}17{:}58.195$  such as folks who are post cardiac

NOTE Confidence: 0.8472702245

 $00:17:58.195 \longrightarrow 00:18:02.010$  arrest and we looked at the EG. For EG.

NOTE Confidence: 0.8472702245

 $00:18:02.010 \longrightarrow 00:18:04.715$  And cephalad encephalography encephalopathy

NOTE Confidence: 0.8472702245

 $00:18:04.715 \longrightarrow 00:18:08.740$  features as well as her sleep criteria.

NOTE Confidence: 0.8472702245

 $00:18:08.740 \longrightarrow 00:18:11.134$  And what we found I thought was

NOTE Confidence: 0.8472702245

 $00{:}18{:}11.134 \dashrightarrow 00{:}18{:}14.330$  pretty interesting. One was.

NOTE Confidence: 0.8472702245

00:18:14.330 --> 00:18:16.234 Excuse me, just gonna move my here.

NOTE Confidence: 0.8472702245

 $00:18:16.240 \longrightarrow 00:18:19.030$  We go. One was the length of MCU and

 $00:18:19.030 \longrightarrow 00:18:21.778$  hospital stay was quite different between

NOTE Confidence: 0.8472702245

 $00:18:21.778 \longrightarrow 00:18:25.130$  patients who had retained K complexes.

NOTE Confidence: 0.8472702245

 $00:18:25.130 \longrightarrow 00:18:27.281$  So as a marker of stage two had retained

NOTE Confidence: 0.8472702245

 $00{:}18{:}27.281 \dashrightarrow 00{:}18{:}29.337$  their K complexes and those who had not.

NOTE Confidence: 0.8472702245

 $00:18:29.340 \longrightarrow 00:18:30.540$  So this is an association,

NOTE Confidence: 0.8472702245

 $00:18:30.540 \longrightarrow 00:18:31.356$  not causation.

NOTE Confidence: 0.8472702245

00:18:31.356 --> 00:18:33.396 We don't know the directionality,

NOTE Confidence: 0.8472702245

 $00:18:33.400 \longrightarrow 00:18:35.605$  but we see that our patients who

NOTE Confidence: 0.8472702245

 $00:18:35.605 \longrightarrow 00:18:37.263$  maintained their sleep architecture or

NOTE Confidence: 0.8472702245

00:18:37.263 --> 00:18:39.871 in the MCU and hospital for much shorter,

NOTE Confidence: 0.8472702245

 $00:18:39.880 \longrightarrow 00:18:42.166$  and that is the red highlighted box that I've

NOTE Confidence: 0.8472702245

 $00:18:42.166 \longrightarrow 00:18:44.940$  shared with you and then on the flip side.

NOTE Confidence: 0.8472702245

00:18:44.940 --> 00:18:45.606 Quite remarkably,

NOTE Confidence: 0.8472702245

 $00:18:45.606 \longrightarrow 00:18:47.937$  all of the deaths in our cohort

NOTE Confidence: 0.8472702245

00:18:47.937 --> 00:18:49.898 segregated to the folks who had

NOTE Confidence: 0.8472702245

 $00{:}18{:}49.898 \dashrightarrow 00{:}18{:}51.154$  lost their sleep architecture,

 $00:18:51.160 \longrightarrow 00:18:54.894$  and so we had 36% of those folks who

NOTE Confidence: 0.8472702245

 $00:18:54.894 \longrightarrow 00:18:56.700$  had in hospital in hospital death,

NOTE Confidence: 0.8472702245

 $00{:}18{:}56.700 \dashrightarrow 00{:}19{:}00.108$  whereas 0% of the folks who maintain their

NOTE Confidence: 0.8472702245

 $00:19:00.108 \longrightarrow 00:19:02.529$  safe architecture died in the hospital.

NOTE Confidence: 0.8472702245

 $00:19:02.530 \dashrightarrow 00:19:04.385$  When we used logistic regression

NOTE Confidence: 0.8472702245

00:19:04.385 --> 00:19:06.999 techniques to model this and to look

NOTE Confidence: 0.8472702245

 $00:19:06.999 \longrightarrow 00:19:08.734$  in control for other covariates,

NOTE Confidence: 0.8472702245

 $00:19:08.740 \longrightarrow 00:19:10.840$  we found that this retained

NOTE Confidence: 0.8472702245

 $00:19:10.840 \longrightarrow 00:19:12.346$  significance and that had,

NOTE Confidence: 0.8472702245

 $00:19:12.346 \longrightarrow 00:19:14.518$  while a very broad confidence interval

NOTE Confidence: 0.8472702245

 $00:19:14.518 \longrightarrow 00:19:16.937$  and odds ratio close to 19 for folks

NOTE Confidence: 0.8472702245

00:19:16.937 --> 00:19:19.478 who are who are no longer maintained,

NOTE Confidence: 0.8472702245

 $00{:}19{:}19.480 \dashrightarrow 00{:}19{:}20.404$  typical sleep architecture.

NOTE Confidence: 0.8472702245

 $00:19:20.404 \longrightarrow 00:19:22.560$  So we thought this is very important,

NOTE Confidence: 0.8472702245

 $00:19:22.560 \longrightarrow 00:19:23.744$  very interesting,

 $00:19:23.744 \longrightarrow 00:19:26.210$  and we're very happy to follow

NOTE Confidence: 0.8472702245

 $00:19:26.210 \longrightarrow 00:19:28.130$  up on this with subsequent work.

NOTE Confidence: 0.8472702245 00:19:28.130 --> 00:19:28.435 Uhm? NOTE Confidence: 0.8472702245

00:19:28.435 --> 00:19:30.875 Looking at the other side of the coin,

NOTE Confidence: 0.8472702245

 $00:19:30.880 \longrightarrow 00:19:32.488$  the circadian side of the coin,

NOTE Confidence: 0.8472702245

 $00:19:32.490 \longrightarrow 00:19:35.004$  we've been able to leverage continuous

NOTE Confidence: 0.8472702245

00:19:35.004 --> 00:19:37.329 heart rate data here at Yale.

NOTE Confidence: 0.8472702245

 $00:19:37.330 \longrightarrow 00:19:38.460$  This is data that is.

NOTE Confidence: 0.8472702245

 $00:19:38.460 \longrightarrow 00:19:41.564$  This is hardly data taken every five seconds

NOTE Confidence: 0.8472702245

00:19:41.564 --> 00:19:43.200 automatically via our telemetry monitors,

NOTE Confidence: 0.8472702245

 $00{:}19{:}43.200 \dashrightarrow 00{:}19{:}45.438$  so it's very nice inasmuch as it's

NOTE Confidence: 0.8472702245

 $00:19:45.438 \longrightarrow 00:19:46.722$  available for essentially all

NOTE Confidence: 0.8472702245

 $00:19:46.722 \longrightarrow 00:19:48.694$  patients in the ICU have telemetry

NOTE Confidence: 0.8472702245

 $00{:}19{:}48.694 \dashrightarrow 00{:}19{:}50.560$  as part of their routine care,

NOTE Confidence: 0.8472702245

 $00:19:50.560 \longrightarrow 00:19:53.386$  and this small sample when this

NOTE Confidence: 0.8472702245

 $00:19:53.386 \longrightarrow 00:19:54.799$  technology became available.

 $00:19:54.800 \longrightarrow 00:19:56.315$  That we had some clinical

NOTE Confidence: 0.8472702245

 $00:19:56.315 \longrightarrow 00:19:58.233$  characterization of due to a ongoing

NOTE Confidence: 0.8472702245

 $00:19:58.233 \longrightarrow 00:20:00.285$  biorepository were able to look at

NOTE Confidence: 0.8472702245

 $00:20:00.285 \longrightarrow 00:20:02.329$  these patients and ask the question.

NOTE Confidence: 0.8472702245

 $00{:}20{:}02.330 \dashrightarrow 00{:}20{:}04.960$  Are there clinical clinical outcomes

NOTE Confidence: 0.8472702245

 $00:20:04.960 \longrightarrow 00:20:07.970$  associated with with patients who have

NOTE Confidence: 0.8472702245

00:20:07.970 --> 00:20:09.960 their circadian diurnal variation of

NOTE Confidence: 0.8472702245

 $00{:}20{:}09.960 \dashrightarrow 00{:}20{:}12.610$  heart rates that have maintained it in

NOTE Confidence: 0.8472702245

00:20:12.610 --> 00:20:14.717 an aligned manner in a misaligned manner?

NOTE Confidence: 0.8472702245

 $00:20:14.720 \longrightarrow 00:20:16.255$  Or patients who have really

NOTE Confidence: 0.8472702245

00:20:16.255 --> 00:20:17.483 lost that diurnal variation?

NOTE Confidence: 0.8472702245

 $00:20:17.490 \longrightarrow 00:20:19.898$  We're very pleased to see that regardless

NOTE Confidence: 0.8472702245

 $00{:}20{:}19.898 \dashrightarrow 00{:}20{:}21.685$  of vasopressors and other arrhythmias,

NOTE Confidence: 0.8472702245

 $00:20:21.685 \longrightarrow 00:20:25.005$  patients we were able to see these signals.

NOTE Confidence: 0.8472702245

00:20:25.010 --> 00:20:27.201 We were able to do cocinar analysis

 $00:20:27.201 \longrightarrow 00:20:29.391$  and see if this variation maintained

NOTE Confidence: 0.8472702245

 $00{:}20{:}29.391 \dashrightarrow 00{:}20{:}32.149$  and so here I have three samples

NOTE Confidence: 0.8472702245

 $00:20:32.224 \longrightarrow 00:20:34.520$  and so in panel a I'm sharing with

NOTE Confidence: 0.8472702245

00:20:34.520 --> 00:20:37.282 you a patient who had normal aligned

NOTE Confidence: 0.8472702245

 $00:20:37.282 \longrightarrow 00:20:39.770$  diurnal variation of their heart rate.

NOTE Confidence: 0.8472702245

00:20:39.770 --> 00:20:41.575 Reflecting but not directly telling

NOTE Confidence: 0.8472702245

 $00{:}20{:}41.575 \dashrightarrow 00{:}20{:}44.299$  us the alignment of the central clock,

NOTE Confidence: 0.8472702245

00:20:44.300 --> 00:20:45.884 I don't want to overstate what

NOTE Confidence: 0.8472702245

 $00:20:45.884 \longrightarrow 00:20:46.940$  we're looking at here,

NOTE Confidence: 0.8472702245

00:20:46.940 --> 00:20:48.650 but certainly hopefully

NOTE Confidence: 0.8472702245

 $00:20:48.650 \longrightarrow 00:20:50.492$  associated with in panel B.

NOTE Confidence: 0.8472702245

00:20:50.492 --> 00:20:52.130 I have a patient who is misaligned,

NOTE Confidence: 0.8472702245

 $00:20:52.130 \longrightarrow 00:20:54.035$  so they've maintained that diurnal

NOTE Confidence: 0.8472702245

 $00:20:54.035 \longrightarrow 00:20:55.940$  variation in this particular example.

NOTE Confidence: 0.864230691428571

00:20:55.940 --> 00:20:58.040 Their amplitude is a little bit lower,

NOTE Confidence: 0.864230691428571

 $00:20:58.040 \longrightarrow 00:21:00.476$  but that was not true across

00:21:00.476 --> 00:21:01.694 all misaligned patients,

NOTE Confidence: 0.864230691428571

 $00:21:01.700 \longrightarrow 00:21:03.684$  and this was the majority of our patients.

NOTE Confidence: 0.864230691428571

 $00:21:03.690 \longrightarrow 00:21:06.738$  So of the 53 we had,

NOTE Confidence: 0.864230691428571

 $00:21:06.740 \longrightarrow 00:21:09.492$  4039 patients who are misaligned and then.

NOTE Confidence: 0.864230691428571

00:21:09.492 --> 00:21:10.320 Actually, a minority,

NOTE Confidence: 0.864230691428571

 $00:21:10.320 \longrightarrow 00:21:14.368$  only eight of the 53 with who had no no.

NOTE Confidence: 0.864230691428571

00:21:14.368 --> 00:21:16.520 No detectable cocinar pattern,

NOTE Confidence: 0.864230691428571

 $00{:}21{:}16.520 \dashrightarrow 00{:}21{:}20.010$  and no detectable diurnal variation.

NOTE Confidence: 0.864230691428571

 $00:21:20.010 \longrightarrow 00:21:21.564$  Again, when we looked in this group,

NOTE Confidence: 0.864230691428571

 $00:21:21.570 \longrightarrow 00:21:22.734$  another striking segregation,

NOTE Confidence: 0.864230691428571

 $00:21:22.734 \longrightarrow 00:21:25.062$  and so the patients who had

NOTE Confidence: 0.864230691428571

00:21:25.062 --> 00:21:26.566 diurnal variation that was

NOTE Confidence: 0.864230691428571

 $00{:}21{:}26.566 \dashrightarrow 00{:}21{:}28.672$  aligned had no deaths in hospital,

NOTE Confidence: 0.864230691428571

 $00:21:28.680 \longrightarrow 00:21:30.588$  whereas we saw all of our

NOTE Confidence: 0.864230691428571

 $00:21:30.588 \longrightarrow 00:21:31.860$  desks in the misaligned,

00:21:31.860 --> 00:21:33.460 and the lacking variation groups,

NOTE Confidence: 0.864230691428571

 $00:21:33.460 \longrightarrow 00:21:34.888$  and so this was a trend.

NOTE Confidence: 0.864230691428571

 $00:21:34.890 \longrightarrow 00:21:35.892$  It missed significance.

NOTE Confidence: 0.864230691428571

00:21:35.892 --> 00:21:38.018 But again, as we are able to gather

NOTE Confidence: 0.864230691428571

00:21:38.018 --> 00:21:39.850 more patients in a larger cohort,

NOTE Confidence: 0.864230691428571

 $00:21:39.850 \longrightarrow 00:21:43.090$  we look forward to following up on this.

NOTE Confidence: 0.864230691428571

00:21:43.090 --> 00:21:44.530 And so this is, I think,

NOTE Confidence: 0.864230691428571

 $00:21:44.530 \longrightarrow 00:21:45.638$  hopefully adequate background to

NOTE Confidence: 0.864230691428571

 $00{:}21{:}45.638 \dashrightarrow 00{:}21{:}47.630$  Orient you to what I think about.

NOTE Confidence: 0.864230691428571

 $00:21:47.630 \longrightarrow 00:21:49.230$  When I think about sleep

NOTE Confidence: 0.864230691428571

 $00:21:49.230 \longrightarrow 00:21:50.510$  deficiency in the ICU,

NOTE Confidence: 0.864230691428571

 $00:21:50.510 \longrightarrow 00:21:52.757$  but also that this is significant and

NOTE Confidence: 0.864230691428571

 $00:21:52.757 \longrightarrow 00:21:54.888$  something that is at least associated

NOTE Confidence: 0.864230691428571

00:21:54.888 --> 00:21:56.916 with poor outcomes in in much of

NOTE Confidence: 0.864230691428571

 $00:21:56.916 \longrightarrow 00:21:58.963$  of the work that I look forward to

NOTE Confidence: 0.864230691428571

 $00:21:58.963 \longrightarrow 00:22:01.084$  doing is trying to figure out what

 $00{:}22{:}01.084 \dashrightarrow 00{:}22{:}03.377$  the directions and causalities are.

NOTE Confidence: 0.864230691428571

 $00:22:03.380 \longrightarrow 00:22:04.652$  So I want to talk now about some

NOTE Confidence: 0.864230691428571

 $00:22:04.652 \longrightarrow 00:22:05.989$  of the functional consequences.

NOTE Confidence: 0.864230691428571

00:22:05.990 --> 00:22:07.922 Setting aside the very important and

NOTE Confidence: 0.864230691428571

00:22:07.922 --> 00:22:10.289 I think very real problem of sleep,

NOTE Confidence: 0.864230691428571

00:22:10.290 --> 00:22:11.406 deficiency and cognition,

NOTE Confidence: 0.864230691428571

 $00:22:11.406 \longrightarrow 00:22:13.266$  but just setting it aside.

NOTE Confidence: 0.864230691428571

 $00:22:13.270 \longrightarrow 00:22:14.060$  For the next little bit,

NOTE Confidence: 0.864230691428571

 $00:22:14.060 \longrightarrow 00:22:16.130$  and looking at some of the

NOTE Confidence: 0.864230691428571

 $00{:}22{:}16.130 \dashrightarrow 00{:}22{:}17.165$  other functional outcomes.

NOTE Confidence: 0.864230691428571

 $00:22:17.170 \longrightarrow 00:22:20.334$  So I'll touch on these three areas.

NOTE Confidence: 0.864230691428571

 $00{:}22{:}20.340 \dashrightarrow 00{:}22{:}22.878$  There are many areas so metabolic

NOTE Confidence: 0.864230691428571

 $00{:}22{:}22.878 \dashrightarrow 00{:}22{:}24.570$  respiratory and cardiac function

NOTE Confidence: 0.864230691428571

 $00:22:24.638 \longrightarrow 00:22:26.368$  seems to be pretty clearly,

NOTE Confidence: 0.864230691428571

 $00:22:26.370 \longrightarrow 00:22:28.325$  at least in healthy populations

00:22:28.325 --> 00:22:30.280 affected by acute sleep deficiency,

NOTE Confidence: 0.864230691428571

 $00:22:30.280 \longrightarrow 00:22:32.690$  mostly acute sleep deprivation models.

NOTE Confidence: 0.864230691428571

 $00:22:32.690 \longrightarrow 00:22:34.534$  There's some very nice

NOTE Confidence: 0.864230691428571

 $00:22:34.534 \longrightarrow 00:22:36.378$  misalignment models as well.

NOTE Confidence: 0.864230691428571

00:22:36.380 --> 00:22:38.228 Looking at metabolic function,

NOTE Confidence: 0.864230691428571

00:22:38.228 --> 00:22:41.551 I'll share with you this early sort

NOTE Confidence: 0.864230691428571

00:22:41.551 --> 00:22:44.857 of classic definition or excuse me.

NOTE Confidence: 0.864230691428571

00:22:44.860 --> 00:22:47.050 This early classic work by Spiegel

NOTE Confidence: 0.864230691428571

 $00{:}22{:}47.050 --> 00{:}22{:}49.354$  at all in even Cutters Group

NOTE Confidence: 0.864230691428571

00:22:49.354 --> 00:22:51.634 looking at 11 healthy men who

NOTE Confidence: 0.864230691428571

 $00{:}22{:}51.634 \dashrightarrow 00{:}22{:}54.269$  came in for some baseline nights

NOTE Confidence: 0.864230691428571

 $00:22:54.269 \longrightarrow 00:22:56.509$  and had some recovery nights.

NOTE Confidence: 0.864230691428571

 $00:22:56.510 \longrightarrow 00:22:59.102$  But the core of this experiment was six

NOTE Confidence: 0.864230691428571

 $00:22:59.102 \longrightarrow 00:23:01.936$  nights of four hours of sleep opportunity.

NOTE Confidence: 0.864230691428571

00:23:01.940 --> 00:23:04.280 They did maintain circadian alignment by

NOTE Confidence: 0.864230691428571

 $00:23:04.280 \longrightarrow 00:23:06.888$  keeping the sleep midpoint at the same time.

00:23:06.890 --> 00:23:07.398 Uhm,

NOTE Confidence: 0.864230691428571

 $00{:}23{:}07.398 \dashrightarrow 00{:}23{:}10.954$  and they looked then at glucose tolerance.

NOTE Confidence: 0.864230691428571 00:23:10.960 --> 00:23:11.334 Sorry, NOTE Confidence: 0.864230691428571

 $00:23:11.334 \longrightarrow 00:23:13.204$  just they looked at glucose

NOTE Confidence: 0.864230691428571

 $00:23:13.204 \longrightarrow 00:23:15.110$  tolerance and what the authors

NOTE Confidence: 0.864230691428571

 $00:23:15.110 \longrightarrow 00:23:17.455$  want to share with you in these

NOTE Confidence: 0.864230691428571

 $00:23:17.455 \longrightarrow 00:23:19.594$  panels that I've selected is what

NOTE Confidence: 0.864230691428571

 $00{:}23{:}19.594 \dashrightarrow 00{:}23{:}21.498$  happens in the sleep debt and in

NOTE Confidence: 0.864230691428571

 $00{:}23{:}21.498 \dashrightarrow 00{:}23{:}23.175$  the sleep recovery conditions and

NOTE Confidence: 0.864230691428571

 $00:23:23.175 \longrightarrow 00:23:25.820$  so in the top panel they're showing

NOTE Confidence: 0.864230691428571

00:23:25.820 --> 00:23:27.740 an intravenous glucose challenge.

NOTE Confidence: 0.864230691428571

 $00:23:27.740 \longrightarrow 00:23:29.906$  I apologize for the image quality.

NOTE Confidence: 0.951083047142857

 $00:23:31.990 \longrightarrow 00:23:33.474$  And what they want you to appreciate?

NOTE Confidence: 0.951083047142857 00:23:33.480 --> 00:23:34.336 I think it is. NOTE Confidence: 0.951083047142857

 $00:23:34.336 \longrightarrow 00:23:36.796$  It is subtle, but the glucose is

 $00:23:36.796 \longrightarrow 00:23:40.230$  higher and the at this the slope.

NOTE Confidence: 0.951083047142857

 $00:23:40.230 \longrightarrow 00:23:42.010$  Under the Sleep conduct,

NOTE Confidence: 0.951083047142857

00:23:42.010 --> 00:23:45.860 sleep debt condition is a is more shallow,

NOTE Confidence: 0.951083047142857

 $00:23:45.860 \longrightarrow 00:23:49.070$  representing a slower glucose taught

NOTE Confidence: 0.951083047142857

00:23:49.070 --> 00:23:50.930 me a slower glucose tolerance,

NOTE Confidence: 0.951083047142857

 $00:23:50.930 \longrightarrow 00:23:53.432$  and that's the second bullet point

NOTE Confidence: 0.951083047142857

 $00:23:53.432 \longrightarrow 00:23:55.919$  that glucose clearance with Ivy glucose

NOTE Confidence: 0.951083047142857

00:23:55.919 --> 00:23:58.662 challenge is 40% slower after sleep debt,

NOTE Confidence: 0.951083047142857

 $00{:}23{:}58.662 \dashrightarrow 00{:}24{:}00.274$  and happily this resolves

NOTE Confidence: 0.951083047142857

 $00:24:00.274 \longrightarrow 00:24:01.730$  after sleep recovery,

NOTE Confidence: 0.951083047142857

00:24:01.730 --> 00:24:03.977 but is certainly present in that condition.

NOTE Confidence: 0.951083047142857

 $00:24:03.980 \longrightarrow 00:24:05.632$  And then in the lower panel that

NOTE Confidence: 0.951083047142857

00:24:05.632 --> 00:24:07.169 I selected to share with you,

NOTE Confidence: 0.951083047142857

 $00{:}24{:}07.170 \dashrightarrow 00{:}24{:}09.004$  they are looking at a standard meal

NOTE Confidence: 0.951083047142857

 $00:24:09.004 \longrightarrow 00:24:10.778$  and so going via the GI tract.

NOTE Confidence: 0.951083047142857

 $00:24:10.780 \longrightarrow 00:24:11.768$  Just have some difference.

00:24:13.840 --> 00:24:15.584 Different signaling and usually

NOTE Confidence: 0.902604578333334

 $00:24:15.584 \longrightarrow 00:24:17.764$  is better at addressing glucose

NOTE Confidence: 0.902604578333334

 $00:24:17.764 \longrightarrow 00:24:19.731$  challenges and what they want you

NOTE Confidence: 0.902604578333334

 $00:24:19.731 \longrightarrow 00:24:21.737$  to appreciate in the second panel is

NOTE Confidence: 0.902604578333334

 $00:24:21.737 \longrightarrow 00:24:23.438$  that in the sleep debt condition.

NOTE Confidence: 0.902604578333334

 $00:24:23.438 \longrightarrow 00:24:25.280$  The area under the curve that

NOTE Confidence: 0.902604578333334

 $00:24:25.340 \longrightarrow 00:24:27.050$  they defined as the first 90

NOTE Confidence: 0.902604578333334

 $00:24:27.050 \longrightarrow 00:24:28.820$  minutes after the meal is greater

NOTE Confidence: 0.902604578333334

 $00:24:28.820 \longrightarrow 00:24:30.395$  in the sleep debt condition.

NOTE Confidence: 0.881799673214286

 $00:24:40.240 \longrightarrow 00:24:42.424$  OK, so that was sleep that alone and

NOTE Confidence: 0.881799673214286

 $00:24:42.424 \longrightarrow 00:24:44.994$  they authors took care in those cases to

NOTE Confidence: 0.881799673214286

 $00:24:44.994 \longrightarrow 00:24:46.675$  maintain circadian alignment by keeping

NOTE Confidence: 0.881799673214286

 $00{:}24{:}46.675 \dashrightarrow 00{:}24{:}48.817$  the sleep midpoint at the same time.

NOTE Confidence: 0.881799673214286

 $00:24:48.820 \longrightarrow 00:24:51.196$  In this experiment we look only

NOTE Confidence: 0.881799673214286

00:24:51.196 --> 00:24:52.384 at circadian misalignment.

 $00:24:52.390 \longrightarrow 00:24:55.510$  So sleep is maintained and looking here again

NOTE Confidence: 0.881799673214286

 $00:24:55.510 \longrightarrow 00:24:58.739$  at glucose intolerance rather than tolerance.

NOTE Confidence: 0.881799673214286

00:24:58.740 --> 00:25:01.924 And this was six healthy adults and they

NOTE Confidence: 0.881799673214286

 $00:25:01.924 \longrightarrow 00:25:05.128$  were exposed to a shift broke protocol that.

NOTE Confidence: 0.881799673214286

 $00:25:05.130 \longrightarrow 00:25:06.994$  The goal of which is to have sleep

NOTE Confidence: 0.881799673214286

00:25:06.994 --> 00:25:08.190 and circadian processes together

NOTE Confidence: 0.881799673214286

 $00:25:08.190 \longrightarrow 00:25:10.230$  during the beginning of the protocol.

NOTE Confidence: 0.881799673214286

 $00:25:10.230 \longrightarrow 00:25:12.480$  Then there is a forestway period

NOTE Confidence: 0.881799673214286

 $00:25:12.480 \longrightarrow 00:25:16.790$  and then a separate and then 88.

NOTE Confidence: 0.881799673214286

 $00:25:16.790 \longrightarrow 00:25:19.340$  The last period there's sleep that

NOTE Confidence: 0.881799673214286

 $00{:}25{:}19.340 \dashrightarrow 00{:}25{:}22.613$  occurs and during biologic days and then

NOTE Confidence: 0.881799673214286

 $00:25:22.613 \longrightarrow 00:25:24.605$  circuits Arcadian process continues.

NOTE Confidence: 0.881799673214286

 $00:25:24.610 \longrightarrow 00:25:25.501$  During the night.

NOTE Confidence: 0.881799673214286

 $00:25:25.501 \longrightarrow 00:25:27.580$  The point being that in that first

NOTE Confidence: 0.881799673214286

00:25:27.645 --> 00:25:29.685 testing period sleep in certain

NOTE Confidence: 0.881799673214286

 $00{:}25{:}29.685 \dashrightarrow 00{:}25{:}30.909$  processes occur together.

 $00:25:30.910 \longrightarrow 00:25:32.440$  There's the transition and then in

NOTE Confidence: 0.881799673214286

 $00:25:32.440 \longrightarrow 00:25:33.792$  that second period the statement

NOTE Confidence: 0.881799673214286

 $00:25:33.792 \longrightarrow 00:25:35.222$  circadian process are separated so

NOTE Confidence: 0.881799673214286

 $00:25:35.222 \longrightarrow 00:25:37.102$  that you're able to look at things

NOTE Confidence: 0.881799673214286

 $00:25:37.102 \longrightarrow 00:25:38.247$  that are related to sleep.

NOTE Confidence: 0.881799673214286

 $00:25:38.250 \longrightarrow 00:25:40.212$  Things that are related to Kenyan

NOTE Confidence: 0.881799673214286

 $00:25:40.212 \longrightarrow 00:25:42.363$  and you're also allowed able to in

NOTE Confidence: 0.881799673214286

 $00:25:42.363 \longrightarrow 00:25:44.875$  this case put time meals in a way

NOTE Confidence: 0.881799673214286

 $00:25:44.875 \longrightarrow 00:25:47.689$  that you can ask questions about

NOTE Confidence: 0.881799673214286

00:25:47.689 --> 00:25:48.627 circadian misalignment.

NOTE Confidence: 0.881799673214286

 $00:25:48.630 \longrightarrow 00:25:51.042$  And so in this case the author is used,

NOTE Confidence: 0.881799673214286

 $00{:}25{:}51.050 \dashrightarrow 00{:}25{:}53.095$  fixed meals and challenged their

NOTE Confidence: 0.881799673214286

 $00{:}25{:}53.095 \dashrightarrow 00{:}25{:}55.803$  subjects with it and what they show

NOTE Confidence: 0.881799673214286

 $00{:}25{:}55.803 \dashrightarrow 00{:}25{:}58.171$  here on the left hand panel a as

NOTE Confidence: 0.881799673214286

 $00:25:58.244 \longrightarrow 00:26:00.610$  glucose and on the right hand panel

 $00:26:00.610 \longrightarrow 00:26:02.626$  B is insulin and they want you

NOTE Confidence: 0.881799673214286

 $00{:}26{:}02.626 \dashrightarrow 00{:}26{:}04.120$  to appreciate that in both cases

NOTE Confidence: 0.881799673214286

00:26:04.174 --> 00:26:05.569 with circadian misalignment,

NOTE Confidence: 0.881799673214286

 $00:26:05.570 \longrightarrow 00:26:08.405$  the glucose area under the curve is

NOTE Confidence: 0.881799673214286

 $00:26:08.405 \longrightarrow 00:26:10.812$  much greater and the insulin area

NOTE Confidence: 0.881799673214286

00:26:10.812 --> 00:26:13.940 under the curve is also much greater.

NOTE Confidence: 0.881799673214286

00:26:13.940 --> 00:26:16.859 And not only are these values higher,

NOTE Confidence: 0.881799673214286

 $00:26:16.860 \longrightarrow 00:26:19.037$  but you would seem that with greater

NOTE Confidence: 0.881799673214286

 $00{:}26{:}19.037 \dashrightarrow 00{:}26{:}20.751$ insulin you should actually get

NOTE Confidence: 0.881799673214286

 $00:26:20.751 \longrightarrow 00:26:21.666$  better glucose levels,

NOTE Confidence: 0.881799673214286

 $00:26:21.666 \longrightarrow 00:26:23.612$  and so they also want you to

NOTE Confidence: 0.881799673214286

 $00:26:23.612 \longrightarrow 00:26:25.160$  understand that this is also there.

NOTE Confidence: 0.881799673214286

 $00:26:25.160 \longrightarrow 00:26:26.520$  Is there an insulin resistance,

NOTE Confidence: 0.881799673214286

00:26:26.520 --> 00:26:28.685 or an insensitivity that's going

NOTE Confidence: 0.881799673214286

 $00:26:28.685 \longrightarrow 00:26:30.392$  on in this case?

NOTE Confidence: 0.881799673214286 00:26:30.392 --> 00:26:31.240 And finally,

 $00:26:31.240 \longrightarrow 00:26:33.837$  I wanted to show you an experiment

NOTE Confidence: 0.881799673214286

 $00:26:33.837 \longrightarrow 00:26:36.240$  that put these together and so.

NOTE Confidence: 0.881799673214286

 $00:26:36.240 \longrightarrow 00:26:38.382$  These authors put together a short

NOTE Confidence: 0.881799673214286

 $00:26:38.382 \longrightarrow 00:26:40.304$  sleep in misalignment and again

NOTE Confidence: 0.881799673214286

00:26:40.304 --> 00:26:42.020 looked at glucose intolerance,

NOTE Confidence: 0.881799673214286

 $00:26:42.020 \longrightarrow 00:26:43.470$  so this was 26 adults.

NOTE Confidence: 0.881799673214286

00:26:43.470 --> 00:26:45.502 I apologize, healthy adults,

NOTE Confidence: 0.881799673214286

 $00:26:45.502 \longrightarrow 00:26:46.518$  healthy adults.

NOTE Confidence: 0.881799673214286

 $00{:}26{:}46.520 \dashrightarrow 00{:}26{:}48.812$  They did sleep restriction with and

NOTE Confidence: 0.881799673214286

 $00{:}26{:}48.812 \dashrightarrow 00{:}26{:}50.832$  without misalignment and then looked

NOTE Confidence: 0.881799673214286

 $00:26:50.832 \longrightarrow 00:26:52.977$  at insulin sensitivity and they

NOTE Confidence: 0.881799673214286

 $00:26:52.977 \longrightarrow 00:26:54.693$  concluded that insulin sensitivity

NOTE Confidence: 0.881799673214286

 $00{:}26{:}54.756 \dashrightarrow 00{:}26{:}56.666$  was decreased by sleep restriction

NOTE Confidence: 0.881799673214286

 $00{:}26{:}56.666 \dashrightarrow 00{:}26{:}59.193$  and the effect was exaggerated under

NOTE Confidence: 0.881799673214286

 $00:26:59.193 \longrightarrow 00:27:03.484$  circadia misalignment and so here they are.

00:27:05.530 --> 00:27:08.845 Skip, sorry. Here they're showing

NOTE Confidence: 0.853723165

00:27:08.845 --> 00:27:11.216 in the far left hand panel. Again,

NOTE Confidence: 0.853723165

 $00{:}27{:}11.216 \dashrightarrow 00{:}27{:}14.855$  these are glucose and the far left is the

NOTE Confidence: 0.853723165

 $00:27:14.855 \longrightarrow 00:27:17.330$  arrested condition and we have a profile

NOTE Confidence: 0.853723165

 $00:27:17.330 \longrightarrow 00:27:19.994$  of glucose in an area under the curve.

NOTE Confidence: 0.853723165

00:27:20.000 --> 00:27:21.296 They would like you to appreciate.

NOTE Confidence: 0.853723165

 $00:27:21.300 \longrightarrow 00:27:23.330$  The authors are likely to appreciate under

NOTE Confidence: 0.853723165

00:27:23.330 --> 00:27:25.139 sleep restriction with circadian alignment,

NOTE Confidence: 0.853723165

 $00:27:25.140 \longrightarrow 00:27:27.412$  that this area under the curve is is

NOTE Confidence: 0.853723165

 $00:27:27.412 \longrightarrow 00:27:29.460$  greater and that this is emphasized.

NOTE Confidence: 0.853723165

 $00{:}27{:}29.460 \dashrightarrow 00{:}27{:}31.812$  So I do think it's subtle with circadian

NOTE Confidence: 0.853723165

00:27:31.812 --> 00:27:33.196 misalignment and sleep restriction,

NOTE Confidence: 0.853723165

 $00:27:33.200 \longrightarrow 00:27:35.396$  and because it's it's visually complicated.

NOTE Confidence: 0.853723165

 $00:27:35.400 \longrightarrow 00:27:38.190$  I included here as well.

NOTE Confidence: 0.853723165

 $00:27:38.190 \longrightarrow 00:27:39.339$  Then the numeric.

NOTE Confidence: 0.853723165

 $00:27:39.339 \longrightarrow 00:27:41.254$  The numbers behind those curves,

 $00:27:41.260 \longrightarrow 00:27:42.928$  and so this is as I,

NOTE Confidence: 0.853723165

 $00{:}27{:}42.930 \to 00{:}27{:}46.829$  which is a measure of insulin sensitivity.

NOTE Confidence: 0.853723165

 $00:27:46.830 \longrightarrow 00:27:49.002$  And in this case,

NOTE Confidence: 0.853723165

00:27:49.002 --> 00:27:51.488 they're showing only patients who

NOTE Confidence: 0.853723165

 $00{:}27{:}51.488 \dashrightarrow 00{:}27{:}53.780$  are sleep restricted and then

NOTE Confidence: 0.853723165

 $00:27:53.780 \longrightarrow 00:27:55.115$  comparing circadian alignment

NOTE Confidence: 0.853723165

 $00:27:55.115 \longrightarrow 00:27:56.450$  versus circadian misalignment.

NOTE Confidence: 0.853723165

 $00:27:56.450 \longrightarrow 00:27:58.322$  So you can have some hard numbers to look

NOTE Confidence: 0.853723165

 $00:27:58.322 \longrightarrow 00:28:01.476$  at that and so here in all subjects.

NOTE Confidence: 0.853723165

00:28:01.480 --> 00:28:03.750 When folks were circadian aligned,

NOTE Confidence: 0.853723165

 $00:28:03.750 \longrightarrow 00:28:06.856$  they had eight 834% decrement

NOTE Confidence: 0.853723165

 $00:28:06.856 \longrightarrow 00:28:08.470$  in insulin sensitivity,

NOTE Confidence: 0.853723165

00:28:08.470 --> 00:28:11.792 which will worsen to 47% in the

NOTE Confidence: 0.853723165

 $00{:}28{:}11.792 \dashrightarrow 00{:}28{:}13.176$  case of circadian misalignment.

NOTE Confidence: 0.853723165

 $00:28:13.180 \longrightarrow 00:28:15.252$  So you can see that that hard change

 $00:28:15.252 \longrightarrow 00:28:17.352$  from one to the other and then they

NOTE Confidence: 0.853723165

 $00:28:17.352 \longrightarrow 00:28:19.180$  had mostly men in their cohort,

NOTE Confidence: 0.853723165

 $00:28:19.180 \longrightarrow 00:28:20.170$  and so they did take.

NOTE Confidence: 0.853723165

00:28:20.170 --> 00:28:22.514 They did pull out that single sex and

NOTE Confidence: 0.853723165

 $00:28:22.514 \longrightarrow 00:28:24.839$  showed that there was very similar data.

NOTE Confidence: 0.853723165

00:28:24.840 --> 00:28:27.666 A 32% decrement in circadian alignments,

NOTE Confidence: 0.853723165

 $00{:}28{:}27.670 \dashrightarrow 00{:}28{:}29.588$  and maybe a little bit exactly a

NOTE Confidence: 0.853723165

 $00:28:29.588 \longrightarrow 00:28:31.788$  little bit more exaggerated effects of.

NOTE Confidence: 0.853723165

00:28:31.790 --> 00:28:33.602 58% decrement under circadian

NOTE Confidence: 0.853723165

 $00:28:33.602 \longrightarrow 00:28:34.508$  misalignment conditions.

NOTE Confidence: 0.884024663333333

 $00:28:36.920 \longrightarrow 00:28:39.140$  And so, with this in mind,

NOTE Confidence: 0.884024663333333

 $00:28:39.140 \longrightarrow 00:28:41.387$  all of these are all these experiments

NOTE Confidence: 0.884024663333333

 $00:28:41.387 \longrightarrow 00:28:44.257$  I told you about are in healthy adults.

NOTE Confidence: 0.884024663333333

 $00:28:44.260 \longrightarrow 00:28:46.451$  To to then frame that onto how

NOTE Confidence: 0.884024663333333

 $00:28:46.451 \longrightarrow 00:28:48.200$  we feed patients in the ICU,

NOTE Confidence: 0.884024663333333

 $00:28:48.200 \longrightarrow 00:28:49.621$  or at least how we feed into

 $00:28:49.621 \longrightarrow 00:28:50.629$  baited patients in the ICU.

NOTE Confidence: 0.884024663333333

 $00:28:50.630 \longrightarrow 00:28:54.656$  We do 24 hour continuous feeding.

NOTE Confidence: 0.884024663333333

 $00:28:54.660 \longrightarrow 00:28:55.914$  And so really,

NOTE Confidence: 0.884024663333333

00:28:55.914 --> 00:28:57.586 we're overlapping sleep deficiency,

NOTE Confidence: 0.884024663333333

 $00:28:57.590 \longrightarrow 00:28:58.994$  circadian misalignment and

NOTE Confidence: 0.884024663333333

 $00:28:58.994 \longrightarrow 00:29:01.334$  feeding all the same time.

NOTE Confidence: 0.884024663333333

 $00:29:01.340 \longrightarrow 00:29:03.685$  And so one thing that we're interested

NOTE Confidence: 0.884024663333333

 $00:29:03.685 \longrightarrow 00:29:06.498$  in looking at is time restricted feeding.

NOTE Confidence: 0.884024663333333

 $00{:}29{:}06.500 \dashrightarrow 00{:}29{:}08.980$  And so as you may or may not be familiar,

NOTE Confidence: 0.884024663333333

 $00:29:08.980 \longrightarrow 00:29:10.330$  it is a general practice.

NOTE Confidence: 0.884024663333333

 $00:29:10.330 \longrightarrow 00:29:12.430$  May I ask you to feed patients

NOTE Confidence: 0.884024663333333

00:29:12.430 --> 00:29:14.160 continuously over 24 hour periods?

NOTE Confidence: 0.884024663333333

 $00{:}29{:}14.160 \dashrightarrow 00{:}29{:}16.374$  This involves giving them food at

NOTE Confidence: 0.884024663333333

 $00{:}29{:}16.374 \dashrightarrow 00{:}29{:}19.228$  very low and very low constant rate.

NOTE Confidence: 0.884024663333333

 $00:29:19.230 \longrightarrow 00:29:22.674$  There was concern and there is historical

 $00:29:22.674 \longrightarrow 00:29:25.769$  concern about bolus feeding or feeding.

NOTE Confidence: 0.884024663333333

 $00{:}29{:}25.770 --> 00{:}29{:}27.330 \ \mathrm{Meals} \ \mathrm{at} \ \mathrm{intermittent} \ \mathrm{times},$ 

NOTE Confidence: 0.884024663333333

 $00:29:27.330 \longrightarrow 00:29:30.390$  but really at that time with that meant

NOTE Confidence: 0.884024663333333

00:29:30.390 --> 00:29:33.380 was putting in food at quite a rapid rate,

NOTE Confidence: 0.884024663333333

 $00:29:33.380 \longrightarrow 00:29:34.952$  and so there was concern for

NOTE Confidence: 0.884024663333333

 $00:29:34.952 \longrightarrow 00:29:36.718$  aspiration and sort of in this move.

NOTE Confidence: 0.884024663333333

 $00:29:36.720 \longrightarrow 00:29:38.305$  With the advent of feeding

NOTE Confidence: 0.884024663333333

 $00:29:38.305 \longrightarrow 00:29:39.573$  pumps to continuous feeding,

NOTE Confidence: 0.884024663333333

 $00:29:39.580 \longrightarrow 00:29:41.524$  and so there's sort of this

NOTE Confidence: 0.884024663333333

00:29:41.524 --> 00:29:42.820 logistic and historical construct

NOTE Confidence: 0.884024663333333

 $00{:}29{:}42.876 \dashrightarrow 00{:}29{:}44.622$  that has LED us to do what we do.

NOTE Confidence: 0.884024663333333

 $00{:}29{:}44.630 \dashrightarrow 00{:}29{:}46.950$  There's not a lot of if you look through it,

NOTE Confidence: 0.884024663333333

 $00:29:46.950 \longrightarrow 00:29:48.715$  there's a a decent literature

NOTE Confidence: 0.884024663333333

 $00:29:48.715 \longrightarrow 00:29:49.774$  of meta analysis.

NOTE Confidence: 0.884024663333333

 $00:29:49.780 \longrightarrow 00:29:51.544$  There's not a lot of safety concerns,

NOTE Confidence: 0.884024663333333

 $00:29:51.550 \longrightarrow 00:29:53.958$  and so folks are starting to swing

 $00:29:53.958 \longrightarrow 00:29:55.510$  back towards intermittent feeding.

NOTE Confidence: 0.884024663333333

00:29:55.510 --> 00:29:58.608 Mostly based on concerns around how

NOTE Confidence: 0.884024663333333

00:29:58.608 --> 00:30:00.912 the gut works and strap the need for

NOTE Confidence: 0.884024663333333

 $00:30:00.912 \longrightarrow 00:30:03.479$  stretch and the need for feeding and fasting.

NOTE Confidence: 0.884024663333333

 $00:30:03.480 \longrightarrow 00:30:04.684$  What I would add to this or

NOTE Confidence: 0.884024663333333

00:30:04.684 --> 00:30:05.809 what I would advocate for,

NOTE Confidence: 0.884024663333333

 $00:30:05.810 \longrightarrow 00:30:07.595$  is that this should not just be

NOTE Confidence: 0.884024663333333

 $00{:}30{:}07.595 \dashrightarrow 00{:}30{:}08.891$  intermittent feeding as I've drawn

NOTE Confidence: 0.884024663333333

00:30:08.891 --> 00:30:10.337 in the middle here with meal

NOTE Confidence: 0.884024663333333

00:30:10.337 --> 00:30:11.748 space around the 24 hour period,

NOTE Confidence: 0.884024663333333

 $00:30:11.750 \longrightarrow 00:30:13.706$  but that this be time restricted

NOTE Confidence: 0.884024663333333

 $00:30:13.706 \longrightarrow 00:30:15.933$  to what we estimate is circadian

NOTE Confidence: 0.884024663333333

 $00{:}30{:}15.933 \dashrightarrow 00{:}30{:}17.645$  daytime or biologic daytime,

NOTE Confidence: 0.884024663333333

 $00:30:17.650 \longrightarrow 00:30:19.876$  or when the melatonin is low.

NOTE Confidence: 0.884024663333333

 $00:30:19.880 \longrightarrow 00:30:22.696$  So this is something that I and

 $00:30:22.696 \longrightarrow 00:30:23.708$  other groups are interested,

NOTE Confidence: 0.884024663333333

 $00:30:23.710 \longrightarrow 00:30:25.800$  and so we have a.

NOTE Confidence: 0.884024663333333

 $00:30:25.800 \longrightarrow 00:30:27.116$  Randomized controlled trial ongoing

NOTE Confidence: 0.884024663333333

00:30:27.116 --> 00:30:29.593 and I will be very excited in a

NOTE Confidence: 0.884024663333333

 $00:30:29.593 \longrightarrow 00:30:31.154$  few years to tell you the results

NOTE Confidence: 0.884024663333333

 $00:30:31.154 \longrightarrow 00:30:32.920$  are hopefully shorter than that,

NOTE Confidence: 0.884024663333333

 $00:30:32.920 \longrightarrow 00:30:35.088$  but I think this is a really important

NOTE Confidence: 0.884024663333333

00:30:35.088 --> 00:30:36.730 Ave to improve glycemic control in

NOTE Confidence: 0.884024663333333

00:30:36.730 --> 00:30:39.354 the ICU and it may also I've put that

NOTE Confidence: 0.884024663333333

 $00:30:39.354 \longrightarrow 00:30:41.136$  little picture of the site gathers

NOTE Confidence: 0.884024663333333

00:30:41.196 --> 00:30:43.212 up on the top of my slide just to

NOTE Confidence: 0.884024663333333

 $00:30:43.212 \longrightarrow 00:30:45.168$  remind us that it may also have

NOTE Confidence: 0.884024663333333

00:30:45.168 --> 00:30:47.099 beneficial effects in terms of orienting,

NOTE Confidence: 0.884024663333333

 $00:30:47.100 \longrightarrow 00:30:48.668$  underlining the peripheral clocks

NOTE Confidence: 0.884024663333333

 $00:30:48.668 \longrightarrow 00:30:51.020$  that are responsive to food to

NOTE Confidence: 0.884024663333333

 $00:30:51.082 \dashrightarrow 00:30:52.917$  food intake and food schedule,

 $00:30:52.920 \longrightarrow 00:30:55.111$  and so it may have more than

NOTE Confidence: 0.884024663333333

 $00:30:55.111 \longrightarrow 00:30:56.050$  one beneficial effect.

NOTE Confidence: 0.921826300588235

 $00:30:59.810 \longrightarrow 00:31:01.742$  This is one small study that they

NOTE Confidence: 0.921826300588235

 $00:31:01.742 \longrightarrow 00:31:04.316$  did were able to look at continuous

NOTE Confidence: 0.921826300588235

 $00:31:04.316 \longrightarrow 00:31:05.576$  versus intermittent feeding.

NOTE Confidence: 0.921826300588235

 $00:31:05.580 \longrightarrow 00:31:06.590$  It was a nice crowd.

NOTE Confidence: 0.921826300588235

 $00:31:06.590 \longrightarrow 00:31:08.516$  It was a randomized crossover study

NOTE Confidence: 0.921826300588235

 $00{:}31{:}08.516 \dashrightarrow 00{:}31{:}11.106$  and what the authors report here is a

NOTE Confidence: 0.921826300588235

 $00{:}31{:}11.106 \dashrightarrow 00{:}31{:}12.966$  little hint at what I'm hypothesizing

NOTE Confidence: 0.921826300588235

 $00:31:12.970 \longrightarrow 00:31:15.450$  is that they are able to reduce glycemic

NOTE Confidence: 0.921826300588235

 $00:31:15.450 \longrightarrow 00:31:17.888$  need by doing intermittent feeding.

NOTE Confidence: 0.921826300588235

 $00:31:17.890 \longrightarrow 00:31:20.350$  This was not timed time restricted,

NOTE Confidence: 0.921826300588235

00:31:20.350 --> 00:31:21.660 intermittent feeding,

NOTE Confidence: 0.921826300588235

 $00:31:21.660 \longrightarrow 00:31:24.280$  just intermittent feeding alone.

NOTE Confidence: 0.921826300588235

 $00:31:24.280 \longrightarrow 00:31:25.918$  And so they did a pilot trial.

 $00:31:25.920 \longrightarrow 00:31:27.312$  They as they show here in

NOTE Confidence: 0.921826300588235

 $00:31:27.312 \longrightarrow 00:31:28.240$  the left hand panel,

NOTE Confidence: 0.921826300588235

 $00:31:28.240 \longrightarrow 00:31:31.880$  randomized patients either to continuous

NOTE Confidence: 0.921826300588235

 $00:31:31.880 \longrightarrow 00:31:35.968$  goal goal feeds or intermittent goal feeds.

NOTE Confidence: 0.921826300588235

00:31:35.970 --> 00:31:37.180 They let the patients attain,

NOTE Confidence: 0.921826300588235

 $00:31:37.180 \longrightarrow 00:31:38.736$  attain a steady states.

NOTE Confidence: 0.921826300588235

 $00:31:38.736 \longrightarrow 00:31:40.681$  They take their four hours

NOTE Confidence: 0.921826300588235

 $00:31:40.681 \longrightarrow 00:31:42.319$  of data collection.

NOTE Confidence: 0.921826300588235

 $00:31:42.320 \longrightarrow 00:31:43.400$  How much insulin do they need

NOTE Confidence: 0.921826300588235

00:31:43.400 --> 00:31:44.340 during this period of time?

NOTE Confidence: 0.921826300588235 $00:31:44.340 \longrightarrow 00:31:45.204$  And so on. NOTE Confidence: 0.921826300588235

 $00:31:45.204 \longrightarrow 00:31:46.356$  And then they crossover.

NOTE Confidence: 0.921826300588235

 $00:31:46.360 \longrightarrow 00:31:48.840$  So the folks who are continuously fed are

NOTE Confidence: 0.921826300588235

 $00:31:48.840 \longrightarrow 00:31:50.497$  now intermittently fed and vice versa.

NOTE Confidence: 0.921826300588235

 $00:31:50.500 \longrightarrow 00:31:52.720$  They repeat their data collection

NOTE Confidence: 0.921826300588235

 $00:31:52.720 \longrightarrow 00:31:54.940$  and then end the study.

 $00:31:54.940 \longrightarrow 00:31:57.140$  And the right hand panel in more detail.

NOTE Confidence: 0.921826300588235

00:31:57.140 --> 00:31:59.079 They've showed each of their 15 patients.

NOTE Confidence: 0.921826300588235

 $00:31:59.080 \longrightarrow 00:32:00.916$  So the small study,

NOTE Confidence: 0.921826300588235

 $00:32:00.916 \longrightarrow 00:32:03.670$  and they've again ranked the patients

NOTE Confidence: 0.921826300588235

00:32:03.670 --> 00:32:06.310 from most from the patients who

NOTE Confidence: 0.921826300588235

 $00:32:06.310 \longrightarrow 00:32:08.735$  needed more insulin during the

NOTE Confidence: 0.921826300588235

 $00:32:08.735 \longrightarrow 00:32:11.076$  intermittent feeding period to the

NOTE Confidence: 0.921826300588235

 $00{:}32{:}11.076 \dashrightarrow 00{:}32{:}12.804$  patients who needed them the most

NOTE Confidence: 0.921826300588235

 $00{:}32{:}12.804 \dashrightarrow 00{:}32{:}14.520$  during the continuous feeding.

NOTE Confidence: 0.921826300588235

 $00:32:14.520 \longrightarrow 00:32:17.226$  And so the idea is that.

NOTE Confidence: 0.921826300588235

 $00{:}32{:}17.230 \dashrightarrow 00{:}32{:}19.630$  You can ask the question visually

NOTE Confidence: 0.921826300588235

 $00:32:19.630 \longrightarrow 00:32:21.298$  how many of the patients needed

NOTE Confidence: 0.921826300588235

 $00{:}32{:}21.298 \dashrightarrow 00{:}32{:}23.061$  more more insulin during that that

NOTE Confidence: 0.921826300588235

00:32:23.061 --> 00:32:24.253 intermittent feeding and really

NOTE Confidence: 0.921826300588235

 $00:32:24.253 \longrightarrow 00:32:25.445$  it was just these.

 $00:32:25.450 \longrightarrow 00:32:27.200$  First these first few in which you

NOTE Confidence: 0.921826300588235

 $00:32:27.200 \dashrightarrow 00:32:29.393$  can say well you know what during

NOTE Confidence: 0.921826300588235

00:32:29.393 --> 00:32:31.123 that intermittent feeding period they

NOTE Confidence: 0.921826300588235

 $00:32:31.123 \longrightarrow 00:32:33.224$  really required more insulin units.

NOTE Confidence: 0.921826300588235

 $00:32:33.224 \longrightarrow 00:32:35.734$  Patient five is equivocal and

NOTE Confidence: 0.921826300588235

00:32:35.734 --> 00:32:38.712 then really an impatient 6 through

NOTE Confidence: 0.921826300588235

 $00:32:38.712 \longrightarrow 00:32:41.486$  15 appears to need clearly more

NOTE Confidence: 0.921826300588235

00:32:41.486 --> 00:32:43.338 more insulin during continuous

NOTE Confidence: 0.921826300588235

 $00:32:43.338 \longrightarrow 00:32:45.190$  feeding rather than intermittent.

NOTE Confidence: 0.921826300588235

00:32:45.190 --> 00:32:46.014 What I don't know,

NOTE Confidence: 0.921826300588235

 $00:32:46.014 \dashrightarrow 00:32:48.009$  and I think what we would be interesting.

NOTE Confidence: 0.921826300588235

 $00:32:48.010 \longrightarrow 00:32:49.220$  What was the circadian phase

NOTE Confidence: 0.921826300588235

 $00:32:49.220 \longrightarrow 00:32:49.946$  of these patients?

NOTE Confidence: 0.921826300588235

00:32:49.950 --> 00:32:52.030 And so this was not the focus of this study,

NOTE Confidence: 0.921826300588235

 $00:32:52.030 \longrightarrow 00:32:53.848$  but I think there's a lot of work to

NOTE Confidence: 0.921826300588235

 $00{:}32{:}53.848 \rightarrow 00{:}32{:}55.982$  do here and a little hint that if we

00:32:55.982 --> 00:32:57.446 can guess correctly when biologic day,

NOTE Confidence: 0.921826300588235

 $00{:}32{:}57.450 \dashrightarrow 00{:}32{:}59.730$  as we can make some strides in terms

NOTE Confidence: 0.921826300588235

 $00:32:59.730 \longrightarrow 00:33:02.167$  of how we're feeding our patients.

NOTE Confidence: 0.921826300588235

 $00:33:02.170 \longrightarrow 00:33:02.506$  OK,

NOTE Confidence: 0.921826300588235

 $00:33:02.506 \longrightarrow 00:33:04.522$  I'm gonna switch gears to respiratory

NOTE Confidence: 0.921826300588235

00:33:04.522 --> 00:33:05.904 function and sleep deficiency

NOTE Confidence: 0.921826300588235

 $00:33:05.904 \longrightarrow 00:33:07.160$  and this is also.

NOTE Confidence: 0.921826300588235

 $00:33:07.160 \longrightarrow 00:33:09.620$  Uhm, there's there's road to go,

NOTE Confidence: 0.921826300588235

 $00:33:09.620 \longrightarrow 00:33:12.483$  but I think one of our more

NOTE Confidence: 0.921826300588235

 $00:33:12.483 \longrightarrow 00:33:14.844$  developed areas of sleep deficiency

NOTE Confidence: 0.921826300588235

 $00:33:14.844 \longrightarrow 00:33:17.976$  and organ function in the ICU.

NOTE Confidence: 0.921826300588235 00:33:17.980 --> 00:33:18.740 So again,

NOTE Confidence: 0.921826300588235

 $00{:}33{:}18.740 \dashrightarrow 00{:}33{:}21.780$  we're going to go back to healthy controls.

NOTE Confidence: 0.921826300588235

 $00:33:21.780 \longrightarrow 00:33:25.830$  And in this, in this case,

NOTE Confidence: 0.921826300588235

 $00:33:25.830 \longrightarrow 00:33:27.768$  our authors right at all did

 $00:33:27.768 \longrightarrow 00:33:29.060$  this very nice study,

NOTE Confidence: 0.921826300588235

00:33:29.060 --> 00:33:31.940 in which they took 19 subjects.

NOTE Confidence: 0.921826300588235

00:33:31.940 --> 00:33:34.540 Healthy volunteers again and had

NOTE Confidence: 0.921826300588235

 $00:33:34.540 \longrightarrow 00:33:36.620$  them breathe against resistance

NOTE Confidence: 0.921826300588235

 $00:33:36.620 \longrightarrow 00:33:38.519$  for up to 60 minutes.

NOTE Confidence: 0.921826300588235

 $00:33:38.520 \longrightarrow 00:33:40.893$  But they were to breathe against exist

NOTE Confidence: 0.921826300588235

 $00:33:40.893 \longrightarrow 00:33:42.560$  against resistance until exhaustion.

NOTE Confidence: 0.921826300588235

00:33:42.560 --> 00:33:44.832 And So what you see on the X

NOTE Confidence: 0.921826300588235

 $00:33:44.832 \longrightarrow 00:33:46.279$  axis is the sleep,

NOTE Confidence: 0.921826300588235

 $00:33:46.280 \longrightarrow 00:33:48.500$  normal sleep and sleep deprivation condition,

NOTE Confidence: 0.921826300588235

 $00{:}33{:}48.500 \dashrightarrow 00{:}33{:}51.020$  same subject, and then on the Y axis,

NOTE Confidence: 0.921826300588235

 $00:33:51.020 \longrightarrow 00:33:51.904$  how long they were.

NOTE Confidence: 0.921826300588235

 $00:33:51.904 \longrightarrow 00:33:53.554$  Able to last and so these three

NOTE Confidence: 0.921826300588235

 $00{:}33{:}53.554 \dashrightarrow 00{:}33{:}55.444$  parallel lines at the Tippy Tippy top.

NOTE Confidence: 0.921826300588235

 $00:33:55.450 \longrightarrow 00:33:57.220$  Here are folks that were able

NOTE Confidence: 0.921826300588235

 $00:33:57.220 \longrightarrow 00:33:58.400$  to go the full

 $00:33:58.471 \longrightarrow 00:34:00.150$  hour and then everyone else are.

NOTE Confidence: 0.911460239090909

 $00:34:00.150 \longrightarrow 00:34:02.194$  These are paired plots of how much

NOTE Confidence: 0.911460239090909

 $00:34:02.194 \longrightarrow 00:34:04.323$  filter would be able to do in

NOTE Confidence: 0.911460239090909

 $00:34:04.323 \longrightarrow 00:34:05.813$  the normal sleep condition versus

NOTE Confidence: 0.911460239090909

 $00:34:05.813 \longrightarrow 00:34:08.204$  how much they were able to do

NOTE Confidence: 0.911460239090909

 $00:34:08.204 \longrightarrow 00:34:09.560$  and sleep deprivation condition.

NOTE Confidence: 0.911460239090909

 $00:34:09.560 \longrightarrow 00:34:12.066$  It was a single night of sleep

NOTE Confidence: 0.911460239090909

 $00{:}34{:}12.066 \dashrightarrow 00{:}34{:}13.519$  deprivation and they showed that

NOTE Confidence: 0.911460239090909

 $00{:}34{:}13.519 \dashrightarrow 00{:}34{:}14.734$  there's really a significant difference,

NOTE Confidence: 0.911460239090909

 $00:34:14.740 \longrightarrow 00:34:16.208$  and it's significant decrements

NOTE Confidence: 0.911460239090909

00:34:16.208 --> 00:34:18.410 and what what subjects are able

NOTE Confidence: 0.911460239090909

 $00{:}34{:}18.477 \dashrightarrow 00{:}34{:}20.927$  to do with sleep and without so

NOTE Confidence: 0.911460239090909

 $00{:}34{:}20.927 \dashrightarrow 00{:}34{:}21.977$  very important implications.

NOTE Confidence: 0.911460239090909

 $00:34:21.980 \longrightarrow 00:34:24.105$  I think for ICU patients with

NOTE Confidence: 0.911460239090909

 $00:34:24.105 \longrightarrow 00:34:25.630$  a single subjects here towards

 $00:34:25.630 \longrightarrow 00:34:27.591$  the middle who was able actually

NOTE Confidence: 0.911460239090909

00:34:27.591 --> 00:34:29.286 just to have an improvement.

NOTE Confidence: 0.811477493

 $00:34:32.750 \longrightarrow 00:34:34.210$  The author is then followed

NOTE Confidence: 0.811477493

 $00:34:34.210 \longrightarrow 00:34:35.670$  up in the same cohort,

NOTE Confidence: 0.811477493

00:34:35.670 --> 00:34:38.001 but they were able to include twenty

NOTE Confidence: 0.811477493

 $00:34:38.001 \longrightarrow 00:34:41.030$  subjects and they looked here at

NOTE Confidence: 0.811477493

 $00:34:41.030 \longrightarrow 00:34:43.502$  subjective feelings of air hunger,

NOTE Confidence: 0.811477493

 $00:34:43.502 \longrightarrow 00:34:46.400$  but also subjective feelings of breathing

NOTE Confidence: 0.811477493

 $00{:}34{:}46.475 \dashrightarrow 00{:}34{:}49.240$  efforts, and this is very interesting.

NOTE Confidence: 0.811477493

 $00:34:49.240 \longrightarrow 00:34:51.216$  But what they found was that in the

NOTE Confidence: 0.811477493

 $00:34:51.216 \longrightarrow 00:34:53.154$  case of questions around air hunger

NOTE Confidence: 0.811477493

 $00:34:53.154 \longrightarrow 00:34:55.224$  and the sensation of air hunger,

NOTE Confidence: 0.811477493

 $00{:}34{:}55.230 \dashrightarrow 00{:}34{:}59.016$  the patients again in general had

NOTE Confidence: 0.811477493

 $00:34:59.016 \longrightarrow 00:35:00.960$  increased perception of error.

NOTE Confidence: 0.811477493

 $00:35:00.960 \longrightarrow 00:35:02.392$  Hunger after sick deprivation.

NOTE Confidence: 0.811477493

 $00:35:02.392 \dashrightarrow 00:35:04.780$  There are a few exceptions with it,

 $00:35:04.780 \longrightarrow 00:35:07.366$  but overall this difference was significant,

NOTE Confidence: 0.811477493

 $00:35:07.370 \longrightarrow 00:35:09.194$  but they did not perceive a

NOTE Confidence: 0.811477493

00:35:09.194 --> 00:35:10.410 difference in breathing effort,

NOTE Confidence: 0.811477493

 $00:35:10.410 \longrightarrow 00:35:12.020$  and so this is also,

NOTE Confidence: 0.811477493

 $00:35:12.020 \longrightarrow 00:35:13.001$  I think, important.

NOTE Confidence: 0.811477493

 $00:35:13.001 \longrightarrow 00:35:14.963$  It's a little hint about how

NOTE Confidence: 0.811477493

 $00:35:14.963 \longrightarrow 00:35:16.698$  we perceive sleep today,

NOTE Confidence: 0.811477493

 $00:35:16.700 \longrightarrow 00:35:18.264$  how we perceive breathing

NOTE Confidence: 0.811477493

 $00:35:18.264 \longrightarrow 00:35:19.437$  and worker breathing,

NOTE Confidence: 0.811477493

 $00:35:19.440 \longrightarrow 00:35:23.087$  and to consider folks who are maybe

NOTE Confidence: 0.811477493

 $00:35:23.090 \dashrightarrow 00:35:25.300$  evolving respiratory failure or evolving

NOTE Confidence: 0.811477493

 $00:35:25.300 \longrightarrow 00:35:28.540$  their illness to then become sleep deprived.

NOTE Confidence: 0.811477493

 $00{:}35{:}28.540 \dashrightarrow 00{:}35{:}30.704$  This may have significant

NOTE Confidence: 0.811477493

00:35:30.704 --> 00:35:32.868 impact on their care.

NOTE Confidence: 0.811477493

00:35:32.870 --> 00:35:34.740 Now transitioning into the ICU,

 $00:35:34.740 \longrightarrow 00:35:36.714$  we also know that eight to focal

NOTE Confidence: 0.811477493

00:35:36.714 --> 00:35:38.015 sleep predicts late failure

NOTE Confidence: 0.811477493

 $00:35:38.015 \longrightarrow 00:35:39.619$  and non invasive ventilation,

NOTE Confidence: 0.811477493

 $00:35:39.620 \longrightarrow 00:35:41.440$  and so if you'll recall I had

NOTE Confidence: 0.811477493

 $00:35:41.440 \longrightarrow 00:35:43.523$  presented my own work on patients who

NOTE Confidence: 0.811477493

 $00:35:43.523 \longrightarrow 00:35:45.389$  had lost their stage two features.

NOTE Confidence: 0.811477493

 $00:35:45.390 \dashrightarrow 00:35:48.606$  They looked lost their K complexes.

NOTE Confidence: 0.811477493

00:35:48.610 --> 00:35:50.434 And that this was part of a syndrome

NOTE Confidence: 0.811477493

 $00{:}35{:}50.434 \dashrightarrow 00{:}35{:}52.250$  that we called a typical sleep that

NOTE Confidence: 0.811477493

 $00:35:52.250 \longrightarrow 00:35:54.390$  was inclusive of losing spindles and

NOTE Confidence: 0.811477493

 $00{:}35{:}54.390 \to 00{:}35{:}56.910$  having very very little slow wave

NOTE Confidence: 0.811477493

 $00:35:56.910 \longrightarrow 00:35:59.850$  sleep and very very little REM sleep.

NOTE Confidence: 0.811477493

00:35:59.850 --> 00:36:02.908 And so in this group in this study,

NOTE Confidence: 0.811477493

 $00{:}36{:}02.908 --> 00{:}36{:}03.720 \ \mathrm{excuse} \ \mathrm{me},$ 

NOTE Confidence: 0.811477493

 $00:36:03.720 \longrightarrow 00:36:05.555$  the authors separated folks who

NOTE Confidence: 0.811477493

 $00:36:05.555 \longrightarrow 00:36:07.896$  came in and respiratory failure and

 $00:36:07.896 \longrightarrow 00:36:09.668$  required non invasive ventilation.

NOTE Confidence: 0.811477493

 $00{:}36{:}09.670 \dashrightarrow 00{:}36{:}11.788$  They did Poly sonography on these

NOTE Confidence: 0.811477493

 $00{:}36{:}11.788 \dashrightarrow 00{:}36{:}14.068$  patients and then ask the question

NOTE Confidence: 0.811477493

 $00:36:14.068 \longrightarrow 00:36:16.456$  which of these patients graduated and

NOTE Confidence: 0.811477493

 $00:36:16.456 \longrightarrow 00:36:18.250$  then became independent of ventilation.

NOTE Confidence: 0.811477493

 $00:36:18.250 \longrightarrow 00:36:19.240$  Which of those?

NOTE Confidence: 0.811477493

00:36:19.240 --> 00:36:19.654 Failed,

NOTE Confidence: 0.811477493

 $00:36:19.654 \longrightarrow 00:36:22.138$  which they definitely defined as needing

NOTE Confidence: 0.811477493

 $00:36:22.138 \longrightarrow 00:36:24.868$  to be intubated in the in the 24 hour.

NOTE Confidence: 0.811477493

00:36:24.870 --> 00:36:27.166 The subsequent 24 hours,

NOTE Confidence: 0.811477493

 $00:36:27.166 \longrightarrow 00:36:28.946$  the success versus failure

NOTE Confidence: 0.811477493

 $00:36:28.946 \longrightarrow 00:36:30.554$  was pretty evenly balanced,

NOTE Confidence: 0.811477493

 $00{:}36{:}30.560 \dashrightarrow 00{:}36{:}32.338$  and what they identified is that the

NOTE Confidence: 0.811477493

 $00:36:32.338 \longrightarrow 00:36:33.978$  folks who had this atypical sleep

NOTE Confidence: 0.811477493

 $00:36:33.978 \longrightarrow 00:36:35.896$  that I've touched upon a few times

 $00:36:35.956 \longrightarrow 00:36:38.688$  during the talk really a much higher

NOTE Confidence: 0.811477493

 $00{:}36{:}38.688 \dashrightarrow 00{:}36{:}41.148$  proportion of the late failures

NOTE Confidence: 0.811477493

00:36:41.148 --> 00:36:44.966 had a typical sleep in and and in a

NOTE Confidence: 0.811477493

 $00:36:44.966 \longrightarrow 00:36:48.512$  related matter at differences in their sleep.

NOTE Confidence: 0.811477493

 $00:36:48.512 \longrightarrow 00:36:49.764$  Timing is so different.

NOTE Confidence: 0.811477493

00:36:49.770 --> 00:36:51.560 In their night versus day,

NOTE Confidence: 0.811477493

 $00:36:51.560 \longrightarrow 00:36:52.664$  total sleep ratio.

NOTE Confidence: 0.811477493

 $00:36:52.664 \longrightarrow 00:36:53.400$  And so.

NOTE Confidence: 0.811477493

00:36:53.400 --> 00:36:57.128 If you can imagine night is the denominator,

NOTE Confidence: 0.811477493

 $00:36:57.130 \longrightarrow 00:36:59.008$  day is the new excuse me,

NOTE Confidence: 0.811477493

 $00:36:59.010 \longrightarrow 00:37:00.396$  night is the numerator in today.

NOTE Confidence: 0.811477493

 $00:37:00.400 \longrightarrow 00:37:01.270$  Is the denominator,

NOTE Confidence: 0.811477493

 $00:37:01.270 \longrightarrow 00:37:03.010$  a higher number means more night time

NOTE Confidence: 0.811477493

 $00{:}37{:}03.010 \dashrightarrow 00{:}37{:}04.428$  sleep and less day time sleep,

NOTE Confidence: 0.811477493

 $00:37:04.430 \longrightarrow 00:37:05.879$  so more normal.

NOTE Confidence: 0.811477493

 $00:37:05.879 \longrightarrow 00:37:08.777$  And again in our failure group

 $00{:}37{:}08.777 \dashrightarrow 00{:}37{:}11.159$  that ratio is decreased,

NOTE Confidence: 0.811477493

 $00:37:11.160 \longrightarrow 00:37:12.575$  suggesting that these folks are

NOTE Confidence: 0.811477493

00:37:12.575 --> 00:37:14.333 not getting naked time sleep but

NOTE Confidence: 0.811477493

00:37:14.333 --> 00:37:15.788 rather daytime or abnormal sleep.

NOTE Confidence: 0.811477493

 $00:37:15.790 \dashrightarrow 00:37:18.142$  So I think those pieces of evidence

NOTE Confidence: 0.811477493

 $00:37:18.142 \dashrightarrow 00:37:20.459$  hang together very well and then again.

NOTE Confidence: 0.811477493

 $00:37:20.460 \longrightarrow 00:37:23.682$  Highlighted in yellow down here one

NOTE Confidence: 0.811477493

 $00:37:23.682 \longrightarrow 00:37:25.554$  of the phenomenon of a typical sleep

NOTE Confidence: 0.811477493

 $00:37:25.554 \longrightarrow 00:37:27.898$  is a very low round proportion,

NOTE Confidence: 0.811477493

 $00:37:27.900 \longrightarrow 00:37:30.420$  and again you see that those.

NOTE Confidence: 0.811477493

 $00:37:30.420 \longrightarrow 00:37:32.466$  Those folks were able to liberate

NOTE Confidence: 0.811477493

 $00:37:32.466 \longrightarrow 00:37:35.017$  from the base of ventilation were

NOTE Confidence: 0.811477493

 $00:37:35.017 \dashrightarrow 00:37:37.219$  had a higher proportion of RAM,

NOTE Confidence: 0.811477493

 $00:37:37.220 \longrightarrow 00:37:39.158$  had a higher proportion of RAM.

NOTE Confidence: 0.811477493

 $00:37:39.160 \longrightarrow 00:37:40.725$  It should be not proportionate

 $00:37:40.725 \longrightarrow 00:37:41.977$  to minutes of RAM,

NOTE Confidence: 0.848461171

 $00{:}37{:}41.980 \dashrightarrow 00{:}37{:}43.425$  whereas those who had failure

NOTE Confidence: 0.848461171

 $00:37:43.425 \longrightarrow 00:37:44.870$  had lower minutes of RAM.

NOTE Confidence: 0.898943881428571

 $00:37:48.300 \longrightarrow 00:37:51.177$  And then this is even more different.

NOTE Confidence: 0.898943881428571

00:37:51.180 --> 00:37:53.847 So this is the odds ratio products,

NOTE Confidence: 0.898943881428571

 $00{:}37{:}53.850 \dashrightarrow 00{:}37{:}57.438$  which is an automated EEG metric

NOTE Confidence: 0.898943881428571

 $00:37:57.438 \longrightarrow 00:37:59.554$  reflecting alertness with higher

NOTE Confidence: 0.898943881428571

 $00:37:59.554 \longrightarrow 00:38:02.448$  numbers in the threshold being 2.2,

NOTE Confidence: 0.898943881428571

 $00:38:02.448 \longrightarrow 00:38:04.880$  indicating a sensually wake.

NOTE Confidence: 0.898943881428571

00:38:04.880 --> 00:38:07.580 And I'll, uh, I'll beg.

NOTE Confidence: 0.898943881428571

 $00{:}38{:}07.580 \dashrightarrow 00{:}38{:}09.344$  For giveness of experts in the crowd

NOTE Confidence: 0.898943881428571

 $00:38:09.344 \longrightarrow 00:38:11.794$  with that very crude explanation of RP.

NOTE Confidence: 0.898943881428571

 $00:38:11.794 \longrightarrow 00:38:14.595$  But basically the authors in this study

NOTE Confidence: 0.898943881428571

 $00:38:14.595 \longrightarrow 00:38:16.740$  are asking, what if it's not sleep?

NOTE Confidence: 0.898943881428571

 $00:38:16.740 \longrightarrow 00:38:18.357$  Or what if the domain of sleep?

NOTE Confidence: 0.898943881428571

 $00:38:18.360 \longrightarrow 00:38:21.084$  The important is is the wake

 $00:38:21.084 \longrightarrow 00:38:22.900$  domain so functional alertness,

NOTE Confidence: 0.898943881428571

 $00:38:22.900 \longrightarrow 00:38:26.708$  ability to be vigilant, and so on.

NOTE Confidence: 0.898943881428571

 $00:38:26.710 \longrightarrow 00:38:27.724$  That's very important,

NOTE Confidence: 0.898943881428571

 $00:38:27.724 \longrightarrow 00:38:29.414$  so they use the odds,

NOTE Confidence: 0.898943881428571

 $00:38:29.420 \longrightarrow 00:38:31.238$  odds ratio product as their proxy.

NOTE Confidence: 0.898943881428571

 $00:38:31.240 \longrightarrow 00:38:34.365$  For this they divided their

NOTE Confidence: 0.898943881428571

 $00:38:34.365 \longrightarrow 00:38:37.490$  patients into those who spent.

NOTE Confidence: 0.898943881428571

 $00{:}38{:}37.490 \dashrightarrow 00{:}38{:}40.354$  Less less than point less of their time.

NOTE Confidence: 0.898943881428571

 $00:38:40.360 \longrightarrow 00:38:42.831$  Above that alertness threshold that I told

NOTE Confidence: 0.898943881428571

 $00:38:42.831 \longrightarrow 00:38:45.800$  you about a middle amount of their time.

NOTE Confidence: 0.898943881428571

00:38:45.800 --> 00:38:48.552 Sort of an average RP if you score

NOTE Confidence: 0.898943881428571

 $00:38:48.552 \longrightarrow 00:38:50.564$  if you will and then the group

NOTE Confidence: 0.898943881428571

 $00{:}38{:}50.564 \dashrightarrow 00{:}38{:}51.694$  that spent their highest proportion

NOTE Confidence: 0.898943881428571

00:38:51.694 --> 00:38:53.117 of their time with those higher,

NOTE Confidence: 0.898943881428571

 $00:38:53.120 \longrightarrow 00:38:55.034$  more alert or peas and then

 $00:38:55.034 \longrightarrow 00:38:56.999$  they asked for each of those.

NOTE Confidence: 0.898943881428571

00:38:57.000 --> 00:38:58.890 What was the probability of success

NOTE Confidence: 0.898943881428571

 $00:38:58.890 \longrightarrow 00:39:01.528$  that they would be passed a spontaneous

NOTE Confidence: 0.898943881428571

00:39:01.528 --> 00:39:03.718 breathing trial followed by extubation,

NOTE Confidence: 0.898943881428571

 $00:39:03.720 \longrightarrow 00:39:06.978$  and so really the the gold

NOTE Confidence: 0.898943881428571

 $00{:}39{:}06.978 \dashrightarrow 00{:}39{:}10.010$  standard of success from from a.

NOTE Confidence: 0.898943881428571

 $00:39:10.010 \longrightarrow 00:39:12.026$  Vent dependent respiratory failure

NOTE Confidence: 0.898943881428571

 $00:39:12.026 \longrightarrow 00:39:14.546$  perspective and they showed that

NOTE Confidence: 0.898943881428571

 $00:39:14.546 \longrightarrow 00:39:16.800$  the alertness as as defined by

NOTE Confidence: 0.898943881428571

 $00:39:16.800 \longrightarrow 00:39:18.954$  the RP predicted your ability to

NOTE Confidence: 0.898943881428571

 $00:39:18.954 \longrightarrow 00:39:20.809$  be excavated from the ventilator.

NOTE Confidence: 0.898943881428571

 $00:39:20.810 \longrightarrow 00:39:22.842$  I can imagine a lot of ways that

NOTE Confidence: 0.898943881428571

 $00:39:22.842 \longrightarrow 00:39:25.128$  this could be interpreted. Is this a?

NOTE Confidence: 0.898943881428571

 $00:39:25.128 \longrightarrow 00:39:26.508$  Is this something about sedation?

NOTE Confidence: 0.898943881428571

 $00:39:26.510 \longrightarrow 00:39:28.230$  Is this something about sleepiness?

NOTE Confidence: 0.898943881428571 00:39:28.230 --> 00:39:29.114 Excuse me,

 $00:39:29.114 \longrightarrow 00:39:31.766$  is this something about drug induced?

NOTE Confidence: 0.898943881428571

00:39:31.770 --> 00:39:33.102 Lower levels of consciousness?

NOTE Confidence: 0.898943881428571

 $00:39:33.102 \longrightarrow 00:39:35.100$  Or is it really the domain?

NOTE Confidence: 0.898943881428571

 $00:39:35.100 \longrightarrow 00:39:36.829$  Awake is important as we are beginning

NOTE Confidence: 0.898943881428571

 $00:39:36.829 \longrightarrow 00:39:38.949$  to suspect it is and are starting to

NOTE Confidence: 0.898943881428571

 $00:39:38.949 \longrightarrow 00:39:40.279$  study in our healthy populations.

NOTE Confidence: 0.8696354885

 $00:39:42.380 \longrightarrow 00:39:45.380$  I am going to continue to switch gears

NOTE Confidence: 0.8696354885

00:39:45.380 --> 00:39:48.196 still in the respiratory domain but

NOTE Confidence: 0.8696354885

 $00{:}39{:}48.196 \dashrightarrow 00{:}39{:}51.166$  now breezing through a really rich,

NOTE Confidence: 0.8696354885

 $00{:}39{:}51.170 \dashrightarrow 00{:}39{:}54.236$  very meticulous literature of how we

NOTE Confidence: 0.8696354885

00:39:54.236 --> 00:39:57.631 can adjust the event to improve sleep

NOTE Confidence: 0.8696354885

 $00:39:57.631 \longrightarrow 00:40:00.722$  and so that there's been some very

NOTE Confidence: 0.8696354885

 $00{:}40{:}00.722 \dashrightarrow 00{:}40{:}03.470$  careful tracing with PSG and ventilator

NOTE Confidence: 0.8696354885

 $00:40:03.547 \longrightarrow 00:40:06.389$  reporting to look at what aspects of

NOTE Confidence: 0.8696354885

 $00:40:06.389 \longrightarrow 00:40:08.869$  the ventilator can interrupt sleep.

 $00:40:08.870 \longrightarrow 00:40:12.462$  And usually we look at elements as.

NOTE Confidence: 0.8696354885

00:40:12.462 --> 00:40:13.845 Ventilator events like

NOTE Confidence: 0.8696354885

00:40:13.845 --> 00:40:15.228 asynchronous and arousals,

NOTE Confidence: 0.8696354885

 $00:40:15.230 \longrightarrow 00:40:17.430$  but we also look at things like architecture,

NOTE Confidence: 0.8696354885

00:40:17.430 --> 00:40:19.382 RAM, proportion, slow way,

NOTE Confidence: 0.8696354885

 $00:40:19.382 \longrightarrow 00:40:21.692$  sleep proportion and so it seems

NOTE Confidence: 0.8696354885

00:40:21.692 --> 00:40:24.164 true at this point that there's three

NOTE Confidence: 0.8696354885

 $00:40:24.164 \longrightarrow 00:40:26.546$  main themes that lead to ventilator

NOTE Confidence: 0.8696354885

 $00:40:26.546 \longrightarrow 00:40:29.019$  or the related sleep deficiency.

NOTE Confidence: 0.8696354885

 $00:40:29.020 \longrightarrow 00:40:31.568$  In the ICU one is increased work

NOTE Confidence: 0.8696354885

 $00:40:31.568 \longrightarrow 00:40:33.878$  of breathing so under support if

NOTE Confidence: 0.8696354885

 $00:40:33.878 \longrightarrow 00:40:35.788$  you will and other is ineffective

NOTE Confidence: 0.8696354885

00:40:35.788 --> 00:40:36.936 triggering of the ventilator.

NOTE Confidence: 0.8696354885

 $00:40:36.940 \longrightarrow 00:40:40.210$  So what we call a synchrony and then

NOTE Confidence: 0.8696354885

 $00:40:40.210 \longrightarrow 00:40:42.010$  also ventilator over assistance in this.

NOTE Confidence: 0.688731715

00:40:44.670 --> 00:40:49.690 Sees me. OK, the ventilator over assistance,

 $00:40:49.690 \longrightarrow 00:40:52.426$  which needs several more more steps,

NOTE Confidence: 0.688731715

 $00:40:52.430 \longrightarrow 00:40:54.010$  but that leads to hyperventilation.

NOTE Confidence: 0.688731715

 $00:40:54.010 \longrightarrow 00:40:56.638$  Decreased carbon dioxide and then central

NOTE Confidence: 0.688731715

 $00:40:56.638 \longrightarrow 00:40:59.170$  apneas which ultimately lead to arousals.

NOTE Confidence: 0.688731715

 $00:40:59.170 \longrightarrow 00:41:00.927$  And so these are the three main

NOTE Confidence: 0.688731715

 $00:41:00.927 \longrightarrow 00:41:02.824$  buckets that we think a lot about

NOTE Confidence: 0.688731715

 $00:41:02.824 \longrightarrow 00:41:04.456$  when we think about adjusting the

NOTE Confidence: 0.688731715

 $00:41:04.516 \longrightarrow 00:41:06.436$  ventilator for the benefit of sleep.

NOTE Confidence: 0.688731715

 $00:41:06.440 \longrightarrow 00:41:08.232$  It's a one line of evidence supports

NOTE Confidence: 0.688731715

 $00:41:08.232 \longrightarrow 00:41:10.148$  that if we can increase arrest,

NOTE Confidence: 0.688731715

 $00:41:10.150 \longrightarrow 00:41:14.050$  so we address this first problem

NOTE Confidence: 0.688731715

00:41:14.050 --> 00:41:16.100 of increased work of breathing,

NOTE Confidence: 0.688731715

 $00:41:16.100 \longrightarrow 00:41:18.074$  and so an acute hypercapnic respiratory

NOTE Confidence: 0.688731715

 $00:41:18.074 \longrightarrow 00:41:20.101$  failure or sleep quality was improved

NOTE Confidence: 0.688731715

00:41:20.101 --> 00:41:22.069 when patients were supported with NID,

 $00:41:22.070 \longrightarrow 00:41:24.074$  noninvasive ventilation versus not.

NOTE Confidence: 0.688731715

 $00:41:24.074 \longrightarrow 00:41:25.577$  And then also,

NOTE Confidence: 0.688731715

 $00:41:25.580 \longrightarrow 00:41:27.330$  if pressure control ventilation was

NOTE Confidence: 0.688731715

 $00:41:27.330 \longrightarrow 00:41:29.533$  titrated to the point that patients

NOTE Confidence: 0.688731715

 $00:41:29.533 \longrightarrow 00:41:31.508$  became passive on the ventilator,

NOTE Confidence: 0.688731715

 $00:41:31.510 \longrightarrow 00:41:34.198$  that also improved sleep sleep efficiency.

NOTE Confidence: 0.688731715

 $00:41:34.200 \longrightarrow 00:41:37.648$  So this idea that folks, if they need it.

NOTE Confidence: 0.688731715

00:41:37.648 --> 00:41:39.408 Taking away their effort of

NOTE Confidence: 0.688731715

00:41:39.408 --> 00:41:41.010 breathing may improve sleep,

NOTE Confidence: 0.688731715

00:41:41.010 --> 00:41:42.480 but I remind you of the dangers

NOTE Confidence: 0.688731715

 $00:41:42.480 \longrightarrow 00:41:43.779$  of the third bullet point,

NOTE Confidence: 0.688731715

 $00:41:43.780 \longrightarrow 00:41:45.965$  which is we cannot over

NOTE Confidence: 0.688731715

 $00:41:45.965 \longrightarrow 00:41:47.276$  ventilate these patients.

NOTE Confidence: 0.688731715

 $00:41:47.280 \longrightarrow 00:41:48.755$  It also seems clear that

NOTE Confidence: 0.688731715

00:41:48.755 --> 00:41:49.935 increased Synchrony is helpful,

NOTE Confidence: 0.688731715

 $00:41:49.940 \longrightarrow 00:41:51.845$  and that proportional modes of

 $00:41:51.845 \longrightarrow 00:41:54.590$  ventilation such as PV and NAD A can

NOTE Confidence: 0.688731715

 $00:41:54.590 \longrightarrow 00:41:57.170$  which have been shown to decrease,

NOTE Confidence: 0.688731715

 $00:41:57.170 \longrightarrow 00:42:00.700$  decrease asynchrony.

NOTE Confidence: 0.688731715

 $00:42:00.700 \longrightarrow 00:42:02.541$  May be helpful, and so in one

NOTE Confidence: 0.688731715

00:42:02.541 --> 00:42:04.180 study PV improves sleep quality,

NOTE Confidence: 0.688731715

 $00:42:04.180 \longrightarrow 00:42:05.784$  view VR fewer arousals,

NOTE Confidence: 0.688731715

 $00:42:05.784 \longrightarrow 00:42:08.552$  which is what we would imagine would

NOTE Confidence: 0.688731715

 $00:42:08.552 \longrightarrow 00:42:11.086$  happen as there have been links between

NOTE Confidence: 0.688731715

 $00:42:11.086 \longrightarrow 00:42:12.649$  those distinct asynchrony events

NOTE Confidence: 0.688731715

 $00{:}42{:}12.649 \dashrightarrow 00{:}42{:}15.351$  and linked arousal as well as fewer

NOTE Confidence: 0.688731715

 $00:42:15.351 \longrightarrow 00:42:17.738$  awakenings per hour and greater rent sleep.

NOTE Confidence: 0.688731715

 $00:42:17.740 \longrightarrow 00:42:19.365$  But this is this result

NOTE Confidence: 0.688731715

00:42:19.365 --> 00:42:20.665 has not been consistent,

NOTE Confidence: 0.688731715

 $00:42:20.670 \longrightarrow 00:42:23.304$  so the Bosma reference I've

NOTE Confidence: 0.688731715

00:42:23.304 --> 00:42:24.964 included here did have success,

00:42:24.970 --> 00:42:27.290 but Hux uploaded not and then Na BA

NOTE Confidence: 0.688731715

 $00:42:27.290 \longrightarrow 00:42:29.878$  has also been associated with increased

NOTE Confidence: 0.688731715

 $00{:}42{:}29.878 \dashrightarrow 00{:}42{:}32.298$  RAM and lesser sleep fragmentation.

NOTE Confidence: 0.91457878

 $00:42:34.910 \longrightarrow 00:42:39.326$  And so. This also I think.

NOTE Confidence: 0.91457878

 $00:42:39.330 \longrightarrow 00:42:41.386$  Is not ready for primetime if you will.

NOTE Confidence: 0.91457878

00:42:41.390 --> 00:42:43.510 Much like the feeding literature,

NOTE Confidence: 0.91457878

 $00:42:43.510 \longrightarrow 00:42:45.603$  we have a lot of small studies

NOTE Confidence: 0.91457878

00:42:45.603 --> 00:42:46.500 and inconsistent studies.

NOTE Confidence: 0.91457878

 $00:42:46.500 \longrightarrow 00:42:47.940$  The direction of causation

NOTE Confidence: 0.91457878

 $00:42:47.940 \longrightarrow 00:42:49.740$  remains unclear and I think.

NOTE Confidence: 0.940208755

 $00:42:51.920 \longrightarrow 00:42:52.556$  At the end of the day,

NOTE Confidence: 0.940208755

 $00:42:52.560 \longrightarrow 00:42:53.592$  it will be bidirectional,

NOTE Confidence: 0.940208755

 $00:42:53.592 \longrightarrow 00:42:55.140$  and so we'll know that respiratory

NOTE Confidence: 0.940208755

 $00{:}42{:}55.191 \dashrightarrow 00{:}42{:}56.721$  failure can contribute to sleep

NOTE Confidence: 0.940208755

 $00:42:56.721 \longrightarrow 00:42:57.945$  deficiencies and sleep deficiencies

NOTE Confidence: 0.940208755

 $00:42:57.945 \longrightarrow 00:42:59.460$  can worsen respiratory failure,

 $00:42:59.460 \longrightarrow 00:43:02.772$  and so untangling that will certainly be a

NOTE Confidence: 0.940208755

 $00{:}43{:}02.772 \dashrightarrow 00{:}43{:}04.560$  challenge for the novel ventilator modes.

NOTE Confidence: 0.940208755

 $00{:}43{:}04.560 \dashrightarrow 00{:}43{:}06.198$  I just have some logistic concerns.

NOTE Confidence: 0.940208755

00:43:06.200 --> 00:43:07.940 We really need provider familiarity

NOTE Confidence: 0.940208755

 $00:43:07.940 \longrightarrow 00:43:10.100$  with some of the newer modes.

NOTE Confidence: 0.940208755

 $00{:}43{:}10.100 \dashrightarrow 00{:}43{:}11.978$  Some of the algorithms are proprietary,

NOTE Confidence: 0.940208755

 $00:43:11.980 \longrightarrow 00:43:13.900$  so hard to know what's under the hood

NOTE Confidence: 0.940208755

 $00{:}43{:}13.900 \dashrightarrow 00{:}43{:}15.566$  and we just need to integrate these

NOTE Confidence: 0.940208755

 $00{:}43{:}15.566 \dashrightarrow 00{:}43{:}17.354$  with our lung protective strategies and

NOTE Confidence: 0.940208755

 $00:43:17.354 \longrightarrow 00:43:19.394$  so some logistic hurdles to overcome.

NOTE Confidence: 0.940208755

00:43:19.400 --> 00:43:21.766 And finally, I think the question is.

NOTE Confidence: 0.940208755

 $00:43:21.770 \longrightarrow 00:43:23.940$  As with other issues with

NOTE Confidence: 0.940208755

00:43:23.940 --> 00:43:24.808 mechanical ventilation,

NOTE Confidence: 0.940208755

 $00:43:24.810 \longrightarrow 00:43:26.514$  is is it the mode or is it

NOTE Confidence: 0.940208755

 $00:43:26.514 \longrightarrow 00:43:27.809$  what we're doing with it?

 $00:43:27.810 \longrightarrow 00:43:30.295$  So do we really need to predict

NOTE Confidence: 0.940208755

 $00{:}43{:}30.300 \dashrightarrow 00{:}43{:}33.340$  select the correct mode or do we just

NOTE Confidence: 0.940208755

 $00:43:33.340 \longrightarrow 00:43:36.380$  need to achieve the Physiology of?

NOTE Confidence: 0.940208755

00:43:36.380 --> 00:43:38.963 Matching the patients need but not over

NOTE Confidence: 0.940208755

00:43:38.963 --> 00:43:41.333 ventilating and improving asynchrony, it's.

NOTE Confidence: 0.940208755

 $00:43:41.333 \longrightarrow 00:43:44.198$  So those questions remain there.

NOTE Confidence: 0.940208755

 $00:43:44.200 \longrightarrow 00:43:46.400$  OK, one last switching of gears and I

NOTE Confidence: 0.940208755

00:43:46.400 --> 00:43:48.708 wanted to touch just on cardiovascular

NOTE Confidence: 0.940208755

 $00{:}43{:}48.708 \longrightarrow 00{:}43{:}51.910$  function and sleep deficiency and so this is,

NOTE Confidence: 0.940208755

00:43:51.910 --> 00:43:55.140 I think a step behind the metabolic

NOTE Confidence: 0.940208755

00:43:55.140 --> 00:43:57.620 and respiratory data that I've

NOTE Confidence: 0.940208755

 $00:43:57.712 \longrightarrow 00:44:00.106$  shared with you and so here.

NOTE Confidence: 0.940208755

00:44:00.110 --> 00:44:01.580 This is short sleep duration,

NOTE Confidence: 0.940208755

 $00:44:01.580 \longrightarrow 00:44:03.971$  but this is even chronic and in

NOTE Confidence: 0.940208755

 $00:44:03.971 \longrightarrow 00:44:05.526$  outpatient populations and so I

NOTE Confidence: 0.940208755

 $00:44:05.526 \longrightarrow 00:44:07.778$  think we know this as a sa group,

00:44:07.780 --> 00:44:08.325 right?

NOTE Confidence: 0.940208755

 $00:44:08.325 \longrightarrow 00:44:12.140$  We know that sleep duration short sleep.

NOTE Confidence: 0.940208755

 $00:44:12.140 \longrightarrow 00:44:14.044$  Is bad for health outcomes and so

NOTE Confidence: 0.940208755

 $00:44:14.044 \longrightarrow 00:44:15.825$  this very large meta analysis that

NOTE Confidence: 0.940208755

 $00:44:15.825 \longrightarrow 00:44:17.925$  I picked out shows that short sleep

NOTE Confidence: 0.940208755

00:44:17.989 --> 00:44:19.657 was associated with mortality,

NOTE Confidence: 0.940208755

 $00:44:19.660 \longrightarrow 00:44:22.950$  diabetes relevant to cardiovascular bucket

NOTE Confidence: 0.940208755

00:44:22.950 --> 00:44:24.438 hypertension, cardiovascular diseases,

NOTE Confidence: 0.940208755

00:44:24.438 --> 00:44:26.190 corner heart disease, and obesity.

NOTE Confidence: 0.940208755

 $00:44:26.190 \longrightarrow 00:44:27.975$  So this really is not a surprise

NOTE Confidence: 0.940208755

 $00:44:27.975 \longrightarrow 00:44:28.819$  to any of us.

NOTE Confidence: 0.940208755

 $00{:}44{:}28.820 \dashrightarrow 00{:}44{:}31.052$  But this is chronic and so I think

NOTE Confidence: 0.940208755

 $00{:}44{:}31.052 \dashrightarrow 00{:}44{:}32.895$  what's important to ask is what

NOTE Confidence: 0.940208755

00:44:32.895 --> 00:44:34.123 about acute sleep deprivation?

NOTE Confidence: 0.940208755

 $00:44:34.130 \longrightarrow 00:44:37.259$  Is that one night that few nights

 $00:44:37.259 \longrightarrow 00:44:39.630$  of short sleep have real?

NOTE Confidence: 0.940208755

00:44:39.630 --> 00:44:41.330 Impact on cardiovascular events

NOTE Confidence: 0.940208755

 $00:44:41.330 \longrightarrow 00:44:42.180$  and certainly.

NOTE Confidence: 0.956810683333333

 $00:44:44.280 \longrightarrow 00:44:46.038$  When I asked this question I,

NOTE Confidence: 0.956810683333333

 $00:44:46.040 \longrightarrow 00:44:48.322$  I think of the daylight savings time

NOTE Confidence: 0.956810683333333

 $00:44:48.322 \longrightarrow 00:44:50.117$  literature because it really is an

NOTE Confidence: 0.956810683333333

00:44:50.117 --> 00:44:52.450 acute several nights of short sleep,

NOTE Confidence: 0.956810683333333

00:44:52.450 --> 00:44:53.798 not dramatically shorter sleep

NOTE Confidence: 0.956810683333333

 $00:44:53.798 \longrightarrow 00:44:55.483$  for it's usually you know,

NOTE Confidence: 0.956810683333333

 $00:44:55.490 \longrightarrow 00:44:58.427$  associated with an hour or two and change

NOTE Confidence: 0.956810683333333

 $00:44:58.427 \longrightarrow 00:45:01.906$  in sleep duration for that spring forward.

NOTE Confidence: 0.956810683333333

 $00{:}45{:}01.910 \longrightarrow 00{:}45{:}04.150$  But I think there's it's suggestion there,

NOTE Confidence: 0.956810683333333

 $00:45:04.150 \longrightarrow 00:45:06.150$  and so I I bring that literature up

NOTE Confidence: 0.956810683333333

 $00:45:06.150 \longrightarrow 00:45:09.195$  just to say that I do think in that

NOTE Confidence: 0.956810683333333

00:45:09.195 --> 00:45:10.260 outpatient epidemiologic setting.

NOTE Confidence: 0.956810683333333

00:45:10.260 --> 00:45:11.490 We're seeing some hints at this.

 $00:45:11.490 \longrightarrow 00:45:14.248$  And there's there's more data out there.

NOTE Confidence: 0.956810683333333

 $00:45:14.250 \longrightarrow 00:45:15.782$  Didn't then this just?

NOTE Confidence: 0.956810683333333

 $00:45:15.782 \longrightarrow 00:45:19.179$  So I think we can move forward into

NOTE Confidence: 0.956810683333333

00:45:19.179 --> 00:45:22.137 ICU population saying that acute sleep

NOTE Confidence: 0.956810683333333

 $00:45:22.137 \longrightarrow 00:45:25.083$  deprivation does matter in terms of

NOTE Confidence: 0.956810683333333

 $00:45:25.083 \longrightarrow 00:45:26.983$  cardiovascular and arrhythmia risk.

NOTE Confidence: 0.956810683333333

 $00:45:26.990 \longrightarrow 00:45:30.546$  I present here a nice echo Echocardiographic

NOTE Confidence: 0.956810683333333

 $00:45:30.546 \longrightarrow 00:45:33.980$  study of 32 healthy individuals.

NOTE Confidence: 0.956810683333333

 $00:45:33.980 \longrightarrow 00:45:37.046$  They had two echocardiograms in a row.

NOTE Confidence: 0.956810683333333

00:45:37.050 --> 00:45:38.315 One was after regular sleep

NOTE Confidence: 0.956810683333333

 $00:45:38.315 \longrightarrow 00:45:39.580$  and was after short sleeve.

NOTE Confidence: 0.956810683333333

 $00:45:39.580 \longrightarrow 00:45:41.617$  Short sleeve was quite short just 2

NOTE Confidence: 0.956810683333333

 $00{:}45{:}41.617 \dashrightarrow 00{:}45{:}43.910$  1/2 hours and what they saw was changes

NOTE Confidence: 0.956810683333333

 $00:45:43.910 \longrightarrow 00:45:46.163$  in the mechanics of the heart and so

NOTE Confidence: 0.956810683333333

00:45:46.163 --> 00:45:48.157 this one was focused on left atrial

00:45:48.157 --> 00:45:50.323 mechanics so they had a prolonged

NOTE Confidence: 0.956810683333333

 $00:45:50.323 \longrightarrow 00:45:52.901$  deceleration time and increased 80 prime.

NOTE Confidence: 0.956810683333333

 $00:45:52.901 \longrightarrow 00:45:57.230$  And I mean ally passive the amine passive.

NOTE Confidence: 0.956810683333333

 $00:45:57.230 \longrightarrow 00:45:59.399$  Yep, was lower.

NOTE Confidence: 0.956810683333333

 $00:45:59.400 \longrightarrow 00:46:00.936$  I know these terms are not

NOTE Confidence: 0.956810683333333

 $00:46:00.936 \longrightarrow 00:46:02.580$  super familiar to a lot of us,

NOTE Confidence: 0.956810683333333

 $00{:}46{:}02.580 \rightarrow 00{:}46{:}04.518$  so I appreciate the author's conclusion.

NOTE Confidence: 0.956810683333333

 $00:46:04.520 \longrightarrow 00:46:07.580$  This is really consistent with

NOTE Confidence: 0.956810683333333

 $00:46:07.580 \longrightarrow 00:46:09.416$  subclinical diastolic dysfunction.

NOTE Confidence: 0.956810683333333

 $00:46:09.420 \longrightarrow 00:46:11.260$  The LA and so it's a stiffer hard.

NOTE Confidence: 0.9568106833333333

 $00:46:11.260 \longrightarrow 00:46:13.114$  It's a heart that's not gonna work as well.

NOTE Confidence: 0.956810683333333

 $00{:}46{:}13.120 \longrightarrow 00{:}46{:}15.800$  And in fact there's a very similar study

NOTE Confidence: 0.956810683333333

 $00:46:15.800 \longrightarrow 00:46:19.310$  that looks at the at the LV and again says,

NOTE Confidence: 0.95681068333333300:46:19.310 --> 00:46:20.330 you know,

NOTE Confidence: 0.956810683333333

 $00:46:20.330 \longrightarrow 00:46:24.924$  this is along the lines of left of left,

NOTE Confidence: 0.956810683333333

 $00:46:24.924 \longrightarrow 00:46:25.946$  ventricular dysfunction

 $00:46:25.946 \longrightarrow 00:46:26.974$  and diastolic dysfunction.

NOTE Confidence: 0.956810683333333

 $00:46:26.974 \longrightarrow 00:46:28.773$  But when we think about the patients

NOTE Confidence: 0.956810683333333

 $00:46:28.773 \longrightarrow 00:46:30.250$  were seen in the ICU, this is.

NOTE Confidence: 0.956810683333333

 $00:46:30.250 \longrightarrow 00:46:32.370$  This is clearly relevant to us and these

NOTE Confidence: 0.956810683333333

 $00:46:32.427 \longrightarrow 00:46:34.331$  are the sorts of issues that we battle

NOTE Confidence: 0.956810683333333

 $00:46:34.331 \longrightarrow 00:46:36.380$  as we struggled to control volume,

NOTE Confidence: 0.956810683333333

 $00:46:36.380 \longrightarrow 00:46:39.050$  respiratory failure and so on.

NOTE Confidence: 0.956810683333333

 $00:46:39.050 \longrightarrow 00:46:42.417$  And then in terms of arrhythmia risk,

NOTE Confidence: 0.956810683333333

 $00{:}46{:}42.420 \dashrightarrow 00{:}46{:}45.420$  we know that sleep deprivation is

NOTE Confidence: 0.956810683333333

00:46:45.420 --> 00:46:47.592 a high sympathetic tone condition,

NOTE Confidence: 0.956810683333333

 $00{:}46{:}47.592 \dashrightarrow 00{:}46{:}49.682$  and there's concern for arrhythmia.

NOTE Confidence: 0.956810683333333

00:46:49.690 --> 00:46:52.580 And I thought this study.

NOTE Confidence: 0.956810683333333

 $00{:}46{:}52.580 \dashrightarrow 00{:}46{:}54.988$  Was was very elegant and very interesting,

NOTE Confidence: 0.956810683333333

 $00:46:54.990 \longrightarrow 00:46:56.934$  so this group just looked at

NOTE Confidence: 0.956810683333333

 $00:46:56.934 \longrightarrow 00:46:58.816$  the number of nocturnal overhead

00:46:58.816 --> 00:47:00.908 announcements in their hospitals,

NOTE Confidence: 0.956810683333333

00:47:00.910 --> 00:47:04.186 or an acute acutely ill population,

NOTE Confidence: 0.956810683333333

 $00:47:04.190 \longrightarrow 00:47:06.340$  not necessarily in the ICU.

NOTE Confidence: 0.956810683333333

 $00:47:06.340 \longrightarrow 00:47:07.441$  And they said.

NOTE Confidence: 0.956810683333333

00:47:07.441 --> 00:47:09.276 Depending on how many overnight

NOTE Confidence: 0.956810683333333

00:47:09.276 --> 00:47:11.039 overhead pages happen at night,

NOTE Confidence: 0.956810683333333

 $00:47:11.040 \longrightarrow 00:47:13.933$  what do we see is terms of PDC's per hour?

NOTE Confidence: 0.956810683333333

 $00:47:13.933 \longrightarrow 00:47:16.435$  And what do we see in terms of

NOTE Confidence: 0.956810683333333

00:47:16.435 --> 00:47:18.420 cardiac arrests during the following

NOTE Confidence: 0.956810683333333

 $00:47:18.420 \longrightarrow 00:47:20.964$  day and looked at this over?

NOTE Confidence: 0.956810683333333

 $00:47:20.964 \longrightarrow 00:47:22.708$  A three year period?

NOTE Confidence: 0.956810683333333

 $00:47:22.710 \longrightarrow 00:47:24.618$  Excuse me in three months period.

NOTE Confidence: 0.956810683333333

00:47:24.620 --> 00:47:25.015 Uhm,

NOTE Confidence: 0.956810683333333

 $00{:}47{:}25.015 \dashrightarrow 00{:}47{:}27.780$  excuse the typo and so they looked

NOTE Confidence: 0.956810683333333

 $00:47:27.780 \longrightarrow 00:47:29.908$  at 2600 hours of telemetry.

NOTE Confidence: 0.956810683333333

 $00:47:29.908 \longrightarrow 00:47:32.500$  Was almost 90 patients that they

 $00:47:32.578 \longrightarrow 00:47:34.336$  looked at and they looked at

NOTE Confidence: 0.956810683333333

 $00{:}47{:}34.336 \dashrightarrow 00{:}47{:}36.334$  nights that had less than less than

NOTE Confidence: 0.956810683333333

 $00:47:36.334 \longrightarrow 00:47:37.939$  or equal to two announcements.

NOTE Confidence: 0.956810683333333

 $00:47:37.940 \longrightarrow 00:47:40.320$  And they said with low number of

NOTE Confidence: 0.956810683333333

 $00:47:40.320 \longrightarrow 00:47:43.030$  announcements the number of PVCS per

NOTE Confidence: 0.956810683333333

 $00:47:43.030 \longrightarrow 00:47:45.400$  hour decreased during that night.

NOTE Confidence: 0.956810683333333

00:47:45.400 --> 00:47:47.920 And then remained 30% lower during

NOTE Confidence: 0.956810683333333

 $00:47:47.920 \longrightarrow 00:47:50.200$  the following day time period,

NOTE Confidence: 0.956810683333333

 $00:47:50.200 \longrightarrow 00:47:52.520$  which I found remarkable the

NOTE Confidence: 0.956810683333333

 $00:47:52.520 \longrightarrow 00:47:54.376$  nights that had more

NOTE Confidence: 0.886102057

 $00:47:54.380 \longrightarrow 00:47:56.708$  equal or more than four announcements

NOTE Confidence: 0.886102057

00:47:56.708 --> 00:48:01.950 had an increased by 23% versus.

NOTE Confidence: 0.886102057

00:48:01.950 --> 00:48:04.148 23% and then it was further increased

NOTE Confidence: 0.886102057

 $00:48:04.150 \longrightarrow 00:48:06.502$  85% the next day and sorry I should

NOTE Confidence: 0.886102057

00:48:06.502 --> 00:48:08.342 mention the reference was three

 $00:48:08.342 \longrightarrow 00:48:10.202$  announcements per night so that

NOTE Confidence: 0.886102057

 $00:48:10.202 \longrightarrow 00:48:11.990$  the number that's missing for.

NOTE Confidence: 0.886102057

 $00:48:11.990 \longrightarrow 00:48:13.320$  Furthermore, uhm.

NOTE Confidence: 0.886102057

 $00:48:13.320 \longrightarrow 00:48:17.822$  If they looked at cardiac arrests and they

NOTE Confidence: 0.886102057

00:48:17.822 --> 00:48:20.200 looked at daytime hours from 6:00 AM to 2200,

NOTE Confidence: 0.886102057

 $00:48:20.200 \longrightarrow 00:48:23.560$  so this is not come.

NOTE Confidence: 0.886102057

 $00:48:23.560 \longrightarrow 00:48:25.310$  Staff distraction this is not,

NOTE Confidence: 0.886102057

 $00:48:25.310 \longrightarrow 00:48:27.081$  you know, something going on with the

NOTE Confidence: 0.886102057

 $00:48:27.081 \longrightarrow 00:48:28.329$  announcements during the night time.

NOTE Confidence: 0.886102057

 $00:48:28.330 \longrightarrow 00:48:30.034$  This is the following day that

NOTE Confidence: 0.886102057

 $00{:}48{:}30.034 \dashrightarrow 00{:}48{:}32.026$  the nights that had for whatever

NOTE Confidence: 0.886102057

 $00:48:32.026 \longrightarrow 00:48:33.856$  reason 0 announcements the cardiac

NOTE Confidence: 0.886102057

 $00:48:33.856 \longrightarrow 00:48:35.831$  arrest rate per day was .3.

NOTE Confidence: 0.886102057

 $00:48:35.831 \longrightarrow 00:48:37.736$  If it was one announcement.

NOTE Confidence: 0.886102057

 $00:48:37.740 \longrightarrow 00:48:41.514$  It was .339 almost .4 and if it

NOTE Confidence: 0.886102057

 $00:48:41.514 \longrightarrow 00:48:43.794$  was two announcements it was .47.

 $00:48:43.794 \longrightarrow 00:48:46.850$  And this was significant.

NOTE Confidence: 0.886102057

 $00{:}48{:}46.850 \dashrightarrow 00{:}48{:}49.993$  And then they had a natural experiment

NOTE Confidence: 0.886102057

 $00:48:49.993 \longrightarrow 00:48:52.600$  in which they added an additional

NOTE Confidence: 0.886102057

 $00:48:52.600 \longrightarrow 00:48:54.450$  criterion for overhead pages and

NOTE Confidence: 0.886102057

 $00:48:54.450 \longrightarrow 00:48:56.480$  it resulted in announcements.

NOTE Confidence: 0.897182042

 $00:49:00.470 \longrightarrow 00:49:04.587$  They look looked at periods when the average

NOTE Confidence: 0.897182042

00:49:04.587 --> 00:49:06.510 increase from one per day to sticks per day.

NOTE Confidence: 0.897182042

 $00:49:06.510 \longrightarrow 00:49:08.925$  Due to this change in hospital protocols

NOTE Confidence: 0.897182042

 $00{:}49{:}08.930 \dashrightarrow 00{:}49{:}11.322$  and they saw that the frequency of cardiac

NOTE Confidence: 0.897182042

 $00{:}49{:}11.322 \to 00{:}49{:}13.505$  arrest went from an overall global average

NOTE Confidence: 0.897182042

 $00:49:13.505 \longrightarrow 00:49:17.306$  of .46 to .62 with a very significant P.

NOTE Confidence: 0.897182042

00:49:17.310 --> 00:49:19.068 I think it's a very, you know, there's

NOTE Confidence: 0.897182042

 $00{:}49{:}19.068 \dashrightarrow 00{:}49{:}20.930$  a lot of questions is observation ULL.

NOTE Confidence: 0.897182042

 $00:49:20.930 \longrightarrow 00:49:22.760$  This is certainly not conclusive and

NOTE Confidence: 0.897182042

00:49:22.760 --> 00:49:25.052 mechanisms are a little unclear, but it's

 $00:49:25.052 \longrightarrow 00:49:26.888$  very interesting and a very convincing.

NOTE Confidence: 0.897182042

 $00:49:26.890 \longrightarrow 00:49:29.578$  It hangs together as a pattern.

NOTE Confidence: 0.897182042

 $00{:}49{:}29.580 \dashrightarrow 00{:}49{:}31.476$  However, I'm not really sure what to do.

NOTE Confidence: 0.897182042

00:49:31.480 --> 00:49:33.724 I mean, that hospital should definitely

NOTE Confidence: 0.897182042

00:49:33.724 --> 00:49:35.220 stop their overhead announcements,

NOTE Confidence: 0.897182042

 $00{:}49{:}35.220 \dashrightarrow 00{:}49{:}38.097$  but I'm not really sure other than

NOTE Confidence: 0.897182042

 $00:49:38.097 \longrightarrow 00:49:40.304$  sleep promotion. What we can do?

NOTE Confidence: 0.897182042

 $00:49:40.304 \longrightarrow 00:49:41.688$  They imagine mechanisms are

NOTE Confidence: 0.897182042

 $00:49:41.688 \longrightarrow 00:49:43.419$  inflammation and sympathetic tone.

NOTE Confidence: 0.897182042

 $00:49:43.420 \longrightarrow 00:49:45.244$  I mean going after those medically

NOTE Confidence: 0.897182042

 $00:49:45.244 \longrightarrow 00:49:46.857$  seems quite dangerous in terms

NOTE Confidence: 0.897182042

00:49:46.857 --> 00:49:48.217 of unintended side effects,

NOTE Confidence: 0.897182042

 $00{:}49{:}48.220 \dashrightarrow 00{:}49{:}50.800$  but I think it's an interesting

NOTE Confidence: 0.897182042

 $00{:}49{:}50.800 \dashrightarrow 00{:}49{:}52.090$  area to explore.

NOTE Confidence: 0.897182042

00:49:52.090 --> 00:49:52.654 With that,

NOTE Confidence: 0.897182042

 $00:49:52.654 \longrightarrow 00:49:54.628$  I'll summarize and so you know many

 $00:49:54.628 \longrightarrow 00:49:56.630$  functions are affected by sleep deficiency.

NOTE Confidence: 0.897182042

 $00{:}49{:}56.630 \to 00{:}49{:}59.346$  I've alluded to this throughout the talk.

NOTE Confidence: 0.897182042

 $00:49:59.350 \longrightarrow 00:50:01.093$  I think there's been a lot of

NOTE Confidence: 0.897182042

00:50:01.093 --> 00:50:02.390 appropriate focus on cognition,

NOTE Confidence: 0.897182042

 $00:50:02.390 \longrightarrow 00:50:04.406 \mod$ , and vigilance for our patients.

NOTE Confidence: 0.897182042

 $00:50:04.410 \longrightarrow 00:50:07.290$  In our case, ICU delirium.

NOTE Confidence: 0.897182042

 $00:50:07.290 \longrightarrow 00:50:09.537$  And we are seeing some strides in

NOTE Confidence: 0.897182042

 $00:50:09.537 \longrightarrow 00:50:11.025$  which sleep promotion interventions

NOTE Confidence: 0.897182042

 $00{:}50{:}11.025 \dashrightarrow 00{:}50{:}13.650$  are decreasing delirium in our

NOTE Confidence: 0.897182042

00:50:13.650 --> 00:50:15.750 in our ICU patients.

NOTE Confidence: 0.897182042

 $00:50:15.750 \longrightarrow 00:50:18.744$  As I presented them and I,

NOTE Confidence: 0.897182042

 $00{:}50{:}18.744 \dashrightarrow 00{:}50{:}21.523$  I think it's it's a reasonable statement.

NOTE Confidence: 0.897182042

 $00:50:21.530 \longrightarrow 00:50:23.810$  I think the metabolic and respiratory

NOTE Confidence: 0.897182042

 $00:50:23.810 \longrightarrow 00:50:26.055$  domains of decreased function in the

NOTE Confidence: 0.897182042

 $00:50:26.055 \longrightarrow 00:50:28.059$  setting of sleep deficiency are probably

 $00:50:28.059 \longrightarrow 00:50:30.710$  the closest store prime time we have

NOTE Confidence: 0.897182042

 $00:50:30.710 \dashrightarrow 00:50:32.246$  active randomized controlled trials.

NOTE Confidence: 0.897182042

 $00:50:32.250 \longrightarrow 00:50:35.570$  We have a pretty robust.

NOTE Confidence: 0.897182042

 $00:50:35.570 \longrightarrow 00:50:38.825$  Healthy volunteer disease models to look at.

NOTE Confidence: 0.897182042

 $00:50:38.830 \longrightarrow 00:50:40.654$  And really some some concrete things

NOTE Confidence: 0.897182042

 $00:50:40.654 \longrightarrow 00:50:43.070$  that we can do in the ICU to test.

NOTE Confidence: 0.897182042

 $00:50:43.070 \longrightarrow 00:50:45.005$  Really in the next few years and figure out

NOTE Confidence: 0.897182042

 $00:50:45.005 \longrightarrow 00:50:47.003$  if we can help our patients in this way.

NOTE Confidence: 0.897182042

00:50:47.010 --> 00:50:49.575 I think what's coming down the Pike is the

NOTE Confidence: 0.897182042

 $00:50:49.575 \dashrightarrow 00:50:51.167$  cardiovascular data that I touched upon,

NOTE Confidence: 0.897182042

 $00:50:51.170 \longrightarrow 00:50:52.910$  which we really just have hints.

NOTE Confidence: 0.897182042

 $00:50:52.910 \longrightarrow 00:50:53.810$  That is important,

NOTE Confidence: 0.897182042

 $00{:}50{:}53.810 \dashrightarrow 00{:}50{:}55.610$  but it's a little unclear how

NOTE Confidence: 0.897182042

 $00:50:55.610 \longrightarrow 00:50:56.740$  to move forward.

NOTE Confidence: 0.897182042

 $00:50:56.740 \longrightarrow 00:51:00.358$  There is also some very interesting.

NOTE Confidence: 0.897182042

 $00:51:00.360 \longrightarrow 00:51:01.180$  Bidirectional relationships

 $00:51:01.180 \longrightarrow 00:51:03.230$  with sleep and immune system.

NOTE Confidence: 0.897182042

 $00:51:03.230 \longrightarrow 00:51:05.042$  We know that in the setting

NOTE Confidence: 0.897182042

 $00:51:05.042 \longrightarrow 00:51:06.779$  of sleep deprivation we have

NOTE Confidence: 0.897182042

00:51:06.779 --> 00:51:08.159 worsened vaccine response.

NOTE Confidence: 0.897182042

00:51:08.160 --> 00:51:09.992 We have higher clinical

NOTE Confidence: 0.897182042

00:51:09.992 --> 00:51:11.366 vulnerability to colds,

NOTE Confidence: 0.897182042

 $00:51:11.370 \longrightarrow 00:51:13.610$  but we really have a lot to explore

NOTE Confidence: 0.897182042

 $00:51:13.610 \longrightarrow 00:51:16.729$  in the ICU in terms of how supporting

NOTE Confidence: 0.897182042

 $00:51:16.729 \longrightarrow 00:51:18.849$  sleeping circadian function can maybe

NOTE Confidence: 0.897182042

 $00:51:18.849 \longrightarrow 00:51:21.567$  boost immune function and then also this,

NOTE Confidence: 0.897182042

 $00:51:21.567 \longrightarrow 00:51:23.769$  there's a fair amount of interaction

NOTE Confidence: 0.897182042

 $00{:}51{:}23.769 \dashrightarrow 00{:}51{:}25.370$  between skeletal muscle strength

NOTE Confidence: 0.897182042

 $00{:}51{:}25.370 \dashrightarrow 00{:}51{:}27.080$  and sleep and sleep deficiency.

NOTE Confidence: 0.897182042

 $00:51:27.080 \longrightarrow 00:51:28.664$  And we can imagine how important

NOTE Confidence: 0.897182042

 $00:51:28.664 \longrightarrow 00:51:30.270$  that can be for recovery.

 $00:51:30.270 \longrightarrow 00:51:32.604$  Come from critical illness and so

NOTE Confidence: 0.897182042

 $00:51:32.604 \longrightarrow 00:51:35.010$  I think that's that's the future.

NOTE Confidence: 0.897182042

 $00:51:35.010 \longrightarrow 00:51:37.376$  With that, I will think as always,

NOTE Confidence: 0.897182042

 $00:51:37.380 \longrightarrow 00:51:39.410$  my mentors and my funders,

NOTE Confidence: 0.897182042

 $00:51:39.410 \longrightarrow 00:51:41.560$  who have been phenomenal supporters

NOTE Confidence: 0.897182042

 $00:51:41.560 \longrightarrow 00:51:44.564$  of me and really willing to step

NOTE Confidence: 0.897182042

 $00:51:44.564 \longrightarrow 00:51:46.886$  outside the box and ask some

NOTE Confidence: 0.897182042

 $00{:}51{:}46.886 \dashrightarrow 00{:}51{:}48.529$  unusual questions in the ICU.

NOTE Confidence: 0.897182042

 $00:51:48.530 \longrightarrow 00:51:50.455$  And I'm also happy to take questions.

NOTE Confidence: 0.897182042

 $00:51:50.460 \longrightarrow 00:51:51.240$  Thanks so much.

NOTE Confidence: 0.931741661428571

00:51:55.320 --> 00:51:56.376 Thank you very much.

NOTE Confidence: 0.931741661428571

00:51:56.376 --> 00:51:57.597 That was terrific, really.

NOTE Confidence: 0.931741661428571

 $00:51:57.597 \longrightarrow 00:52:00.159$  A great overview and I certainly

NOTE Confidence: 0.931741661428571

 $00:52:00.159 \longrightarrow 00:52:02.216$  learned a lot. I am going to.

NOTE Confidence: 0.931741661428571

 $00{:}52{:}02.216 \dashrightarrow 00{:}52{:}04.124$  I got well I got a fantastic talk

NOTE Confidence: 0.931741661428571

 $00{:}52{:}04.124 \dashrightarrow 00{:}52{:}06.158$  already but I had one question.

 $00:52:06.160 \longrightarrow 00:52:08.032$  While people are thinking of their

NOTE Confidence: 0.931741661428571

 $00:52:08.032 \longrightarrow 00:52:10.209$  their questions so you know your study

NOTE Confidence: 0.931741661428571

 $00:52:10.209 \longrightarrow 00:52:11.949$  that you're doing with the feeding

NOTE Confidence: 0.931741661428571

 $00:52:11.949 \longrightarrow 00:52:14.403$  in the ICU where you want to do the

NOTE Confidence: 0.931741661428571

 $00:52:14.403 \longrightarrow 00:52:17.830$  time restricted intermittent feeding.

NOTE Confidence: 0.931741661428571

 $00:52:17.830 \longrightarrow 00:52:19.342$  Of course you want to feed these

NOTE Confidence: 0.931741661428571

00:52:19.342 --> 00:52:20.870 people during the circadian day, right?

NOTE Confidence: 0.931741661428571

00:52:20.870 --> 00:52:22.710 And you're going to try to do that,

NOTE Confidence: 0.931741661428571

 $00:52:22.710 \longrightarrow 00:52:24.490$  but you, previous to that,

NOTE Confidence: 0.931741661428571

 $00:52:24.490 \longrightarrow 00:52:26.265$  explain that patients in the

NOTE Confidence: 0.931741661428571

00:52:26.265 --> 00:52:28.450 ICU you know they're not they.

NOTE Confidence: 0.931741661428571

 $00:52:28.450 \longrightarrow 00:52:30.102$  It's hard to predict when their circadian

NOTE Confidence: 0.931741661428571

 $00{:}52{:}30.102 \dashrightarrow 00{:}52{:}31.996$  day is and some are on a advanced

NOTE Confidence: 0.931741661428571

 $00:52:31.996 \longrightarrow 00:52:33.590$  schedule and some on normal schedule,

NOTE Confidence: 0.931741661428571

 $00:52:33.590 \longrightarrow 00:52:35.150$  and the majority are delayed.

 $00:52:35.150 \longrightarrow 00:52:37.215$  So how are you deciding

NOTE Confidence: 0.931741661428571

00:52:37.215 --> 00:52:38.867 when circadian day is?

NOTE Confidence: 0.931741661428571

00:52:38.870 --> 00:52:42.970 Are you doing salivary melatonin?

NOTE Confidence: 0.931741661428571

00:52:42.970 --> 00:52:45.020 You know core body temperature,

NOTE Confidence: 0.931741661428571

00:52:45.020 --> 00:52:46.044 just guessing what's your?

NOTE Confidence: 0.931741661428571

 $00:52:46.044 \longrightarrow 00:52:47.940$  What are you going to be doing?

NOTE Confidence: 0.93174166142857100:52:47.940 --> 00:52:48.290 Yeah,

NOTE Confidence: 0.883899935

 $00:52:48.300 \longrightarrow 00:52:50.343$  so fantastic question.

NOTE Confidence: 0.883899935

 $00:52:50.343 \longrightarrow 00:52:53.626$  So we come. There's there's

NOTE Confidence: 0.883899935

 $00:52:53.626 \longrightarrow 00:52:56.716$  currently no real time solution.

NOTE Confidence: 0.883899935

 $00{:}52{:}56.720 \dashrightarrow 00{:}52{:}59.444$  I think the real time solution

NOTE Confidence: 0.883899935

 $00:52:59.444 \longrightarrow 00:53:01.260$  ultimately will hopefully be

NOTE Confidence: 0.883899935

 $00:53:01.343 \longrightarrow 00:53:04.037$  something like real time heart rate

NOTE Confidence: 0.883899935

00:53:04.040 --> 00:53:05.828 detection of diurnal variation,

NOTE Confidence: 0.883899935

 $00:53:05.828 \longrightarrow 00:53:09.149$  but for this study it is a guest

NOTE Confidence: 0.883899935

00:53:09.150 --> 00:53:10.389 and I am basing it on that.

 $00:53:10.390 \longrightarrow 00:53:13.876$  Most of them are delayed and so.

NOTE Confidence: 0.883899935

 $00{:}53{:}13.880 \dashrightarrow 00{:}53{:}17.190$  I have arranged it that.

NOTE Confidence: 0.883899935

 $00:53:17.190 \longrightarrow 00:53:19.443$  Uhm, we start.

NOTE Confidence: 0.883899935

00:53:19.443 --> 00:53:23.083 Don't correct me, we started eight.

NOTE Confidence: 0.883899935

 $00{:}53{:}23.083 \dashrightarrow 00{:}53{:}25.478$  We do formulas eight we started

NOTE Confidence: 0.883899935

 $00:53:25.478 \longrightarrow 00:53:27.670$  first meal at 8:00 AM and we end

NOTE Confidence: 0.883899935

 $00:53:27.734 \longrightarrow 00:53:30.022$  our last meal at 8:00 PM and so

NOTE Confidence: 0.883899935

 $00:53:30.022 \longrightarrow 00:53:31.750$  it's actually a 13 hour period.

NOTE Confidence: 0.883899935

 $00:53:31.750 \longrightarrow 00:53:32.431$  I debated it.

NOTE Confidence: 0.883899935

 $00:53:32.431 \longrightarrow 00:53:34.020$  We debated it for a long time.

NOTE Confidence: 0.883899935

00:53:34.020 --> 00:53:36.636 I was very tempted to do

NOTE Confidence: 0.883899935

 $00:53:36.636 \longrightarrow 00:53:38.320$  a much more constricted,

NOTE Confidence: 0.883899935

 $00:53:38.320 \longrightarrow 00:53:39.430$  like three meals,

NOTE Confidence: 0.883899935

 $00:53:39.430 \longrightarrow 00:53:41.650$  just to sort of guarantee that

NOTE Confidence: 0.883899935

00:53:41.711 --> 00:53:43.409 I was in that biologic date.

 $00:53:43.410 \longrightarrow 00:53:45.834$  But for logistic reasons it made the meal

NOTE Confidence: 0.883899935

 $00:53:45.834 \longrightarrow 00:53:48.329$  volume very big and made folks more nervous.

NOTE Confidence: 0.883899935

 $00:53:48.330 \longrightarrow 00:53:48.930$  'cause it was.

NOTE Confidence: 0.883899935

00:53:48.930 --> 00:53:50.030 You know, pretty big,

NOTE Confidence: 0.883899935

 $00:53:50.030 \longrightarrow 00:53:51.080$  and so on.

NOTE Confidence: 0.883899935

 $00:53:51.080 \longrightarrow 00:53:53.432$  So right now we have what is

NOTE Confidence: 0.883899935

 $00:53:53.432 \longrightarrow 00:53:55.465$  essentially a 13 hour feeding

NOTE Confidence: 0.883899935

00:53:55.465 --> 00:53:57.740 period 888 AM to 9:00 AM to 9:00 PM.

NOTE Confidence: 0.876484596

 $00{:}53{:}58.510 \dashrightarrow 00{:}53{:}59.986$  Alright, terrific thanks, thanks.

NOTE Confidence: 0.876484596

00:53:59.986 --> 00:54:02.200 Alright so I'm getting some questions.

NOTE Confidence: 0.876484596

00:54:02.200 --> 00:54:04.711 Add question here it says so it should be

NOTE Confidence: 0.876484596

 $00:54:04.711 \longrightarrow 00:54:07.052$  fair to say that the New England Journal

NOTE Confidence: 0.876484596

 $00:54:07.052 \longrightarrow 00:54:09.406$  paper a few years ago about holding

NOTE Confidence: 0.876484596

 $00{:}54{:}09.406 \dashrightarrow 00{:}54{:}11.554$  sedation in the ICU had physiologic

NOTE Confidence: 0.876484596

 $00:54:11.560 \longrightarrow 00:54:12.889$  sleep architecture improvement.

NOTE Confidence: 0.876484596

 $00:54:12.889 \longrightarrow 00:54:15.547$  What is the basis for that?

 $00:54:15.550 \longrightarrow 00:54:17.629$  I think that is what I meant to see.

NOTE Confidence: 0.88126373

 $00:54:19.880 \longrightarrow 00:54:20.876$  Does that make sense?

NOTE Confidence: 0.88126373

 $00:54:20.876 \longrightarrow 00:54:22.710$  Do you know about this New England

NOTE Confidence: 0.88126373

00:54:22.761 --> 00:54:24.508 Journal paper? A few years old?

NOTE Confidence: 0.938437708

00:54:24.620 --> 00:54:26.612 Yeah, I'm I'm not clear about

NOTE Confidence: 0.938437708

 $00:54:26.612 \longrightarrow 00:54:28.430$  what the question is. Sorry,

NOTE Confidence: 0.931334307272727

 $00:54:28.680 \longrightarrow 00:54:30.012$  OK, maybe I can.

NOTE Confidence: 0.931334307272727

 $00{:}54{:}30.012 \dashrightarrow 00{:}54{:}32.580$  I can try to unmute this person

NOTE Confidence: 0.931334307272727

 $00:54:32.580 \longrightarrow 00:54:34.686$  asked to unmute, let me see.

NOTE Confidence: 0.931334307272727

 $00{:}54{:}34.690 \dashrightarrow 00{:}54{:}37.639$  It's William Rodriguez.

NOTE Confidence: 0.931334307272727

00:54:37.640 --> 00:54:39.030 Are you able to clarify?

NOTE Confidence: 0.77263542

 $00:54:40.210 \longrightarrow 00:54:41.230$  Oh hi, can you hear me?

NOTE Confidence: 0.77263542

 $00{:}54{:}41.230 --> 00{:}54{:}43.211$  Hi yes yeah perfect no.

NOTE Confidence: 0.77263542

00:54:43.211 --> 00:54:45.416 Basically that that are that

NOTE Confidence: 0.77263542

 $00:54:45.416 \longrightarrow 00:54:47.730$  the manuscript went over about.

 $00:54:47.730 \longrightarrow 00:54:50.286$  I mean having patients being off

NOTE Confidence: 0.77263542

 $00{:}54{:}50.290 \dashrightarrow 00{:}54{:}52.680$  sedation I mean benzodiazepine's etc.

NOTE Confidence: 0.77263542

 $00:54:52.680 \longrightarrow 00:54:54.286$  And we know the effect of the events of

NOTE Confidence: 0.77263542

 $00:54:54.286 \longrightarrow 00:54:56.310$  the last episode on the architecture.

NOTE Confidence: 0.77263542

 $00:54:56.310 \longrightarrow 00:54:59.309$  So it was sort of I was protecting.

NOTE Confidence: 0.77263542

00:54:59.310 --> 00:55:01.190 I am taking it as we were

NOTE Confidence: 0.77263542

00:55:01.190 --> 00:55:03.078 by holiday situation. We

NOTE Confidence: 0.898166681428571

 $00:55:03.090 \longrightarrow 00:55:05.078$  are sort of protecting the patients from

NOTE Confidence: 0.700057315

 $00{:}55{:}05.310 \dashrightarrow 00{:}55{:}07.298$  having a different sleep

NOTE Confidence: 0.90040110125

 $00:55:07.310 \longrightarrow 00:55:07.577$  architecture.

NOTE Confidence: 0.90040110125

00:55:07.577 --> 00:55:09.446 I mean trying to make more normal.

NOTE Confidence: 0.90040110125

00:55:09.450 --> 00:55:10.738 I don't know if you can get my.

NOTE Confidence: 0.90040110125

00:55:10.740 --> 00:55:11.870 My message what I'm saying.

NOTE Confidence: 0.938382275

 $00:55:13.340 \longrightarrow 00:55:15.678$  So. I don't. I don't know the

NOTE Confidence: 0.938382275

00:55:15.678 --> 00:55:17.769 paper that we're talking about,

NOTE Confidence: 0.938382275

 $00:55:17.770 \longrightarrow 00:55:19.258$  but I think the so yes.

 $00:55:19.260 \longrightarrow 00:55:21.425$  So benzos and narcotics are

NOTE Confidence: 0.938382275

00:55:21.425 --> 00:55:23.276 terrible for sleep. That's it?

NOTE Confidence: 0.938382275

 $00:55:23.276 \longrightarrow 00:55:24.368$  That's a technical description.

NOTE Confidence: 0.885241484285714

 $00:55:26.660 \longrightarrow 00:55:31.490$  And so. Sedation holidays should benefit it.

NOTE Confidence: 0.885241484285714

 $00:55:31.490 \longrightarrow 00:55:35.162$  But we it what? Is unclear as if that

NOTE Confidence: 0.885241484285714

 $00:55:35.162 \longrightarrow 00:55:38.149$  sedation holiday like daily station

NOTE Confidence: 0.885241484285714

00:55:38.149 --> 00:55:40.932 holidays are generally brief, right?

NOTE Confidence: 0.885241484285714

 $00:55:40.932 \longrightarrow 00:55:42.976$  So either they're brief and the patient

NOTE Confidence: 0.885241484285714

 $00{:}55{:}42.976 \dashrightarrow 00{:}55{:}45.210$  fails and they need to be re-sedated

NOTE Confidence: 0.885241484285714

 $00:55:45.210 \longrightarrow 00:55:46.639$  or lightened or whatever it is,

NOTE Confidence: 0.885241484285714

 $00:55:46.640 \longrightarrow 00:55:51.820$  or they liberate and and so there is not.

NOTE Confidence: 0.885241484285714

 $00:55:51.820 \longrightarrow 00:55:53.384$  That should benefit sleep.

NOTE Confidence: 0.885241484285714

 $00{:}55{:}53.384 \dashrightarrow 00{:}55{:}55.339$  In in the global sense,

NOTE Confidence: 0.885241484285714

00:55:55.340 --> 00:55:59.866 but there have not been studies to date

NOTE Confidence: 0.885241484285714

 $00:55:59.866 \longrightarrow 00:56:02.914$  saying does the sedation holiday of an

 $00:56:02.914 \longrightarrow 00:56:05.402$  hour so improve sleep is that yeah,

NOTE Confidence: 0.885241484285714

 $00{:}56{:}05.402 \dashrightarrow 00{:}56{:}07.376$  but I'm saying at the time what?

NOTE Confidence: 0.885241484285714

 $00:56:07.380 \longrightarrow 00:56:09.270$  What show the study was that patients

NOTE Confidence: 0.885241484285714

 $00:56:09.270 \longrightarrow 00:56:11.088$  were weaned off the band easily

NOTE Confidence: 0.746382691666667

 $00:56:11.100 \longrightarrow 00:56:13.630$  earlier. They come off the bench better

NOTE Confidence: 0.768581166666667

 $00.56:13.890 \longrightarrow 00.56:16.230$  so, but the article did

NOTE Confidence: 0.768581166666667

 $00:56:16.230 \longrightarrow 00:56:18.102$  not analyze any aspect

NOTE Confidence: 0.826803888571429

 $00:56:18.120 \longrightarrow 00:56:20.220$  of sleep architecture. So in a way

NOTE Confidence: 0.697157204285714

 $00:56:20.300 \longrightarrow 00:56:22.435$  they were right, but they reach a

NOTE Confidence: 0.697157204285714

 $00:56:22.440 \longrightarrow 00:56:23.946$  conclusion through a different way.

NOTE Confidence: 0.697157204285714

 $00{:}56{:}23.946 --> 00{:}56{:}26.130$  That's fine. So yeah, so I don't.

NOTE Confidence: 0.697157204285714

00:56:26.130 --> 00:56:28.440 Yeah, so I think all of these are,

NOTE Confidence: 0.697157204285714

00:56:28.440 --> 00:56:31.242 you know, that's a great question, you know.

NOTE Confidence: 0.697157204285714

 $00:56:31.242 \longrightarrow 00:56:33.147$  The It's the same though

NOTE Confidence: 0.697157204285714

 $00:56:33.147 \longrightarrow 00:56:34.830$  for the feeding right?

NOTE Confidence: 0.697157204285714

 $00:56:34.830 \longrightarrow 00:56:36.860$  So the feeding the intermittent

 $00:56:36.860 \longrightarrow 00:56:38.890$  feeding also has benefits for

NOTE Confidence: 0.697157204285714

 $00:56:38.961 \longrightarrow 00:56:41.080$  protein synthesis and gut you know

NOTE Confidence: 0.697157204285714

 $00:56:41.080 \longrightarrow 00:56:42.520$  all the normal functions of the

NOTE Confidence: 0.697157204285714

 $00:56:42.520 \longrightarrow 00:56:44.105$  gut and so so on and so forth.

NOTE Confidence: 0.697157204285714

00:56:44.110 --> 00:56:46.126 And so I don't and mobility,

NOTE Confidence: 0.697157204285714

 $00:56:46.130 \longrightarrow 00:56:48.314$  which I think is going to be really

NOTE Confidence: 0.697157204285714

00:56:48.314 --> 00:56:49.843 important for sleep promotion and

NOTE Confidence: 0.697157204285714

 $00{:}56{:}49.843 \to 00{:}56{:}52.270$  is and I think also is going to be

NOTE Confidence: 0.697157204285714

 $00:56:52.270 \longrightarrow 00:56:53.967$  bidirectional that getting your skeletal

NOTE Confidence: 0.697157204285714

 $00:56:53.967 \longrightarrow 00:56:56.232$  muscle strength back is going to be

NOTE Confidence: 0.697157204285714

00:56:56.232 --> 00:56:57.960 important for sleep and vice versa,

NOTE Confidence: 0.697157204285714

 $00:56:57.960 \longrightarrow 00:57:00.312$  but I'm certainly not going to assert that

NOTE Confidence: 0.697157204285714

 $00:57:00.312 \dashrightarrow 00:57:02.860$  sleep is the whole story of the situation.

NOTE Confidence: 0.697157204285714

 $00:57:02.860 \longrightarrow 00:57:05.290$  Holiday rates sedatives have many effects.

NOTE Confidence: 0.697157204285714

 $00:57:05.290 \longrightarrow 00:57:06.240$  Sleep is one of them,

 $00:57:06.240 \longrightarrow 00:57:09.372$  and so I think a lot of the early

NOTE Confidence: 0.697157204285714

 $00{:}57{:}09.372 \dashrightarrow 00{:}57{:}12.209$  mobility studies the sedation studies.

NOTE Confidence: 0.697157204285714

 $00:57:12.210 \longrightarrow 00:57:14.191$  Some of the time restricted feeding studies

NOTE Confidence: 0.697157204285714

00:57:14.191 --> 00:57:16.360 are going to have not looked at sleep,

NOTE Confidence: 0.697157204285714

 $00:57:16.360 \longrightarrow 00:57:18.166$  and it's going to turn out that

NOTE Confidence: 0.697157204285714

 $00:57:18.166 \longrightarrow 00:57:20.099$  that was part of their mechanism.

NOTE Confidence: 0.697157204285714 00:57:20.100 --> 00:57:20.450 Great NOTE Confidence: 0.900201705714286

 $00:57:20.460 \longrightarrow 00:57:25.346$  thanks, there is another question and this.

NOTE Confidence: 0.900201705714286

 $00:57:25.350 \longrightarrow 00:57:27.191$  The question is, can you talk about

NOTE Confidence: 0.900201705714286

00:57:27.191 --> 00:57:28.288 the difference between peripheral

NOTE Confidence: 0.900201705714286

 $00{:}57{:}28.288 \operatorname{--}{>} 00{:}57{:}29.836$  clocks and central clocks and what

NOTE Confidence: 0.900201705714286

 $00:57:29.836 \longrightarrow 00:57:31.481$  some of the intervention and what

NOTE Confidence: 0.900201705714286

 $00:57:31.481 \longrightarrow 00:57:33.113$  are some of the interventions that

NOTE Confidence: 0.900201705714286

 $00{:}57{:}33.113 \dashrightarrow 00{:}57{:}35.160$  can be leveraged to target these?

NOTE Confidence: 0.91715529375

 $00:57:35.950 \longrightarrow 00:57:39.006$  OK, so I think that the best example

NOTE Confidence: 0.91715529375

 $00:57:39.006 \longrightarrow 00:57:42.483$  for that is is certainly the peripheral

 $00:57:42.483 \longrightarrow 00:57:45.010$  clocks that are associated with feeding

NOTE Confidence: 0.91715529375

 $00{:}57{:}45.010 {\:{\circ}{\circ}{\circ}}>00{:}57{:}48.145$  and so stepping back very big picture

NOTE Confidence: 0.91715529375

00:57:48.145 --> 00:57:51.800 central clock brain tide to light

NOTE Confidence: 0.91715529375

 $00:57:51.800 \longrightarrow 00:57:53.720$  peripheral clocks everywhere else in

NOTE Confidence: 0.91715529375

 $00:57:53.720 \longrightarrow 00:57:55.920$  the body and they certainly get signal.

NOTE Confidence: 0.91715529375

00:57:55.920 --> 00:57:57.340 From the central clock melatonin,

NOTE Confidence: 0.91715529375

00:57:57.340 --> 00:57:59.024 certainly a coordinating signal,

NOTE Confidence: 0.91715529375

 $00:57:59.024 \longrightarrow 00:58:00.708$  but they also have.

NOTE Confidence: 0.91715529375

00:58:00.710 --> 00:58:02.862 I can't, I think of them as functionally

NOTE Confidence: 0.91715529375

 $00:58:02.862 \longrightarrow 00:58:04.079$  relevant peripheral clock signals,

NOTE Confidence: 0.91715529375

 $00:58:04.080 \longrightarrow 00:58:07.224$  and so the gut the pancreas and liver

NOTE Confidence: 0.91715529375

 $00:58:07.224 \longrightarrow 00:58:09.399$  are tremendously influenced by feeding

NOTE Confidence: 0.91715529375

 $00{:}58{:}09.399 \dashrightarrow 00{:}58{:}12.021$  schedule and so you could imagine

NOTE Confidence: 0.91715529375

 $00:58:12.021 \longrightarrow 00:58:15.350$  that in shift work for example.

NOTE Confidence: 0.91715529375

 $00:58:15.350 \longrightarrow 00:58:17.222$  You have one set of signals from light

 $00:58:17.222 \longrightarrow 00:58:19.072$  and maybe you eat a big meal in the

NOTE Confidence: 0.91715529375

00:58:19.072 --> 00:58:21.109 middle of the night of your biologic night,

NOTE Confidence: 0.91715529375

00:58:21.110 --> 00:58:22.958 'cause you're up and your gut saying it's

NOTE Confidence: 0.91715529375

00:58:22.958 --> 00:58:24.688 a different time than your brain saying,

NOTE Confidence: 0.91715529375

 $00:58:24.690 \longrightarrow 00:58:26.825$  and so you can get these internal

NOTE Confidence: 0.91715529375

 $00:58:26.830 \longrightarrow 00:58:30.726$  desynchrony and so one thing that we think

NOTE Confidence: 0.91715529375

 $00:58:30.726 \longrightarrow 00:58:34.857$  about in the ICU is if we try are trying.

NOTE Confidence: 0.91715529375

 $00:58:34.860 \longrightarrow 00:58:37.422$  Uhm, to target these things we want

NOTE Confidence: 0.91715529375

00:58:37.422 --> 00:58:40.848 to do it in a in a organized manner,

NOTE Confidence: 0.91715529375

 $00:58:40.850 \longrightarrow 00:58:42.894$  and so the feeding the time restricted

NOTE Confidence: 0.91715529375

 $00{:}58{:}42.894 \dashrightarrow 00{:}58{:}44.815$  feeding that I suggested certainly is

NOTE Confidence: 0.91715529375

00:58:44.815 --> 00:58:47.125 going to have the effect of orienting

NOTE Confidence: 0.91715529375

 $00:58:47.186 \longrightarrow 00:58:49.122$  the gut and the liver and the pancreas

NOTE Confidence: 0.91715529375

 $00:58:49.122 \longrightarrow 00:58:51.238$  to my feeding schedule and hopefully

NOTE Confidence: 0.91715529375

00:58:51.238 --> 00:58:54.136 that is the same because I'm also

NOTE Confidence: 0.91715529375

 $00:58:54.136 \longrightarrow 00:58:56.416$  promoting sleep during the night and

 $00:58:56.416 \longrightarrow 00:58:59.202$  and I'm doing mobility during the day

NOTE Confidence: 0.91715529375

 $00:58:59.202 \longrightarrow 00:59:01.538$  and so hopefully a kinda Janet question.

NOTE Confidence: 0.91715529375

00:59:01.538 --> 00:59:02.399 I'm guessing right,

NOTE Confidence: 0.91715529375

00:59:02.400 --> 00:59:03.700 but I'm also hopefully giving

NOTE Confidence: 0.91715529375

 $00:59:03.700 \longrightarrow 00:59:05.270$  coordinated signals and so the time.

NOTE Confidence: 0.91715529375

00:59:05.270 --> 00:59:07.088 Doing the same signal through a

NOTE Confidence: 0.91715529375

 $00:59:07.088 \longrightarrow 00:59:08.606$  different messenger to the peripheral

NOTE Confidence: 0.91715529375

 $00:59:08.606 \longrightarrow 00:59:10.384$  clocks as I am to the brain.

NOTE Confidence: 0.91715529375

 $00:59:10.390 \longrightarrow 00:59:11.618$  Hopefully that makes sense.

NOTE Confidence: 0.906439613

 $00:59:14.140 \longrightarrow 00:59:16.092$  Thanks, and I think we have time for

NOTE Confidence: 0.906439613

00:59:16.092 --> 00:59:18.173 one more question and this is I think

NOTE Confidence: 0.906439613

 $00{:}59{:}18.173 \dashrightarrow 00{:}59{:}20.332$  a difficult one to in the COVID era.

NOTE Confidence: 0.906439613

 $00:59:20.332 \longrightarrow 00:59:22.030$  There are many patients requiring high

NOTE Confidence: 0.906439613

 $00:59:22.089 \longrightarrow 00:59:24.366$  levels of sedation for a long period of time.

NOTE Confidence: 0.906439613

 $00:59:24.370 \longrightarrow 00:59:25.996$  How do you approach sleep management

 $00:59:25.996 \longrightarrow 00:59:27.590$  in these types of patients?

NOTE Confidence: 0.846119808695652

 $00:59:27.740 \longrightarrow 00:59:30.080$  I have no idea, so you know at the Clover

NOTE Confidence: 0.846119808695652

00:59:30.146 --> 00:59:32.386 things the kovid issue has been really

NOTE Confidence: 0.846119808695652

00:59:32.386 --> 00:59:34.498 hard 'cause we've had drug shortages,

NOTE Confidence: 0.846119808695652

 $00:59:34.500 \longrightarrow 00:59:37.676$  so we've picked a lot of drugs that a lot of

NOTE Confidence: 0.846119808695652

 $00:59:37.676 \longrightarrow 00:59:40.372$  us would not take off the shelf otherwise.

NOTE Confidence: 0.846119808695652

 $00:59:40.380 \longrightarrow 00:59:43.089$  Lot of lot more use of benzos,

NOTE Confidence: 0.846119808695652

 $00.59.43.090 \longrightarrow 00.59.44.530$  especially in the surge one

NOTE Confidence: 0.846119808695652

 $00:59:44.530 \longrightarrow 00:59:46.260$  because that was all we had.

NOTE Confidence: 0.846119808695652

 $00:59:46.260 \longrightarrow 00:59:48.588$  And so the question is sort of academic

NOTE Confidence: 0.846119808695652

 $00{:}59{:}48.588 \dashrightarrow 00{:}59{:}50.698$  in terms of the major said it is.

NOTE Confidence: 0.846119808695652

 $00:59:50.700 \longrightarrow 00:59:53.193$  I think the there's a little teeny bit of

NOTE Confidence: 0.846119808695652

 $00:59:53.193 \longrightarrow 00:59:55.360$  propofol evidence and probably more robust

NOTE Confidence: 0.846119808695652

 $00:59:55.360 \longrightarrow 00:59:57.758$  Dex medata mediene evidence that that is

NOTE Confidence: 0.846119808695652

00:59:57.758 --> 00:59:59.798 the best thing if you need a sedative.

NOTE Confidence: 0.846119808695652

 $00{:}59{:}59.800 \dashrightarrow 01{:}00{:}01.536$  That is the best thing you can do

01:00:01.536 --> 01:00:03.368 in terms of sleep architecture and

NOTE Confidence: 0.846119808695652

 $01:00:03.368 \longrightarrow 01:00:05.352$  so it's not so much the COVID era.

NOTE Confidence: 0.846119808695652

 $01:00:05.360 \longrightarrow 01:00:07.880$  I think that the question can

NOTE Confidence: 0.846119808695652

 $01:00:07.880 \longrightarrow 01:00:09.140$  just be rephrased.

NOTE Confidence: 0.846119808695652

 $01:00:09.140 \longrightarrow 01:00:11.092$  To what do you do when you need

NOTE Confidence: 0.846119808695652

01:00:11.092 --> 01:00:12.688 deep sedation to keep the patient

NOTE Confidence: 0.846119808695652

01:00:12.688 --> 01:00:14.870 safe and one is I challenged you?

NOTE Confidence: 0.846119808695652

 $01:00:14.870 \longrightarrow 01:00:15.670$  Do you really need to?

NOTE Confidence: 0.846119808695652

 $01{:}00{:}15.670 \dashrightarrow 01{:}00{:}17.062$  Do you really need deep sedation

NOTE Confidence: 0.846119808695652

 $01:00:17.062 \longrightarrow 01:00:18.260$  to keep the patient safe?

NOTE Confidence: 0.846119808695652

01:00:18.260 --> 01:00:19.862 There's certainly a subset of patients

NOTE Confidence: 0.846119808695652

 $01:00:19.862 \longrightarrow 01:00:21.699$  that that's true for for those folks,

NOTE Confidence: 0.846119808695652

01:00:21.700 --> 01:00:22.756 I think you start with Dex,

NOTE Confidence: 0.846119808695652

 $01:00:22.760 \longrightarrow 01:00:24.020$  Medata, mediene and you,

NOTE Confidence: 0.846119808695652

 $01:00:24.020 \longrightarrow 01:00:26.375$  and then you end up following the

 $01:00:26.375 \longrightarrow 01:00:28.793$  PADIS guidelines of using the minimal

NOTE Confidence: 0.846119808695652

 $01{:}00{:}28.793 \dashrightarrow 01{:}00{:}31.032$  necessary narcotic sedation that you can

NOTE Confidence: 0.846119808695652

 $01:00:31.032 \longrightarrow 01:00:32.976$  because there's no other good choice.

NOTE Confidence: 0.846119808695652

 $01:00:32.980 \longrightarrow 01:00:34.072$  There's nothing and there's

NOTE Confidence: 0.846119808695652

01:00:34.072 --> 01:00:36.016 nothing else you can do, and,

NOTE Confidence: 0.846119808695652

 $01{:}00{:}36.016 \dashrightarrow 01{:}00{:}38.896$  and I think this is.

NOTE Confidence: 0.846119808695652

 $01:00:38.900 \longrightarrow 01:00:41.156$  This is one of our great challenges is

NOTE Confidence: 0.846119808695652

01:00:41.156 --> 01:00:43.630 what do you do when when your desire

NOTE Confidence: 0.846119808695652

01:00:43.630 --> 01:00:45.560 to promote sleep runs up against

NOTE Confidence: 0.846119808695652

01:00:45.560 --> 01:00:47.720 other ICU needs and that's just that,

NOTE Confidence: 0.846119808695652

 $01:00:47.720 \longrightarrow 01:00:49.220$  you just have to compromise,

NOTE Confidence: 0.846119808695652

01:00:49.220 --> 01:00:51.140 but I would start with DXM in automating,

NOTE Confidence: 0.846119808695652

 $01:00:51.140 \longrightarrow 01:00:53.569$  then go to narcotic and avoid benzos.

NOTE Confidence: 0.846119808695652

 $01:00:53.570 \longrightarrow 01:00:56.436$  But that's more based on that based

NOTE Confidence: 0.846119808695652

 $01:00:56.436 \longrightarrow 01:00:57.804$  on the decks management is based

NOTE Confidence: 0.846119808695652

01:00:57.804 --> 01:00:58.880 on sleep architecture.

 $01:00:58.880 \dashrightarrow 01:01:01.182$  The rest is based on PADIS guidelines.

NOTE Confidence: 0.846119808695652

 $01:01:01.182 \longrightarrow 01:01:02.928$  'cause that's where the evidence is

NOTE Confidence: 0.88901292

 $01:01:03.440 \longrightarrow 01:01:04.670$  great. Thank you. Thank you.

NOTE Confidence: 0.88901292

01:01:04.670 --> 01:01:06.150 Gotta thank you for that.

NOTE Confidence: 0.88901292

 $01{:}01{:}06.150 \dashrightarrow 01{:}01{:}07.740$  Well, this is really been terrific.

NOTE Confidence: 0.88901292

 $01:01:07.740 \longrightarrow 01:01:09.366$  I really I've learned so much.

NOTE Confidence: 0.88901292

 $01:01:09.370 \longrightarrow 01:01:11.169$  I think everyone in the audience has

NOTE Confidence: 0.88901292

 $01{:}01{:}11.169 \dashrightarrow 01{:}01{:}13.562$  learned a lot and it's in great talk

NOTE Confidence: 0.88901292

 $01:01:13.562 \longrightarrow 01:01:14.818$  and under extreme circumstances.

NOTE Confidence: 0.88901292

 $01:01:14.820 \longrightarrow 01:01:16.130$  Being in the ICU yourself.

NOTE Confidence: 0.88901292

 $01:01:16.130 \longrightarrow 01:01:17.770$  So really we appreciate it.

NOTE Confidence: 0.88901292

 $01:01:17.770 \longrightarrow 01:01:19.845$  So thanks everybody for attending everyone.

NOTE Confidence: 0.88901292

01:01:19.845 --> 01:01:21.240 We don't have conference.

NOTE Confidence: 0.88901292

01:01:21.240 --> 01:01:23.160 Next week is Thanksgiving so happy

NOTE Confidence: 0.88901292

 $01:01:23.160 \longrightarrow 01:01:24.253$  Thanksgiving everyone and will

 $01{:}01{:}24.253 \dashrightarrow 01{:}01{:}25.947$  convene again in a couple of weeks.

NOTE Confidence: 0.88901292

01:01:25.950 --> 01:01:26.700 By<br/>e bye everyone

NOTE Confidence: 0.840026064

 $01{:}01{:}27.110 \dashrightarrow 01{:}01{:}30.000$  sounds good. Take care everyone.