WEBVTT

NOTE duration: "01:05:46.6880000"

NOTE language:en-us

NOTE Confidence: 0.83665353

00:00:13.160 --> 00:00:15.540 Why don't I just start?

NOTE Confidence: 0.83665353

00:00:15.540 --> 00:00:19.057 I think people are spilling in from

NOTE Confidence: 0.83665353

 $00{:}00{:}19.057 \dashrightarrow 00{:}00{:}21.657$ faculty meeting as I mentioned.

NOTE Confidence: 0.83665353

00:00:21.660 --> 00:00:23.914 I just want to welcome you today

NOTE Confidence: 0.83665353

00:00:23.914 --> 00:00:25.989 to the Yale Sleep Seminar.

NOTE Confidence: 0.83665353

 $00:00:25.990 \longrightarrow 00:00:28.018$ I just have a few announcements

NOTE Confidence: 0.83665353

 $00{:}00{:}28.018 \to 00{:}00{:}30.319$ before I introduce our speaker today.

NOTE Confidence: 0.83665353

 $00{:}00{:}30.320 \dashrightarrow 00{:}00{:}31.764$ First, everyone please make

NOTE Confidence: 0.83665353

 $00:00:31.764 \longrightarrow 00:00:33.208$ sure to mute yourself.

NOTE Confidence: 0.83665353

00:00:33.210 --> 00:00:35.737 Secondly, in order to receive CME credit,

NOTE Confidence: 0.83665353

 $00:00:35.740 \longrightarrow 00:00:37.924$ you're going to check the chat box

NOTE Confidence: 0.83665353

 $00:00:37.924 \longrightarrow 00:00:40.429$ or the chat room for instructions.

NOTE Confidence: 0.83665353

 $00:00:40.430 \longrightarrow 00:00:43.678$ You can text the unique ID for this

NOTE Confidence: 0.83665353

00:00:43.678 --> 00:00:45.940 conference until 3:15 PM and you

 $00:00:45.940 \longrightarrow 00:00:48.442$ have to register with the LC ME

NOTE Confidence: 0.83665353

 $00{:}00{:}48.442 \dashrightarrow 00{:}00{:}50.969$ before you before you can do this.

NOTE Confidence: 0.83665353

00:00:50.970 --> 00:00:52.896 If you have any questions during

NOTE Confidence: 0.83665353

 $00:00:52.896 \longrightarrow 00:00:53.538$ the presentation,

NOTE Confidence: 0.83665353

 $00{:}00{:}53.540 \dashrightarrow 00{:}00{:}55.787$ please just write in the chat box.

NOTE Confidence: 0.83665353

 $00:00:55.790 \longrightarrow 00:00:58.670$ I'm at the end if we have some time,

NOTE Confidence: 0.83665353

 $00:00:58.670 \longrightarrow 00:01:00.668$ we can go through that recorded

NOTE Confidence: 0.83665353

 $00:01:00.668 \longrightarrow 00:01:02.673$ versions of these lectures will be

NOTE Confidence: 0.83665353

 $00:01:02.673 \longrightarrow 00:01:04.193$ available online within two weeks

NOTE Confidence: 0.83665353

 $00{:}01{:}04.193 \dashrightarrow 00{:}01{:}06.380$ at the link provided in the chat.

NOTE Confidence: 0.83665353

00:01:06.380 --> 00:01:06.982 And finally,

NOTE Confidence: 0.83665353

 $00:01:06.982 \longrightarrow 00:01:09.390$ please feel free to share any of these

NOTE Confidence: 0.83665353

 $00{:}01{:}09.452 \dashrightarrow 00{:}01{:}11.517$ announcements for the weekly lecture

NOTE Confidence: 0.83665353

 $00:01:11.517 \longrightarrow 00:01:13.994$ series to anyone who's interested in

NOTE Confidence: 0.83665353

 $00:01:13.994 \longrightarrow 00:01:16.070$ give Debbie Lovejoy the email contact.

 $00:01:16.070 \dashrightarrow 00:01:18.254$ So I also want to make a couple

NOTE Confidence: 0.83665353

00:01:18.254 --> 00:01:19.760 of specific announcements.

NOTE Confidence: 0.83665353

 $00:01:19.760 \longrightarrow 00:01:22.432$ One to let you know that the sleep

NOTE Confidence: 0.83665353

 $00:01:22.432 \longrightarrow 00:01:24.447$ seminar next week is next week,

NOTE Confidence: 0.83665353

 $00:01:24.450 \longrightarrow 00:01:25.088$ February 24th.

NOTE Confidence: 0.83665353

 $00{:}01{:}25.088 \dashrightarrow 00{:}01{:}27.002$ I'm sorry the sleep someone are

NOTE Confidence: 0.83665353

00:01:27.002 --> 00:01:29.296 neck is not going to happen next

NOTE Confidence: 0.83665353

 $00:01:29.296 \longrightarrow 00:01:30.891$ week on February 24th because

NOTE Confidence: 0.83665353

 $00:01:30.953 \longrightarrow 00:01:32.489$ of this sectional retreat.

NOTE Confidence: 0.83665353

00:01:32.490 --> 00:01:34.578 And it's also not going to happen on

NOTE Confidence: 0.83665353

00:01:34.578 --> 00:01:37.174 March 3rd the following week because of

NOTE Confidence: 0.83665353

00:01:37.174 --> 00:01:39.189 the Connecticut Plumbers Society meeting.

NOTE Confidence: 0.83665353

 $00:01:39.190 \longrightarrow 00:01:41.227$ So the next time we meet will

NOTE Confidence: 0.83665353

 $00:01:41.227 \longrightarrow 00:01:43.695$ be March 10th when we do our

NOTE Confidence: 0.83665353

 $00:01:43.695 \longrightarrow 00:01:45.219$ joint Yale Harvard Conference.

NOTE Confidence: 0.83665353

 $00:01:45.220 \longrightarrow 00:01:48.028$ That's going to be held by Doctor Up.

 $00:01:48.030 \longrightarrow 00:01:49.334$ How much to see?

NOTE Confidence: 0.83665353

00:01:49.334 --> 00:01:50.638 Who's a Sleep Medicine?

NOTE Confidence: 0.83665353

 $00:01:50.640 \longrightarrow 00:01:53.154$ Felons going to speak about the

NOTE Confidence: 0.83665353

00:01:53.154 --> 00:01:54.830 COPD Orsay overlap syndrome.

NOTE Confidence: 0.83665353

 $00{:}01{:}54.830 \to 00{:}01{:}57.483$ So with that it's my great pleasure

NOTE Confidence: 0.83665353

 $00:01:57.483 \longrightarrow 00:02:00.018$ pleasure to introduce our today's speaker,

NOTE Confidence: 0.83665353

 $00:02:00.020 \longrightarrow 00:02:00.464$ doctor,

NOTE Confidence: 0.83665353

 $00:02:00.464 \longrightarrow 00:02:00.908$ faculty,

NOTE Confidence: 0.83665353

 $00:02:00.908 \longrightarrow 00:02:03.128$ Doctor Fakel completing her medical

NOTE Confidence: 0.83665353

 $00{:}02{:}03.128 \dashrightarrow 00{:}02{:}05.282$ training at Georgetown and then

NOTE Confidence: 0.83665353

 $00:02:05.282 \longrightarrow 00:02:07.177$ spent several years at Northwestern

NOTE Confidence: 0.83665353

 $00:02:07.177 \longrightarrow 00:02:09.097$ where she completed her residency

NOTE Confidence: 0.83665353

 $00{:}02{:}09.097 \dashrightarrow 00{:}02{:}11.263$ in OBGYN and have fellowship and

NOTE Confidence: 0.83665353

00:02:11.263 --> 00:02:12.971 maternal fetal medicine as well

NOTE Confidence: 0.83665353

00:02:12.971 --> 00:02:15.260 as well as a Masters of Science

 $00:02:15.330 \longrightarrow 00:02:17.169$ and clinical investigation.

NOTE Confidence: 0.83665353

 $00{:}02{:}17.170 \dashrightarrow 00{:}02{:}19.921$ And I see that that you published

NOTE Confidence: 0.83665353

00:02:19.921 --> 00:02:21.560 with Doctor Phil's nice,

NOTE Confidence: 0.83665353

 $00:02:21.560 \longrightarrow 00:02:24.808$ so I'm assuming that's where your contact.

NOTE Confidence: 0.83665353

00:02:24.810 --> 00:02:26.086 This nature since 2011,

NOTE Confidence: 0.83665353

 $00:02:26.086 \longrightarrow 00:02:28.000$ she has been at the University

NOTE Confidence: 0.83665353

 $00:02:28.067 \longrightarrow 00:02:30.053$ of Pittsburgh where she is now

NOTE Confidence: 0.83665353

 $00{:}02{:}30.053 \dashrightarrow 00{:}02{:}31.872$ an associate professor in the

NOTE Confidence: 0.83665353

 $00{:}02{:}31.872 \dashrightarrow 00{:}02{:}33.159$ Department of Obstetrics,

NOTE Confidence: 0.83665353

00:02:33.160 --> 00:02:35.464 Gynecology and Women's Health in the

NOTE Confidence: 0.83665353

 $00:02:35.464 \longrightarrow 00:02:37.620$ division of Maternal Fetal Medicine.

NOTE Confidence: 0.83665353

 $00:02:37.620 \longrightarrow 00:02:39.425$ Doctor Factless Research is instrumental

NOTE Confidence: 0.83665353

 $00:02:39.425 \longrightarrow 00:02:41.606$ in advancing our knowledge in the

NOTE Confidence: 0.83665353

00:02:41.606 --> 00:02:43.196 nature of sleep during pregnancy.

NOTE Confidence: 0.83665353

 $00:02:43.200 \longrightarrow 00:02:45.790$ She is a Co investigator in the

NOTE Confidence: 0.83665353

00:02:45.790 --> 00:02:48.245 Multi center new mom to be study

 $00:02:48.245 \longrightarrow 00:02:50.530$ and as I was just telling her,

NOTE Confidence: 0.83665353

 $00:02:50.530 \longrightarrow 00:02:53.410$ we're very excited about her research

NOTE Confidence: 0.83665353

 $00:02:53.410 \longrightarrow 00:02:55.940$ because it's gonna really impact.

NOTE Confidence: 0.83665353

 $00:02:55.940 \longrightarrow 00:02:57.840$ Our guidelines or clinical care

NOTE Confidence: 0.83665353

 $00:02:57.840 \longrightarrow 00:02:59.740$ of patients in the future,

NOTE Confidence: 0.83665353

 $00:02:59.740 \longrightarrow 00:03:00.880$ particularly sleep disordered

NOTE Confidence: 0.83665353

 $00:03:00.880 \longrightarrow 00:03:02.780$ breathing and and perinatal outcomes.

NOTE Confidence: 0.83665353

 $00:03:02.780 \longrightarrow 00:03:05.102$ She has authored numerous peer reviewed

NOTE Confidence: 0.83665353

 $00:03:05.102 \longrightarrow 00:03:07.435$ publications on this topic and she

NOTE Confidence: 0.83665353

 $00:03:07.435 \longrightarrow 00:03:09.235$ said well celebrated against sorry.

NOTE Confidence: 0.83665353

 $00:03:09.240 \longrightarrow 00:03:11.460$ Active clinical educator as well as

NOTE Confidence: 0.83665353

00:03:11.460 --> 00:03:13.420 recipient of many research awards,

NOTE Confidence: 0.83665353

 $00:03:13.420 \longrightarrow 00:03:14.940$ academic Rewards Education Awards.

NOTE Confidence: 0.83665353

 $00:03:14.940 \longrightarrow 00:03:17.220$ She's got the trifecta in place.

NOTE Confidence: 0.83665353

 $00:03:17.220 \longrightarrow 00:03:18.752$ So without further ado,

00:03:18.752 --> 00:03:21.050 I'd like to let Doctor Fackler

NOTE Confidence: 0.8053021

 $00:03:21.121 \longrightarrow 00:03:22.537$ start host her talk.

NOTE Confidence: 0.8053021

 $00:03:22.540 \longrightarrow 00:03:24.440$ Thank you. Well, thank you

NOTE Confidence: 0.850804715384616

 $00:03:24.440 \longrightarrow 00:03:27.326$ so much for that. Very kind

NOTE Confidence: 0.850804715384616

 $00:03:27.326 \longrightarrow 00:03:30.318$ introduction and I'm happy to be here.

NOTE Confidence: 0.850804715384616

00:03:30.320 --> 00:03:34.181 Kind of sharing some of my work in the

NOTE Confidence: 0.850804715384616

 $00:03:34.181 \longrightarrow 00:03:37.906$ work of others in the arena of sleep,

NOTE Confidence: 0.850804715384616

 $00:03:37.910 \longrightarrow 00:03:40.135$ health and the topic of

NOTE Confidence: 0.850804715384616

00:03:40.135 --> 00:03:41.915 my presentation is sleep.

NOTE Confidence: 0.850804715384616

 $00:03:41.920 \longrightarrow 00:03:43.066$ Health of question.

NOTE Confidence: 0.850804715384616

 $00{:}03{:}43.066 \dashrightarrow 00{:}03{:}45.358$ Is it a modifiable risk factor

NOTE Confidence: 0.850804715384616

 $00{:}03{:}45.358 \dashrightarrow 00{:}03{:}47.718$ for adverse pregnancy outcomes?

NOTE Confidence: 0.850804715384616

 $00:03:47.720 \longrightarrow 00:03:49.172$ And as you mentioned,

NOTE Confidence: 0.850804715384616

 $00:03:49.172 \longrightarrow 00:03:51.955$ I got started in this work at

NOTE Confidence: 0.850804715384616

00:03:51.955 --> 00:03:54.071 Northwestern through kind of

NOTE Confidence: 0.850804715384616

 $00:03:54.071 \longrightarrow 00:03:56.187$ collaboration with Doctor Phil.

 $00:03:56.190 \longrightarrow 00:03:57.279$ A see who.

NOTE Confidence: 0.850804715384616

 $00:03:57.279 \longrightarrow 00:04:00.340$ That was part of my mentor ship team.

NOTE Confidence: 0.850804715384616

 $00:04:00.340 \longrightarrow 00:04:02.392$ As a fellow and through that

NOTE Confidence: 0.850804715384616

00:04:02.392 --> 00:04:03.760 kind of initial work,

NOTE Confidence: 0.850804715384616

 $00:04:03.760 \longrightarrow 00:04:06.262$ I've been very fortunate to be

NOTE Confidence: 0.850804715384616

 $00:04:06.262 \longrightarrow 00:04:09.408$ involved in a lot of multi center.

NOTE Confidence: 0.850804715384616

00:04:09.410 --> 00:04:11.822 Studies that have kind of led

NOTE Confidence: 0.850804715384616

 $00{:}04{:}11.822 \dashrightarrow 00{:}04{:}13.430$ to publications and expansion

NOTE Confidence: 0.850804715384616

 $00:04:13.498 \longrightarrow 00:04:15.268$ of the data in this arena,

NOTE Confidence: 0.850804715384616

 $00{:}04{:}15.270 \dashrightarrow 00{:}04{:}17.734$ so I'm very excited to share some

NOTE Confidence: 0.850804715384616

 $00{:}04{:}17.734 \dashrightarrow 00{:}04{:}20.020$ of this work with you today.

NOTE Confidence: 0.850804715384616

 $00:04:20.020 \longrightarrow 00:04:22.174$ I don't have any conflicts of

NOTE Confidence: 0.850804715384616

 $00{:}04{:}22.174 \dashrightarrow 00{:}04{:}25.144$ interest and I always like to start my

NOTE Confidence: 0.850804715384616

 $00:04:25.144 \longrightarrow 00:04:27.340$ slide with my favorite sneak quote,

NOTE Confidence: 0.850804715384616

 $00:04:27.340 \longrightarrow 00:04:29.170$ which is from a researcher,

 $00:04:29.170 \longrightarrow 00:04:30.379$ Doctor Alan Rahxephon.

NOTE Confidence: 0.850804715384616

 $00:04:30.379 \longrightarrow 00:04:32.797$ If sleep does not serve an

NOTE Confidence: 0.850804715384616

00:04:32.797 --> 00:04:35.074 absolutely vital function that is

NOTE Confidence: 0.850804715384616

 $00:04:35.074 \longrightarrow 00:04:37.324$ the biggest mistake the evolutionary

NOTE Confidence: 0.850804715384616

 $00:04:37.324 \longrightarrow 00:04:38.790$ process has ever made.

NOTE Confidence: 0.850804715384616

 $00:04:38.790 \longrightarrow 00:04:40.939$ So my outline for today we're going

NOTE Confidence: 0.850804715384616

00:04:40.939 --> 00:04:43.604 to start by kind of just reviewing

NOTE Confidence: 0.850804715384616

 $00:04:43.604 \longrightarrow 00:04:45.694$ sleep disruption and its potential

NOTE Confidence: 0.850804715384616

 $00{:}04{:}45.694 \dashrightarrow 00{:}04{:}48.150$ linked to adverse pregnancy outcomes.

NOTE Confidence: 0.850804715384616

 $00:04:48.150 \longrightarrow 00:04:51.174$ Focusing on the question of is

NOTE Confidence: 0.850804715384616

00:04:51.174 --> 00:04:52.686 there biologic plausibility?

NOTE Confidence: 0.850804715384616

 $00:04:52.690 \longrightarrow 00:04:55.156$ And then I'm going to review

NOTE Confidence: 0.850804715384616

 $00:04:55.156 \longrightarrow 00:04:57.719$ studies that have given us some

NOTE Confidence: 0.850804715384616

 $00{:}04{:}57.719 \dashrightarrow 00{:}04{:}59.809$ good objective data on sleep,

NOTE Confidence: 0.850804715384616

 $00:04:59.810 \longrightarrow 00:05:00.899$ destruction and pregnancy,

NOTE Confidence: 0.850804715384616

 $00:05:00.899 \longrightarrow 00:05:04.000$ as well as the link of that sleep

 $00:05:04.000 \longrightarrow 00:05:06.940$ disruption has an adverse pregnancy outcomes,

NOTE Confidence: 0.850804715384616

00:05:06.940 --> 00:05:08.194 principally reviewing today.

NOTE Confidence: 0.850804715384616

00:05:08.194 --> 00:05:10.702 The link to just stational diabetes,

NOTE Confidence: 0.850804715384616

00:05:10.710 --> 00:05:12.918 hypertension and create clamp

NOTE Confidence: 0.850804715384616

 $00:05:12.918 \longrightarrow 00:05:15.678$ Sia and Preacher in Burg.

NOTE Confidence: 0.850804715384616

 $00:05:15.680 \longrightarrow 00:05:18.144$ And then we'll end with the question

NOTE Confidence: 0.850804715384616

 $00:05:18.144 \longrightarrow 00:05:20.498$ that I posed at the beginning.

NOTE Confidence: 0.850804715384616

 $00{:}05{:}20.500 \dashrightarrow 00{:}05{:}22.755$ Is sleep disruption a modifiable

NOTE Confidence: 0.850804715384616

00:05:22.755 --> 00:05:24.559 respecter for adverse pregnancy

NOTE Confidence: 0.850804715384616

 $00:05:24.559 \longrightarrow 00:05:27.002$ outcomes will review some of kind of

NOTE Confidence: 0.850804715384616

 $00:05:27.002 \longrightarrow 00:05:29.007$ the literature out there on sleep

NOTE Confidence: 0.850804715384616

 $00{:}05{:}29.007 \dashrightarrow 00{:}05{:}30.969$ interventions and focus on a CPAP

NOTE Confidence: 0.850804715384616

 $00{:}05{:}30.969 \dashrightarrow 00{:}05{:}34.180$ trial that is currently recruiting.

NOTE Confidence: 0.850804715384616

 $00{:}05{:}34.180 \dashrightarrow 00{:}05{:}37.444$ So when we think of sleep and its

NOTE Confidence: 0.850804715384616

00:05:37.444 --> 00:05:40.129 potential role in health in general,

 $00:05:40.130 \longrightarrow 00:05:42.680$ we think of how you know.

NOTE Confidence: 0.850804715384616

 $00{:}05{:}42.680 \dashrightarrow 00{:}05{:}44.810$ We know that sleep disruption

NOTE Confidence: 0.850804715384616

 $00:05:44.810 \longrightarrow 00:05:47.780$ can come in a variety of forms.

NOTE Confidence: 0.850804715384616

 $00:05:47.780 \longrightarrow 00:05:51.836$ It can come in short and sleep duration.

NOTE Confidence: 0.850804715384616

 $00:05:51.840 \longrightarrow 00:05:53.072$ Sleep fragmentation,

NOTE Confidence: 0.850804715384616

00:05:53.072 --> 00:05:54.304 circadian disruption,

NOTE Confidence: 0.850804715384616

 $00:05:54.304 \longrightarrow 00:05:54.920$ or,

NOTE Confidence: 0.850804715384616

 $00:05:54.920 \longrightarrow 00:05:58.546$ in the case of some Fabian specifically

NOTE Confidence: 0.850804715384616

 $00{:}05{:}58.546 \dashrightarrow 00{:}06{:}01.029$ nocturnal hypoxemia or nocturnal

NOTE Confidence: 0.850804715384616

00:06:01.029 --> 00:06:03.540 intrathoracic pressure swings,

NOTE Confidence: 0.850804715384616

 $00:06:03.540 \longrightarrow 00:06:06.978$ and that these derangements and sleep

NOTE Confidence: 0.850804715384616

 $00:06:06.978 \longrightarrow 00:06:10.716$ have been linked to the following

NOTE Confidence: 0.850804715384616

 $00:06:10.716 \longrightarrow 00:06:14.016$ derangements in our taxes, theology.

NOTE Confidence: 0.850804715384616

 $00{:}06{:}14.016 \dashrightarrow 00{:}06{:}16.480$ Dys regulation of adipocyte kinds.

NOTE Confidence: 0.850804715384616

 $00:06:16.480 \longrightarrow 00:06:20.870$ Activation of the HPA access.

NOTE Confidence: 0.850804715384616

 $00:06:20.870 \longrightarrow 00:06:22.805$ Surges of cortisol that are

 $00:06:22.805 \longrightarrow 00:06:25.285$ generally in this time with our

NOTE Confidence: 0.850804715384616

 $00{:}06{:}25.285 \dashrightarrow 00{:}06{:}27.640$ circadian rhythms and increase in

NOTE Confidence: 0.850804715384616

00:06:27.640 --> 00:06:30.026 sympathetic activity at night and

NOTE Confidence: 0.850804715384616

 $00:06:30.026 \longrightarrow 00:06:32.558$ as well as oxidative stress and

NOTE Confidence: 0.850804715384616

 $00:06:32.558 \longrightarrow 00:06:34.576$ inflammation and outside of pregnancy.

NOTE Confidence: 0.850804715384616

 $00:06:34.576 \longrightarrow 00:06:37.187$ There has been a lot of research

NOTE Confidence: 0.850804715384616

00:06:37.187 --> 00:06:39.879 out of slinkies sleep disruptions.

NOTE Confidence: 0.850804715384616

 $00:06:39.880 \longrightarrow 00:06:41.604$ These alterations in pathophysiology

NOTE Confidence: 0.850804715384616

 $00:06:41.604 \longrightarrow 00:06:42.466$ and hypertension,

NOTE Confidence: 0.850804715384616

00:06:42.470 --> 00:06:44.330 cardiac disease and diabetes,

NOTE Confidence: 0.850804715384616

 $00:06:44.330 \longrightarrow 00:06:47.120$ and what my interest was when

NOTE Confidence: 0.850804715384616

 $00{:}06{:}47.204 \dashrightarrow 00{:}06{:}49.778$ I started in fellowship at was

NOTE Confidence: 0.850804715384616

00:06:49.778 --> 00:06:51.065 to understand how.

NOTE Confidence: 0.850804715384616

 $00{:}06{:}51.070 \longrightarrow 00{:}06{:}53.930$ Sleep through similar mechanisms can

NOTE Confidence: 0.850804715384616

 $00:06:53.930 \longrightarrow 00:06:56.218$ potentially influence pregnancy outcomes

00:06:56.218 --> 00:06:59.059 and kind of when we think about it,

NOTE Confidence: 0.850804715384616

 $00{:}06{:}59.060 \dashrightarrow 00{:}07{:}01.514$ we know that a pregnant woman

NOTE Confidence: 0.850804715384616

00:07:01.514 --> 00:07:03.726 can come into pregnancy with

NOTE Confidence: 0.850804715384616

 $00:07:03.726 \longrightarrow 00:07:05.702$ sleep disruptions that preexist

NOTE Confidence: 0.850804715384616

 $00:07:05.702 \longrightarrow 00:07:08.172$ they could have issues with

NOTE Confidence: 0.8656727

00:07:08.254 --> 00:07:10.338 insomnia or sleep duration,

NOTE Confidence: 0.8656727

 $00:07:10.340 \longrightarrow 00:07:11.280$ sleep fragmentation.

NOTE Confidence: 0.8656727

 $00:07:11.280 \longrightarrow 00:07:14.570$ They could have pre existing sleep apnea.

NOTE Confidence: 0.8656727

 $00{:}07{:}14.570 \dashrightarrow 00{:}07{:}17.678$ However, we also know that pregnancy in

NOTE Confidence: 0.8656727

 $00:07:17.678 \longrightarrow 00:07:21.530$ and of itself predisposes to sleep changes.

NOTE Confidence: 0.8656727

 $00{:}07{:}21.530 \dashrightarrow 00{:}07{:}24.456$ And these sleep changes can lead to

NOTE Confidence: 0.8656727

00:07:24.456 --> 00:07:27.471 more disturbed sleep on top of any pre

NOTE Confidence: 0.8656727

 $00:07:27.471 \longrightarrow 00:07:29.782$ existing issues they can in introduce

NOTE Confidence: 0.8656727

00:07:29.782 --> 00:07:32.547 new sleep problems and certainly

NOTE Confidence: 0.8656727

00:07:32.547 --> 00:07:34.759 for sleep disordered breathing.

NOTE Confidence: 0.8656727

 $00{:}07{:}34.760 \dashrightarrow 00{:}07{:}37.336$ I'll show you data that there is an

 $00:07:37.336 \longrightarrow 00:07:39.652$ increase in sleep disordered breathing

NOTE Confidence: 0.8656727

 $00{:}07{:}39.652 \dashrightarrow 00{:}07{:}42.856$ as pregnancy progresses due to the

NOTE Confidence: 0.8656727

 $00:07:42.856 \longrightarrow 00:07:44.370$ pathophysiologic changes associated

NOTE Confidence: 0.8656727

00:07:44.370 --> 00:07:47.082 with normal weight gain in pregnancy

NOTE Confidence: 0.8656727

 $00{:}07{:}47.082 \dashrightarrow 00{:}07{:}49.338$ and plasma volume expansion and edema.

NOTE Confidence: 0.8656727

 $00:07:49.338 \longrightarrow 00:07:51.837$ So we have that women can enter

NOTE Confidence: 0.8656727

 $00:07:51.837 \longrightarrow 00:07:53.902$ pregnancy with sleep problems or

NOTE Confidence: 0.8656727

 $00{:}07{:}53.902 \dashrightarrow 00{:}07{:}56.002$ can develop sleep problems because

NOTE Confidence: 0.8656727

 $00:07:56.002 \longrightarrow 00:07:57.907$ of the changes of pregnancy.

NOTE Confidence: 0.8656727

 $00:07:57.910 \longrightarrow 00:08:00.310$ And we know that those we problems have

NOTE Confidence: 0.8656727

 $00:08:00.310 \longrightarrow 00:08:02.771$ been linked to those pathways that I

NOTE Confidence: 0.8656727

 $00:08:02.771 \longrightarrow 00:08:04.566$ mentioned earlier and what pregnancy

NOTE Confidence: 0.8656727

 $00{:}08{:}04.631 \dashrightarrow 00{:}08{:}06.713$ researchers know is that those very

NOTE Confidence: 0.8656727

 $00{:}08{:}06.713 \dashrightarrow 00{:}08{:}08.768$ same pathways have been linked to

NOTE Confidence: 0.8656727

 $00:08:08.768 \longrightarrow 00:08:10.084$ metabolic dysfunction in pregnancy

 $00:08:10.084 \longrightarrow 00:08:11.771$ as well as endothelial abnormalities

NOTE Confidence: 0.8656727

 $00{:}08{:}11.771 \dashrightarrow 00{:}08{:}13.661$ in pregnancy and those have been

NOTE Confidence: 0.8656727

 $00:08:13.661 \longrightarrow 00:08:15.589$ linked to adverse pregnancy outcomes.

NOTE Confidence: 0.8656727

 $00:08:15.590 \longrightarrow 00:08:18.326$ So there is a lot of biological plausibility

NOTE Confidence: 0.8656727

 $00:08:18.326 \longrightarrow 00:08:20.817$ and interest in understanding the role of.

NOTE Confidence: 0.8656727

00:08:20.820 --> 00:08:23.940 Sleep in pregnancy health.

NOTE Confidence: 0.8656727

 $00:08:23.940 \longrightarrow 00:08:26.040$ And when we think of sleep in

NOTE Confidence: 0.8656727

00:08:26.040 --> 00:08:28.280 pregnancy or do an Internet search,

NOTE Confidence: 0.8656727

 $00:08:28.280 \longrightarrow 00:08:30.284$ we often come across kind of

NOTE Confidence: 0.8656727

 $00:08:30.284 \longrightarrow 00:08:31.286$ pictures like this.

NOTE Confidence: 0.8656727

 $00:08:31.290 \longrightarrow 00:08:33.362$ But what those of us who practice

NOTE Confidence: 0.8656727

00:08:33.362 --> 00:08:35.296 either in the pregnancy world or

NOTE Confidence: 0.8656727

 $00{:}08{:}35.296 \dashrightarrow 00{:}08{:}37.585$ in the sleep world know that it's

NOTE Confidence: 0.8656727

 $00{:}08{:}37.655 \dashrightarrow 00{:}08{:}39.845$ often not quite a prettier picture

NOTE Confidence: 0.8656727

 $00:08:39.845 \longrightarrow 00:08:42.309$ and that sleep problems are a real

NOTE Confidence: 0.8656727

 $00:08:42.309 \longrightarrow 00:08:44.307$ clinical issue for our pregnant moms,

 $00{:}08{:}44.310 \dashrightarrow 00{:}08{:}46.648$ and it's for a variety of reasons.

NOTE Confidence: 0.8656727

00:08:46.650 --> 00:08:47.990 As I mentioned earlier,

NOTE Confidence: 0.8656727

00:08:47.990 --> 00:08:50.000 you can either come into pregnancy

NOTE Confidence: 0.8656727

 $00:08:50.063 \longrightarrow 00:08:51.883$ with previous pre existing problem

NOTE Confidence: 0.8656727

 $00{:}08{:}51.883 \dashrightarrow 00{:}08{:}54.066$ that gets exacerbated or you can

NOTE Confidence: 0.8656727

 $00:08:54.066 \longrightarrow 00:08:55.266$ develop a new problem.

NOTE Confidence: 0.8656727

 $00:08:55.270 \longrightarrow 00:08:58.420$ Whether that be sleep apnea that can

NOTE Confidence: 0.8656727

 $00{:}08{:}58.420 \dashrightarrow 00{:}09{:}01.160$ disrupt your sleep but also other

NOTE Confidence: 0.8656727

 $00:09:01.160 \longrightarrow 00:09:04.198$ things like back pain and the increase

NOTE Confidence: 0.8656727

 $00:09:04.283 \longrightarrow 00:09:07.146$ in reflex disease as well as the

NOTE Confidence: 0.8656727

 $00:09:07.146 \longrightarrow 00:09:10.128$ increased need to wake up and urinate

NOTE Confidence: 0.8656727

00:09:10.128 --> 00:09:12.750 at night can all disrupt sleep.

NOTE Confidence: 0.8656727

 $00:09:12.750 \longrightarrow 00:09:14.310$ For a pregnant woman,

NOTE Confidence: 0.8656727

 $00{:}09{:}14.310 \dashrightarrow 00{:}09{:}16.650$ we know that restless leg syndrome

NOTE Confidence: 0.8656727

 $00:09:16.728 \longrightarrow 00:09:19.028$ symptoms are increased as pregnancy

00:09:19.028 --> 00:09:21.328 progressives and that can lead

NOTE Confidence: 0.8656727

00:09:21.404 --> 00:09:22.799 to sleep disruption.

NOTE Confidence: 0.8656727

 $00:09:22.800 \longrightarrow 00:09:25.831$ And we also know that the hormonal

NOTE Confidence: 0.8656727

 $00:09:25.831 \longrightarrow 00:09:28.600$ changes that occur in pregnancy can.

NOTE Confidence: 0.8656727

 $00:09:28.600 \longrightarrow 00:09:31.876$ Ultra Moudan can alter other CNS

NOTE Confidence: 0.8656727

 $00:09:31.876 \longrightarrow 00:09:34.060$ functions that can ultimately

NOTE Confidence: 0.8656727

 $00{:}09{:}34.151 \dashrightarrow 00{:}09{:}36.966$ lead to disrupt disrupted sleep.

NOTE Confidence: 0.8343823

 $00:09:39.490 \longrightarrow 00:09:41.282$ What I'm going to review now is

NOTE Confidence: 0.8343823

 $00:09:41.282 \longrightarrow 00:09:42.945$ what was alluded to earlier than

NOTE Confidence: 0.8343823

 $00:09:42.945 \longrightarrow 00:09:44.619$ you Mom to be pregnancy cohort.

NOTE Confidence: 0.8343823

 $00:09:44.620 \longrightarrow 00:09:46.756$ I'm going to present a lot of data

NOTE Confidence: 0.8343823

 $00:09:46.756 \longrightarrow 00:09:48.667$ from the new mom to be cohort,

NOTE Confidence: 0.8343823

 $00:09:48.670 \dashrightarrow 00:09:50.998$ so I thought I would spend just a

NOTE Confidence: 0.8343823

 $00:09:50.998 \longrightarrow 00:09:52.484$ second reviewing with this cohort

NOTE Confidence: 0.8343823

 $00:09:52.484 \longrightarrow 00:09:54.444$ was and what kind of sleep data

NOTE Confidence: 0.8343823

 $00:09:54.502 \longrightarrow 00:09:56.307$ was collected from this cohort.

 $00:09:56.310 \longrightarrow 00:09:58.977$ So then you want to be stands

NOTE Confidence: 0.8343823

00:09:58.977 --> 00:10:00.120 for Nulliparous pregnancy.

NOTE Confidence: 0.8343823

 $00:10:00.120 \longrightarrow 00:10:01.596$ Outcomes study monitoring mothers

NOTE Confidence: 0.8343823

 $00:10:01.596 \longrightarrow 00:10:05.100$ to be and it was a cohort of 10,000.

NOTE Confidence: 0.8343823

 $00:10:05.100 \longrightarrow 00:10:07.320$ The liparus women meaning first time

NOTE Confidence: 0.8343823

 $00:10:07.320 \longrightarrow 00:10:09.262$ moms who were followed prospectively

NOTE Confidence: 0.8343823

00:10:09.262 --> 00:10:11.632 in pregnancy and the visit times

NOTE Confidence: 0.8343823

 $00:10:11.632 \longrightarrow 00:10:13.626$ in pregnancy are outlined here

NOTE Confidence: 0.8343823

 $00:10:13.626 \longrightarrow 00:10:15.476$ visit one was conducted between

NOTE Confidence: 0.8343823

 $00{:}10{:}15.476 \dashrightarrow 00{:}10{:}18.480$ six weeks and 13 weeks and six days

NOTE Confidence: 0.8343823

 $00:10:18.480 \longrightarrow 00:10:21.195$ visit to between 16 and 21 weeks

NOTE Confidence: 0.8343823

 $00{:}10{:}21.195 \dashrightarrow 00{:}10{:}23.778$ and six days and visit 3 between

NOTE Confidence: 0.8343823

 $00{:}10{:}23.778 \dashrightarrow 00{:}10{:}26.928$ 22 weeks and 29 weeks and six days.

NOTE Confidence: 0.8343823

 $00{:}10{:}26.930 \dashrightarrow 00{:}10{:}30.422$ So I'll be referring to these kind of early.

NOTE Confidence: 0.8343823

00:10:30.430 --> 00:10:33.766 Mid and late pregnancy visits throughout

 $00:10:33.766 \longrightarrow 00:10:36.510$ the slides represent the data.

NOTE Confidence: 0.8343823

 $00:10:36.510 \longrightarrow 00:10:39.100$ Sleep data was collected in various ways.

NOTE Confidence: 0.8343823

 $00:10:39.100 \longrightarrow 00:10:41.224$ There was subjective sleep data in

NOTE Confidence: 0.8343823

 $00:10:41.224 \longrightarrow 00:10:43.749$ the form of sleep surveys that was

NOTE Confidence: 0.8343823

 $00{:}10{:}43.749 \dashrightarrow 00{:}10{:}45.831$ collected at visit one and visit

NOTE Confidence: 0.8343823

 $00:10:45.831 \longrightarrow 00:10:47.610$ 3 on all participants.

NOTE Confidence: 0.8343823

 $00:10:47.610 \longrightarrow 00:10:49.265$ There was objective sleep data

NOTE Confidence: 0.8343823

 $00{:}10{:}49.265 \dashrightarrow 00{:}10{:}51.681$ that was collected on a subset of

NOTE Confidence: 0.8343823

 $00{:}10{:}51.681 \dashrightarrow 00{:}10{:}53.775$ participants at visit one and visit

NOTE Confidence: 0.8343823

00:10:53.775 --> 00:10:56.208 3A subgroup of women completed home

NOTE Confidence: 0.8343823

 $00{:}10{:}56.208 \operatorname{--}{>} 00{:}10{:}58.293$ sleep testing for sleep disordered

NOTE Confidence: 0.8343823

 $00:10:58.293 \longrightarrow 00:11:00.402$ breathing assessment and our sample

NOTE Confidence: 0.8343823

 $00:11:00.402 \longrightarrow 00:11:03.490$ size for that was about 3600 women.

NOTE Confidence: 0.8343823

 $00:11:03.490 \longrightarrow 00:11:06.101$ Add visit to a subgroup of women

NOTE Confidence: 0.8343823

00:11:06.101 --> 00:11:08.280 completed seven days of Actigraphy,

NOTE Confidence: 0.8343823

 $00{:}11{:}08.280 \dashrightarrow 00{:}11{:}11.080$ along with a sleep log and the

 $00:11:11.080 \longrightarrow 00:11:13.069$ sample size for them to.

NOTE Confidence: 0.8343823

 $00{:}11{:}13.070 \mathrel{--}{>} 00{:}11{:}15.458$ This analysis was around 780 women.

NOTE Confidence: 0.76799285

 $00:11:19.580 \longrightarrow 00:11:20.624$ Middle review first.

NOTE Confidence: 0.76799285

00:11:20.624 --> 00:11:22.712 The data on that actigraphy subset,

NOTE Confidence: 0.76799285

 $00{:}11{:}22.720 \dashrightarrow 00{:}11{:}25.510$ so it's called the new mom to be sleep

NOTE Confidence: 0.76799285

 $00:11:25.510 \longrightarrow 00:11:27.608$ duration and continuity side study.

NOTE Confidence: 0.76799285

00:11:27.610 --> 00:11:29.158 And as I mentioned,

NOTE Confidence: 0.76799285

 $00{:}11{:}29.158 \dashrightarrow 00{:}11{:}32.405$ it was conducted at visit 2 where women

NOTE Confidence: 0.76799285

 $00{:}11{:}32.405 \dashrightarrow 00{:}11{:}35.345$ were sent home to wear an actigraph

NOTE Confidence: 0.76799285

 $00:11:35.345 \longrightarrow 00:11:38.569$ and act to watch and complete asleep.

NOTE Confidence: 0.76799285

 $00{:}11{:}38.570 \dashrightarrow 00{:}11{:}39.998$ Survey athlete blog.

NOTE Confidence: 0.76799285

00:11:39.998 --> 00:11:42.854 And like I said about 780

NOTE Confidence: 0.76799285

 $00{:}11{:}42.854 \dashrightarrow 00{:}11{:}45.349$ women completed this study.

NOTE Confidence: 0.76799285

 $00:11:45.350 \longrightarrow 00:11:48.020$ And here are sleep characteristics

NOTE Confidence: 0.76799285

 $00:11:48.020 \longrightarrow 00:11:51.625$ from that subgroup that I'm in bed

00:11:51.625 --> 00:11:54.145 for this subgroup was 8.7 hours,

NOTE Confidence: 0.76799285

 $00{:}11{:}54.150 \dashrightarrow 00{:}11{:}57.720$ and in this slide I also showed

NOTE Confidence: 0.76799285

00:11:57.720 --> 00:11:59.885 the standard deviations here

NOTE Confidence: 0.76799285

 $00:11:59.885 \longrightarrow 00:12:02.590$ sleep duration with 7.4 hours.

NOTE Confidence: 0.76799285

 $00:12:02.590 \longrightarrow 00:12:05.985$ Wake after sleep onset was 42 minutes.

NOTE Confidence: 0.76799285

 $00{:}12{:}05.990 \dashrightarrow 00{:}12{:}08.456$ Sleep midpoint for the group as

NOTE Confidence: 0.76799285

 $00:12:08.456 \longrightarrow 00:12:11.220$ a whole was 3:38 AM and 27.9%

NOTE Confidence: 0.76799285

 $00:12:11.220 \longrightarrow 00:12:13.476$ of women had a sleep duration

NOTE Confidence: 0.76799285

00:12:13.476 --> 00:12:16.439 of less than 7 hours per night.

NOTE Confidence: 0.76799285

00:12:16.440 --> 00:12:18.594 Typically kind of what is used

NOTE Confidence: 0.76799285

 $00:12:18.594 \longrightarrow 00:12:20.860$ to define a short situation.

NOTE Confidence: 0.76799285

 $00:12:20.860 \longrightarrow 00:12:24.297$ 2.6% of women had a sleep ship for

NOTE Confidence: 0.76799285

 $00:12:24.297 \longrightarrow 00:12:27.068$ duration of greater than 9 hours.

NOTE Confidence: 0.76799285

 $00:12:27.070 \longrightarrow 00:12:29.416$ And this is just the distribution

NOTE Confidence: 0.76799285

 $00:12:29.416 \longrightarrow 00:12:30.980$ of the sleep duration,

NOTE Confidence: 0.76799285

 $00:12:30.980 \longrightarrow 00:12:33.194$ just to kind of show where

 $00:12:33.194 \longrightarrow 00:12:35.670$ it lies and it mimics it.

NOTE Confidence: 0.76799285

00:12:35.670 --> 00:12:36.053 Mirrors,

NOTE Confidence: 0.76799285

 $00:12:36.053 \longrightarrow 00:12:38.734$ I should say what we see in

NOTE Confidence: 0.76799285

 $00:12:38.734 \longrightarrow 00:12:40.363$ non pregnant populations where

NOTE Confidence: 0.76799285

 $00:12:40.363 \longrightarrow 00:12:43.100$ there is about a 20 to 30%.

NOTE Confidence: 0.829774

00:12:45.610 --> 00:12:47.810 Incidents of short sleep duration.

NOTE Confidence: 0.7885925

00:12:50.630 --> 00:12:52.766 Um, regarding our sleep timing data,

NOTE Confidence: 0.7885925

 $00:12:52.770 \longrightarrow 00:12:55.992$ we found that 18.9% of women had a sleep

NOTE Confidence: 0.7885925

 $00{:}12{:}55.992 \dashrightarrow 00{:}12{:}58.476$ midpoint that was later than $5{:}00$ AM.

NOTE Confidence: 0.7885925

 $00:12:58.480 \longrightarrow 00:13:00.856$ So these are people that are

NOTE Confidence: 0.7885925

 $00{:}13{:}00.856 \dashrightarrow 00{:}13{:}03.509$ considered to have late sleep timing.

NOTE Confidence: 0.7885925

 $00{:}13{:}03.510 \dashrightarrow 00{:}13{:}06.149$ What we found was that women who

NOTE Confidence: 0.7885925

00:13:06.149 --> 00:13:08.120 reported working regular day shifts

NOTE Confidence: 0.7885925

 $00:13:08.120 \longrightarrow 00:13:10.424$ tended to have earlier sleep midpoints

NOTE Confidence: 0.7885925

 $00:13:10.424 \longrightarrow 00:13:13.115$ and that the women that really had

 $00:13:13.115 \longrightarrow 00:13:15.281$ the later sleep midpoints were women

NOTE Confidence: 0.7885925

00:13:15.281 --> 00:13:17.458 who reported some form of shift work

NOTE Confidence: 0.7885925

 $00{:}13{:}17.458 \dashrightarrow 00{:}13{:}19.549$ but also unemployed individuals.

NOTE Confidence: 0.7885925

 $00:13:19.550 \longrightarrow 00:13:21.752$ Those are the individuals that tended

NOTE Confidence: 0.7885925

 $00:13:21.752 \longrightarrow 00:13:24.140$ to have more later sleep timing.

NOTE Confidence: 0.8789184

 $00:13:26.500 \longrightarrow 00:13:28.810$ Here are some other data that we

NOTE Confidence: 0.8789184

 $00:13:28.810 \longrightarrow 00:13:31.409$ got from this cohort regarding the

NOTE Confidence: 0.8789184

00:13:31.409 --> 00:13:33.964 sleep in pregnancy and demographics.

NOTE Confidence: 0.8789184

 $00{:}13{:}33.970 \dashrightarrow 00{:}13{:}35.370$ Regarding race and ethnicity,

NOTE Confidence: 0.8789184

 $00:13:35.370 \longrightarrow 00:13:37.120$ we found that non Hispanic,

NOTE Confidence: 0.8789184

00:13:37.120 --> 00:13:39.235 black and Asian women had

NOTE Confidence: 0.8789184

 $00:13:39.235 \longrightarrow 00:13:40.927$ the shortest sleep duration.

NOTE Confidence: 0.8789184

 $00{:}13{:}40.930 \dashrightarrow 00{:}13{:}42.710$ And non Hispanic black women

NOTE Confidence: 0.8789184

 $00:13:42.710 \longrightarrow 00:13:44.490$ also had the worst sleep,

NOTE Confidence: 0.8789184

 $00:13:44.490 \longrightarrow 00:13:47.700$ continuity and the latest sleep midpoint.

NOTE Confidence: 0.8789184

00:13:47.700 --> 00:13:48.552 Regarding age,

00:13:48.552 --> 00:13:51.108 we found that younger women had

NOTE Confidence: 0.8789184

 $00{:}13{:}51.108 \dashrightarrow 00{:}13{:}53.727$ the highest wake after sleep onset.

NOTE Confidence: 0.8789184

 $00:13:53.730 \longrightarrow 00:13:55.454$ The lowest sleep efficiency,

NOTE Confidence: 0.8789184

 $00:13:55.454 \longrightarrow 00:13:57.178$ the latest sleep midpoint,

NOTE Confidence: 0.8789184

 $00:13:57.180 \longrightarrow 00:14:00.280$ and the most variable sleep.

NOTE Confidence: 0.8789184

00:14:00.280 --> 00:14:01.264 And regarding BMI,

NOTE Confidence: 0.8789184

 $00:14:01.264 \longrightarrow 00:14:03.560$ we found that women with a BMI

NOTE Confidence: 0.8789184

 $00{:}14{:}03.630 \dashrightarrow 00{:}14{:}05.737$ of greater than or equal to 30

NOTE Confidence: 0.8789184

 $00:14:05.737 \longrightarrow 00:14:07.650$ had high sleep fragmentation,

NOTE Confidence: 0.8789184

00:14:07.650 --> 00:14:08.703 low sleep efficiency,

NOTE Confidence: 0.8789184

 $00:14:08.703 \longrightarrow 00:14:10.809$ and long way after sleep onset.

NOTE Confidence: 0.8789184

 $00:14:10.810 \longrightarrow 00:14:12.214$ While sleep duration was

NOTE Confidence: 0.8789184

 $00:14:12.214 \longrightarrow 00:14:13.618$ not associated with BMI,

NOTE Confidence: 0.8789184

00:14:13.620 --> 00:14:15.624 obese women had a medium sleep

NOTE Confidence: 0.8789184

 $00:14:15.624 \longrightarrow 00:14:17.396$ duration that was 36 minutes

 $00:14:17.396 \longrightarrow 00:14:19.586$ less than the lowest BMI group.

NOTE Confidence: 0.8647781

00:14:21.710 --> 00:14:23.915 And we took all this objective data

NOTE Confidence: 0.8647781

00:14:23.915 --> 00:14:26.009 on sleep duration and sleep timing

NOTE Confidence: 0.8647781

 $00:14:26.009 \longrightarrow 00:14:28.181$ and then looked at associations with

NOTE Confidence: 0.8647781

 $00:14:28.181 \longrightarrow 00:14:30.059$ average pregnancy outcomes and what

NOTE Confidence: 0.8647781

00:14:30.059 --> 00:14:32.231 we found was a strong Association

NOTE Confidence: 0.8647781

 $00{:}14{:}32.240 \dashrightarrow 00{:}14{:}34.238$ between both sleep duration and sleep

NOTE Confidence: 0.8647781

 $00:14:34.238 \longrightarrow 00:14:36.100$ timing and just stational diabetes.

NOTE Confidence: 0.8647781

 $00:14:36.100 \longrightarrow 00:14:38.708$ So this is our.

NOTE Confidence: 0.8647781

 $00:14:38.710 \longrightarrow 00:14:42.252$ Data on short sleep duration defined as

NOTE Confidence: 0.8647781

 $00{:}14{:}42.252 \dashrightarrow 00{:}14{:}45.769$ a sleep duration of less than 7 hours.

NOTE Confidence: 0.8647781

 $00:14:45.770 \longrightarrow 00:14:47.370$ And just stational diabetes risk.

NOTE Confidence: 0.8647781

 $00:14:47.370 \longrightarrow 00:14:49.800$ And as you can see in the blue bar

NOTE Confidence: 0.8647781

 $00:14:49.800 \longrightarrow 00:14:51.953$ are women with the sleep duration

NOTE Confidence: 0.8647781

 $00:14:51.953 \longrightarrow 00:14:53.763$ of less than 7 hours.

NOTE Confidence: 0.8647781

 $00:14:53.770 \longrightarrow 00:14:56.970$ The red bar greater than or equal to 7 hours,

 $00:14:56.970 \longrightarrow 00:14:58.728$ and women who had short sleep

NOTE Confidence: 0.8647781

 $00:14:58.728 \longrightarrow 00:15:00.653$ durations had about two fold increase

NOTE Confidence: 0.8647781

 $00:15:00.653 \longrightarrow 00:15:02.729$ in the rate of gestational diabetes.

NOTE Confidence: 0.8475878

00:15:05.240 --> 00:15:08.136 And this was our late sleep midpoint data,

NOTE Confidence: 0.8475878

 $00:15:08.140 \longrightarrow 00:15:10.366$ which was defined as a sleep

NOTE Confidence: 0.8475878

 $00:15:10.366 \longrightarrow 00:15:12.480$ midpoint of greater than 5:00 AM.

NOTE Confidence: 0.8475878

00:15:12.480 --> 00:15:14.544 And this group also had significantly

NOTE Confidence: 0.8475878

 $00:15:14.544 \longrightarrow 00:15:16.460$ higher rates of gestational diabetes.

NOTE Confidence: 0.8475878

 $00:15:16.460 \longrightarrow 00:15:19.078$ As you can see in the blue

NOTE Confidence: 0.8475878

00:15:19.078 --> 00:15:21.120 bar late sleep midpoint.

NOTE Confidence: 0.8475878

 $00{:}15{:}21.120 \dashrightarrow 00{:}15{:}23.112$ Participants had eight point,

NOTE Confidence: 0.8475878

 $00{:}15{:}23.112 \dashrightarrow 00{:}15{:}25.842$ 1% rate of gestational diabetes

NOTE Confidence: 0.8475878

 $00{:}15{:}25.842 \dashrightarrow 00{:}15{:}28.632$ versus individuals who sleep midpoint

NOTE Confidence: 0.8475878

00:15:28.632 --> 00:15:31.057 preceded 5:00 AM was three point,

NOTE Confidence: 0.8475878

 $00:15:31.060 \longrightarrow 00:15:33.550$ 3% rate of gestational diabetes.

 $00:15:36.280 \longrightarrow 00:15:40.410$ And this is a kind of table from our paper.

NOTE Confidence: 0.82052845

00:15:40.410 --> 00:15:44.540 I'm not going to go through all of the data,

NOTE Confidence: 0.82052845

00:15:44.540 --> 00:15:47.221 but given our sample size and the

NOTE Confidence: 0.82052845

00:15:47.221 --> 00:15:49.080 rates of gestational diabetes,

NOTE Confidence: 0.82052845

 $00:15:49.080 \longrightarrow 00:15:51.444$ we weren't able to perform adjusted

NOTE Confidence: 0.82052845

 $00:15:51.444 \longrightarrow 00:15:54.802$ analysis that grouped kind of all of our

NOTE Confidence: 0.82052845

 $00:15:54.802 \longrightarrow 00:15:56.518$ known covariates demographic covariates,

NOTE Confidence: 0.82052845

 $00:15:56.520 \longrightarrow 00:16:00.003$ but we were able to look at kind of

NOTE Confidence: 0.82052845

 $00:16:00.003 \longrightarrow 00:16:02.267$ individual adjustments and what we

NOTE Confidence: 0.82052845

 $00:16:02.267 \longrightarrow 00:16:05.710$ found is when we adjusted for age BMI.

NOTE Confidence: 0.82052845

 $00{:}16{:}05.710 \dashrightarrow 00{:}16{:}08.854$ Race, race, ethnicity as well as

NOTE Confidence: 0.82052845

00:16:08.854 --> 00:16:10.950 frequent soaring or employment

NOTE Confidence: 0.82052845

 $00:16:11.036 \longrightarrow 00:16:14.180$ categories that are odds ratios affect

NOTE Confidence: 0.82052845

 $00:16:14.180 \longrightarrow 00:16:17.327$ sizes for just stational diabetes in

NOTE Confidence: 0.82052845

00:16:17.327 --> 00:16:20.701 both the sleep duration and the sleep

NOTE Confidence: 0.82052845

 $00{:}16{:}20.701 \dashrightarrow 00{:}16{:}22.738$ midpoint analysis remained consistent.

00:16:25.680 --> 00:16:28.354 I'm going to step away just from

NOTE Confidence: 0.82585466

 $00:16:28.354 \longrightarrow 00:16:31.129$ the Newmont to be data to kind of.

NOTE Confidence: 0.82585466

 $00:16:31.130 \longrightarrow 00:16:33.450$ Define this discussion on sleep

NOTE Confidence: 0.82585466

 $00:16:33.450 \longrightarrow 00:16:35.770$ duration and just stational diabetes

NOTE Confidence: 0.82585466

 $00:16:35.844 \longrightarrow 00:16:38.028$ to show you some other research.

NOTE Confidence: 0.82585466

 $00:16:38.030 \longrightarrow 00:16:40.256$ 'cause the question comes up OK.

NOTE Confidence: 0.82585466

00:16:40.260 --> 00:16:43.104 Well sleep you've shown us that sleep is a

NOTE Confidence: 0.82585466

 $00:16:43.104 \longrightarrow 00:16:45.837$ risk factor for just stational diabetes.

NOTE Confidence: 0.82585466

 $00{:}16{:}45.840 \dashrightarrow 00{:}16{:}48.255$ But then what happens once a woman

NOTE Confidence: 0.82585466

 $00:16:48.255 \longrightarrow 00:16:49.930$ gets just stational diabetes?

NOTE Confidence: 0.82585466

 $00:16:49.930 \longrightarrow 00:16:52.170$ What is what role does risk this

NOTE Confidence: 0.82585466

 $00:16:52.170 \longrightarrow 00:16:54.768$ League play in their glycemic profile?

NOTE Confidence: 0.82585466

 $00{:}16{:}54.770 \dashrightarrow 00{:}16{:}57.226$ And so this was a study where we

NOTE Confidence: 0.82585466

 $00:16:57.226 \longrightarrow 00:16:59.529$ recruited women who were very newly

NOTE Confidence: 0.82585466

 $00:16:59.529 \longrightarrow 00:17:01.145$ diagnosed with gestational diabetes

00:17:01.145 --> 00:17:03.973 and ask them where in actigraph and

NOTE Confidence: 0.82585466

 $00{:}17{:}03.973 \longrightarrow 00{:}17{:}05.928$ record their blood glucose values

NOTE Confidence: 0.82585466

 $00:17:05.930 \longrightarrow 00:17:08.604$ and what we do in our practice.

NOTE Confidence: 0.82585466

 $00:17:08.610 \longrightarrow 00:17:10.098$ As we meet women,

NOTE Confidence: 0.82585466

 $00:17:10.098 \longrightarrow 00:17:12.330$ do uniform teaching on dietary changes

NOTE Confidence: 0.82585466

 $00{:}17{:}12.403 \dashrightarrow 00{:}17{:}14.398$ to help control blood glucose.

NOTE Confidence: 0.82585466

 $00:17:14.400 \longrightarrow 00:17:17.488$ Have them do a week of dietary modification,

NOTE Confidence: 0.82585466

 $00:17:17.490 \longrightarrow 00:17:20.185$ and then after that very uniform education,

NOTE Confidence: 0.82585466

 $00{:}17{:}20.190 \dashrightarrow 00{:}17{:}22.878$ bring them back in to meet with a

NOTE Confidence: 0.82585466

00:17:22.878 --> 00:17:25.448 physician to decide if they need

NOTE Confidence: 0.82585466

 $00{:}17{:}25.448 \dashrightarrow 00{:}17{:}27.264$ medical management with insulin

NOTE Confidence: 0.82585466

 $00:17:27.264 \longrightarrow 00:17:29.905$ to control their blood sugars on

NOTE Confidence: 0.82585466

 $00:17:29.905 \longrightarrow 00:17:31.980$ top of their dietary changes.

NOTE Confidence: 0.82585466

 $00:17:31.980 \longrightarrow 00:17:34.221$ And So what we did is we study women

NOTE Confidence: 0.82585466

 $00:17:34.221 \longrightarrow 00:17:36.869$ in that one week period from education

NOTE Confidence: 0.82585466

 $00:17:36.869 \longrightarrow 00:17:39.171$ and initiation of dietary changes to

 $00:17:39.171 \longrightarrow 00:17:41.537$ their physician visit and ask them to

NOTE Confidence: 0.82585466

 $00{:}17{:}41.537 \dashrightarrow 00{:}17{:}43.530$ wear the actigraph during that time.

NOTE Confidence: 0.82585466

 $00:17:43.530 \longrightarrow 00:17:45.180$ And in that time period,

NOTE Confidence: 0.82585466

 $00:17:45.180 \longrightarrow 00:17:47.364$ when they were asked to do diet

NOTE Confidence: 0.82585466

 $00:17:47.364 \longrightarrow 00:17:49.050$ modifications to see what their

NOTE Confidence: 0.82585466

00:17:49.050 --> 00:17:51.120 blood sugar values would look like,

NOTE Confidence: 0.82585466

 $00:17:51.120 \longrightarrow 00:17:53.318$ we found that shorter sleep duration was

NOTE Confidence: 0.82585466

 $00:17:53.318 \longrightarrow 00:17:55.002$ associated with worse glucose control

NOTE Confidence: 0.82585466

 $00:17:55.002 \longrightarrow 00:17:57.054$ in women with just stational diabetes.

NOTE Confidence: 0.82585466

 $00:17:57.060 \longrightarrow 00:17:59.085$ And we found that there was a 2 to

NOTE Confidence: 0.82585466

 $00:17:59.085 \longrightarrow 00:18:01.310$ 6 milligrams per deciliter increase

NOTE Confidence: 0.82585466

 $00:18:01.310 \longrightarrow 00:18:02.759$ in glucose observed.

NOTE Confidence: 0.82585466

 $00{:}18{:}02.760 \dashrightarrow 00{:}18{:}06.050$ For every hour or less of sleep.

NOTE Confidence: 0.82585466

 $00:18:06.050 \longrightarrow 00:18:08.206$ And this is an effect size similar

NOTE Confidence: 0.82585466

00:18:08.206 --> 00:18:10.461 to what we would see in starting

00:18:10.461 --> 00:18:13.310 someone on a low dose of Libra Raiden,

NOTE Confidence: 0.82585466

 $00{:}18{:}13.310 \dashrightarrow 00{:}18{:}15.290$ pregnancy or low dose of insulin

NOTE Confidence: 0.82585466

 $00:18:15.290 \longrightarrow 00:18:15.950$ in pregnancy.

NOTE Confidence: 0.82585466

 $00:18:15.950 \longrightarrow 00:18:18.438$ So certainly sleep has a role in potentially

NOTE Confidence: 0.82585466

00:18:18.438 --> 00:18:20.567 achieving a glycemic control in women,

NOTE Confidence: 0.82585466

 $00:18:20.570 \longrightarrow 00:18:21.890$ which is stational diabetes.

NOTE Confidence: 0.8299864

00:18:24.950 --> 00:18:28.802 Moving on, I'm going to kind of now cover

NOTE Confidence: 0.8299864

00:18:28.802 --> 00:18:32.305 some data on sleep and preterm birth.

NOTE Confidence: 0.8299864

00:18:32.310 --> 00:18:34.074 People often ask me,

NOTE Confidence: 0.8299864

 $00:18:34.074 \longrightarrow 00:18:37.246$ is there a link between sleep and

NOTE Confidence: 0.8299864

 $00{:}18{:}37.246 \dashrightarrow 00{:}18{:}40.270$ preterm birth and the data here is

NOTE Confidence: 0.8299864

00:18:40.270 --> 00:18:43.350 still kind of continuing to emerge.

NOTE Confidence: 0.8299864

 $00:18:43.350 \longrightarrow 00:18:46.318$ I showing here a study that was

NOTE Confidence: 0.8299864

 $00:18:46.318 \longrightarrow 00:18:48.778$ a California database study that

NOTE Confidence: 0.8299864

 $00:18:48.778 \longrightarrow 00:18:51.538$ compared women without a recorded

NOTE Confidence: 0.8299864

 $00{:}18{:}51.538 \dashrightarrow 00{:}18{:}54.320$ sleep disorder diagnosis in the chart.

 $00:18:54.320 \longrightarrow 00:18:56.378$ Two women with an insomnia diagnosis

NOTE Confidence: 0.8299864

 $00:18:56.378 \longrightarrow 00:18:58.471$ and they found that women with

NOTE Confidence: 0.8299864

00:18:58.471 --> 00:19:00.421 in somnia had a nearly two fold

NOTE Confidence: 0.8299864

00:19:00.421 --> 00:19:02.549 higher risk of early preterm birth,

NOTE Confidence: 0.8299864

 $00:19:02.550 \longrightarrow 00:19:05.015$ defined as less than 34

NOTE Confidence: 0.8299864

 $00:19:05.015 \longrightarrow 00:19:06.987$ weeks gestation at delivery.

NOTE Confidence: 0.8299864

 $00:19:06.990 \longrightarrow 00:19:10.206$ And the adjusted odds ratio is shown here.

NOTE Confidence: 0.8299864

00:19:10.210 --> 00:19:12.634 So while not directly measuring sleep

NOTE Confidence: 0.8299864

00:19:12.634 --> 00:19:14.650 duration or objectively measuring sleep,

NOTE Confidence: 0.8299864

 $00:19:14.650 \longrightarrow 00:19:16.660$ it's showing that women with

NOTE Confidence: 0.8299864

00:19:16.660 --> 00:19:18.268 kind of sleep disorder,

NOTE Confidence: 0.8299864

 $00:19:18.270 \dashrightarrow 00:19:21.819$ diagnosis in their chart seem to be

NOTE Confidence: 0.8299864

 $00:19:21.819 \longrightarrow 00:19:25.160$ at increased risk for preterm birth.

NOTE Confidence: 0.8299864

 $00:19:25.160 \longrightarrow 00:19:28.190$ So now will take us back to the new mom

NOTE Confidence: 0.8299864

 $00:19:28.269 \longrightarrow 00:19:31.293$ to be cohort to see what data has been.

 $00:19:31.300 \longrightarrow 00:19:34.108$ Has come from that regarding pre term birth.

NOTE Confidence: 0.8299864

 $00{:}19{:}34.110 --> 00{:}19{:}36.490$ I'm going to take you now to

NOTE Confidence: 0.8299864

 $00:19:36.490 \longrightarrow 00:19:37.970$ the sleep survey data.

NOTE Confidence: 0.8299864

00:19:37.970 --> 00:19:39.740 The Sleep survey data again

NOTE Confidence: 0.8299864

 $00:19:39.740 \longrightarrow 00:19:41.917$ to remind everyone a curd and

NOTE Confidence: 0.8299864

 $00:19:41.917 \longrightarrow 00:19:43.587$ visit one and visit three.

NOTE Confidence: 0.8299864

 $00:19:43.590 \longrightarrow 00:19:46.590$ It was given to all of the women

NOTE Confidence: 0.8299864

 $00:19:46.590 \longrightarrow 00:19:48.846$ who enrolled in new mom to be.

NOTE Confidence: 0.8299864

 $00{:}19{:}48.850 \mathrel{--}{>} 00{:}19{:}50.806$ But after some cleanup of the

NOTE Confidence: 0.8299864

 $00:19:50.806 \longrightarrow 00:19:53.665$ data to make sure that all of the

NOTE Confidence: 0.8299864

 $00{:}19{:}53.665 \dashrightarrow 00{:}19{:}55.515$ entries were valid and complete,

NOTE Confidence: 0.8299864

 $00:19:55.520 \longrightarrow 00:19:58.000$ we ended up with about 75 to 7600

NOTE Confidence: 0.8299864

 $00:19:58.000 \longrightarrow 00:20:00.179$ women with complete survey data.

NOTE Confidence: 0.8299864

 $00:20:00.180 \longrightarrow 00:20:05.549$ At visit one and visit three respectively.

NOTE Confidence: 0.8299864

00:20:05.550 --> 00:20:08.538 So what did the sleep survey data show us?

NOTE Confidence: 0.8299864

00:20:08.540 --> 00:20:08.893 Well,

 $00:20:08.893 \longrightarrow 00:20:11.011$ it showed us that short sleep

NOTE Confidence: 0.8299864

00:20:11.011 --> 00:20:13.178 duration was present at 17% of our

NOTE Confidence: 0.8299864

 $00{:}20{:}13.178 \longrightarrow 00{:}20{:}15.481$ participants at visit one and at the

NOTE Confidence: 0.8299864

00:20:15.481 --> 00:20:17.844 rate of short sleep duration went up

NOTE Confidence: 0.8299864

 $00{:}20{:}17.844 \dashrightarrow 00{:}20{:}20.780$ to 20% of participants at visit 3.

NOTE Confidence: 0.8299864

 $00:20:20.780 \longrightarrow 00:20:23.559$ And that late sleep timing and sleep

NOTE Confidence: 0.8299864

00:20:23.559 --> 00:20:25.991 timing of greater midpoint of greater

NOTE Confidence: 0.8299864

00:20:25.991 --> 00:20:28.714 than 5:00 AM was present in 11.6%

NOTE Confidence: 0.8299864

00:20:28.720 --> 00:20:31.506 of visit one and stay pretty much

NOTE Confidence: 0.8299864

 $00:20:31.506 \longrightarrow 00:20:34.680$ stable at 12 point 2% at visit 3.

NOTE Confidence: 0.8252026

 $00{:}20{:}37.210 \dashrightarrow 00{:}20{:}39.502$ And what we found regarding pre

NOTE Confidence: 0.8252026

 $00:20:39.502 \longrightarrow 00:20:42.369$ term birth in this cohort is that

NOTE Confidence: 0.8252026

 $00{:}20{:}42.369 \dashrightarrow 00{:}20{:}44.889$ lately midpoint greater than $5{:}00$ AM

NOTE Confidence: 0.8252026

 $00:20:44.889 \longrightarrow 00:20:47.760$ was associated with pre term birth.

NOTE Confidence: 0.8252026

 $00:20:47.760 \longrightarrow 00:20:51.120$ The rate in women with a late sleep

00:20:51.120 --> 00:20:54.044 midpoint was 9.5% and when we looked

NOTE Confidence: 0.8252026

 $00{:}20{:}54.044 \dashrightarrow 00{:}20{:}56.510$ at women without a sleep lately

NOTE Confidence: 0.8252026

00:20:56.593 --> 00:20:59.630 midpoint the rate was 6.9% and that

NOTE Confidence: 0.8252026

00:20:59.630 --> 00:21:01.880 the Association was and remains

NOTE Confidence: 0.8252026

 $00:21:01.880 \longrightarrow 00:21:03.712$ statistically significant after adjustment

NOTE Confidence: 0.8252026

 $00:21:03.712 \longrightarrow 00:21:06.226$ for all of the important covariates.

NOTE Confidence: 0.8252026

 $00:21:06.230 \longrightarrow 00:21:08.491$ We looked at our visit to our

NOTE Confidence: 0.8252026

00:21:08.491 --> 00:21:10.260 objective data from Actigraphy,

NOTE Confidence: 0.8252026

00:21:10.260 --> 00:21:11.840 which was a smaller,

NOTE Confidence: 0.8252026

00:21:11.840 --> 00:21:13.420 obviously a smaller subgroup

NOTE Confidence: 0.8252026

 $00:21:13.420 \longrightarrow 00:21:15.928$ about this 10th of the size of

NOTE Confidence: 0.8252026

00:21:15.928 --> 00:21:17.573 the data collected by surveys.

NOTE Confidence: 0.8252026

 $00{:}21{:}17.580 \dashrightarrow 00{:}21{:}20.356$ But we also found similar trends in preterm

NOTE Confidence: 0.8252026

 $00{:}21{:}20.356 \dashrightarrow 00{:}21{:}22.700$ birth rates by sweet midpoint status,

NOTE Confidence: 0.8252026

 $00:21:22.700 \longrightarrow 00:21:24.445$ but because of the smaller

NOTE Confidence: 0.8252026

 $00{:}21{:}24.445 \dashrightarrow 00{:}21{:}27.022$ sample size and the low rate of

 $00{:}21{:}27.022 \dashrightarrow 00{:}21{:}28.917$ over all rate of preterm birth,

NOTE Confidence: 0.8252026

 $00:21:28.920 \longrightarrow 00:21:30.750$ we did not demonstrate statistical

NOTE Confidence: 0.8252026

00:21:30.750 --> 00:21:32.580 significance in the actigraphy data,

NOTE Confidence: 0.8252026

00:21:32.580 --> 00:21:34.410 but in, but importantly showed,

NOTE Confidence: 0.8252026

 $00:21:34.410 \longrightarrow 00:21:36.780$ a very similar.

NOTE Confidence: 0.8252026

 $00:21:36.780 \longrightarrow 00:21:39.468$ Effect size and direction of the effect.

NOTE Confidence: 0.8252026

 $00:21:39.470 \longrightarrow 00:21:41.732$ We did not find any relationship

NOTE Confidence: 0.8252026

00:21:41.732 --> 00:21:44.252 in this cohort either by the Sleep

NOTE Confidence: 0.8252026

 $00:21:44.252 \longrightarrow 00:21:46.450$ survey data or in looking at the

NOTE Confidence: 0.8252026

 $00:21:46.522 \longrightarrow 00:21:48.752$ visit to objective data between

NOTE Confidence: 0.8252026

00:21:48.752 --> 00:21:50.982 self reported or objective sleep

NOTE Confidence: 0.8252026

 $00:21:50.990 \longrightarrow 00:21:52.910$ duration and pre term birth.

NOTE Confidence: 0.76726204

00:21:56.730 --> 00:22:01.970 You get that kind of now shift over to talk

NOTE Confidence: 0.76726204

 $00:22:01.970 \longrightarrow 00:22:06.858$ about the new mom to be study and its sub.

NOTE Confidence: 0.76726204

 $00:22:06.860 \longrightarrow 00:22:09.566$ Sub study on sleep disordered breathing.

 $00:22:09.570 \longrightarrow 00:22:12.722$ So as I mentioned at the very beginning

NOTE Confidence: 0.76726204

 $00:22:12.722 \longrightarrow 00:22:16.349$ when I described this study about 3500,

NOTE Confidence: 0.76726204

 $00:22:16.350 \longrightarrow 00:22:19.145$ women underwent objective sleep assessments

NOTE Confidence: 0.76726204

 $00:22:19.145 \longrightarrow 00:22:22.692$ for sleep disordered breathing and at both

NOTE Confidence: 0.76726204

00:22:22.692 --> 00:22:25.388 the early visit one and the late visit,

NOTE Confidence: 0.76726204

 $00:22:25.390 \longrightarrow 00:22:29.590$ three time points, and we use the

NOTE Confidence: 0.76726204

00:22:29.590 --> 00:22:32.759 embedded device for this study.

NOTE Confidence: 0.76726204

00:22:32.760 --> 00:22:35.520 And here is our data regarding the prevalence

NOTE Confidence: 0.76726204

 $00{:}22{:}35.520 {\:{\circ}{\circ}{\circ}}>00{:}22{:}37.355$ of sleep disordered breathing defined

NOTE Confidence: 0.76726204

 $00:22:37.355 \longrightarrow 00:22:40.927$ as an age I of greater than or equal to

NOTE Confidence: 0.76726204

 $00{:}22{:}40.927 \dashrightarrow 00{:}22{:}43.251$ five in this cohort of nulliparous women

NOTE Confidence: 0.76726204

 $00:22:43.260 \longrightarrow 00:22:46.044$ in this slide I'm showing the rates in

NOTE Confidence: 0.76726204

 $00:22:46.044 \longrightarrow 00:22:48.848$ the early pregnancy visit one in orange

NOTE Confidence: 0.76726204

 $00:22:48.848 \longrightarrow 00:22:51.609$ and in mid pregnancy visit 3IN blue.

NOTE Confidence: 0.76726204

 $00:22:51.610 \longrightarrow 00:22:53.750$ And as you can see,

NOTE Confidence: 0.76726204

00:22:53.750 --> 00:22:56.354 the rate of sleep apnea increases

 $00:22:56.354 \longrightarrow 00:22:59.030$ from early to mid pregnancy.

NOTE Confidence: 0.76726204

 $00:22:59.030 \longrightarrow 00:23:01.846$ Also, what you can see is the vast

NOTE Confidence: 0.76726204

00:23:01.846 --> 00:23:04.225 majority of sleep apnea in pregnancy

NOTE Confidence: 0.76726204

 $00:23:04.225 \longrightarrow 00:23:07.371$ is mild sleep apnea with an age I

NOTE Confidence: 0.76726204

 $00:23:07.371 \longrightarrow 00:23:09.730$ between 5:00 and less than 15 and

NOTE Confidence: 0.76726204

 $00{:}23{:}09.730 \dashrightarrow 00{:}23{:}12.470$ that moderate to severe sleep apnea.

NOTE Confidence: 0.76726204

00:23:12.470 --> 00:23:14.266 Remains rare in pregnancy,

NOTE Confidence: 0.76726204

00:23:14.266 --> 00:23:17.799 even in late pregnancy with only one point,

NOTE Confidence: 0.76726204

00:23:17.800 --> 00:23:21.344 2% of women in late pregnancy at visit,

NOTE Confidence: 0.76726204

 $00:23:21.350 \longrightarrow 00:23:25.578$ 3 having moderate to severe sleep apnea.

NOTE Confidence: 0.76726204

 $00:23:25.580 \longrightarrow 00:23:26.702$ So in summary,

NOTE Confidence: 0.76726204

00:23:26.702 --> 00:23:29.851 what we found is that in early pregnancy

NOTE Confidence: 0.76726204

 $00:23:29.851 \longrightarrow 00:23:32.973$ the rate of sleep apnea was 3.6%,

NOTE Confidence: 0.76726204

 $00:23:32.980 \longrightarrow 00:23:35.857$ but as we anticipate given the pregnancy,

NOTE Confidence: 0.76726204

00:23:35.860 --> 00:23:37.500 associated changes that might

00:23:37.500 --> 00:23:38.730 increase sleep apnea,

NOTE Confidence: 0.76726204

 $00:23:38.730 \longrightarrow 00:23:41.602$ that in fact we do see an increase

NOTE Confidence: 0.76726204

 $00:23:41.602 \longrightarrow 00:23:43.794$ in objectively measured sleep apnea

NOTE Confidence: 0.76726204

00:23:43.794 --> 00:23:46.129 in pregnancy with eight point,

NOTE Confidence: 0.76726204

 $00:23:46.130 \longrightarrow 00:23:48.190$ 3% prevalence in mid pregnancy.

NOTE Confidence: 0.76726204

00:23:48.190 --> 00:23:50.745 What we learned from this study is

NOTE Confidence: 0.76726204

00:23:50.745 --> 00:23:53.310 also that snores women with self

NOTE Confidence: 0.76726204

 $00:23:53.310 \longrightarrow 00:23:55.635$ reported frequent snoring and women.

NOTE Confidence: 0.76726204

 $00{:}23{:}55.640 {\:\dashrightarrow\:} 00{:}23{:}57.540$ With obesity going into pregnancy,

NOTE Confidence: 0.76726204

 $00:23:57.540 \longrightarrow 00:24:00.212$ a BMI of greater than or equal to

NOTE Confidence: 0.76726204

00:24:00.212 --> 00:24:03.063 30 had the highest rates of sleep

NOTE Confidence: 0.76726204

 $00:24:03.063 \longrightarrow 00:24:05.874$ apnea at about 20% in the mid

NOTE Confidence: 0.76726204

 $00:24:05.874 \longrightarrow 00:24:07.386$ pregnancy time point assessment.

NOTE Confidence: 0.87425935

 $00:24:10.810 \longrightarrow 00:24:14.044$ So now we looked at our data

NOTE Confidence: 0.87425935

 $00:24:14.044 \longrightarrow 00:24:16.530$ and looked at rates of.

NOTE Confidence: 0.87425935

 $00{:}24{:}16.530 \dashrightarrow 00{:}24{:}18.470$ Metabolic issues just stational

 $00:24:18.470 \longrightarrow 00:24:20.895$ diabetes and hypertensive issues in

NOTE Confidence: 0.87425935

 $00{:}24{:}20.895 \to 00{:}24{:}23.079$ pregnancy and what I'm showing here

NOTE Confidence: 0.87425935

 $00:24:23.079 \longrightarrow 00:24:25.265$ is our data on gestational diabetes

NOTE Confidence: 0.87425935

 $00:24:25.265 \longrightarrow 00:24:27.680$ by sleep disordered breathing status.

NOTE Confidence: 0.87425935

 $00:24:27.680 \longrightarrow 00:24:30.696$ On the left hand side is the early

NOTE Confidence: 0.87425935

00:24:30.696 --> 00:24:33.036 pregnancy data on the right hand

NOTE Confidence: 0.87425935

 $00:24:33.036 \longrightarrow 00:24:35.298$ side is the mid pregnancy data.

NOTE Confidence: 0.87425935

 $00:24:35.300 \longrightarrow 00:24:38.348$ The blue bars are women without sleep apnea,

NOTE Confidence: 0.87425935

 $00:24:38.350 \longrightarrow 00:24:40.842$ and the yellow bars are women with

NOTE Confidence: 0.87425935

 $00:24:40.842 \longrightarrow 00:24:43.574$ sleep apnea and this is just stational

NOTE Confidence: 0.87425935

 $00{:}24{:}43.574 \dashrightarrow 00{:}24{:}45.962$ diabetes rates in the two groups.

NOTE Confidence: 0.87425935

 $00:24:45.970 \longrightarrow 00:24:47.870$ And as you can see,

NOTE Confidence: 0.87425935

 $00{:}24{:}47.870 \dashrightarrow 00{:}24{:}50.054$ the rate of gestational diabetes was

NOTE Confidence: 0.87425935

 $00:24:50.054 \longrightarrow 00:24:51.888$ significantly higher in women with

NOTE Confidence: 0.87425935

 $00:24:51.888 \longrightarrow 00:24:54.128$ sleep apnea and the adjusted odds ratios

 $00:24:54.128 \longrightarrow 00:24:56.259$ here remains statistically significant.

NOTE Confidence: 0.87425935

00:24:56.260 --> 00:24:58.690 After we adjusted for age.

NOTE Confidence: 0.87425935

 $00:24:58.690 \longrightarrow 00:25:02.625$ BMI and presence of met

NOTE Confidence: 0.87425935

 $00:25:02.625 \longrightarrow 00:25:04.986$ other medical comorbidities.

NOTE Confidence: 0.89436394

 $00:25:08.530 \longrightarrow 00:25:11.635$ And this is our data on the rates of

NOTE Confidence: 0.89436394

00:25:11.635 --> 00:25:13.677 preeclampsia in this group of women,

NOTE Confidence: 0.89436394

 $00:25:13.680 \longrightarrow 00:25:17.110$ and again, as you can see by the yellow bars,

NOTE Confidence: 0.89436394

 $00:25:17.110 \longrightarrow 00:25:19.516$ the women with sleep apnea had

NOTE Confidence: 0.89436394

 $00{:}25{:}19.516 \dashrightarrow 00{:}25{:}21.578$ higher rates of preeclampsia compared

NOTE Confidence: 0.89436394

 $00:25:21.578 \longrightarrow 00:25:23.906$ to women without a sleep apnea.

NOTE Confidence: 0.89436394

 $00{:}25{:}23.910 \dashrightarrow 00{:}25{:}26.745$ And again, adjusted odds ratios

NOTE Confidence: 0.89436394

 $00:25:26.745 \longrightarrow 00:25:28.446$ remained statistically significant.

NOTE Confidence: 0.8410933

 $00{:}25{:}31.240 \dashrightarrow 00{:}25{:}33.896$ I'm gonna take a little break now from

NOTE Confidence: 0.8410933

 $00:25:33.896 \longrightarrow 00:25:36.864$ the new mom to be data to share some

NOTE Confidence: 0.8410933

 $00:25:36.864 \longrightarrow 00:25:39.385$ other data from some other researchers

NOTE Confidence: 0.8410933

 $00:25:39.385 \longrightarrow 00:25:42.373$ that have looked at sleep disordered

00:25:42.373 --> 00:25:44.820 breathing and kind of specifically again,

NOTE Confidence: 0.8410933

 $00:25:44.820 \longrightarrow 00:25:45.984$ asking the question.

NOTE Confidence: 0.8410933

 $00:25:45.984 \longrightarrow 00:25:48.308$ OK, well, we know it increases

NOTE Confidence: 0.8410933

00:25:48.308 --> 00:25:50.243 the risk of gestational diabetes,

NOTE Confidence: 0.8410933

 $00:25:50.250 \longrightarrow 00:25:53.042$ but what about after they have gotten that

NOTE Confidence: 0.8410933

 $00:25:53.042 \longrightarrow 00:25:55.298$ diagnosis and just stational diabetes?

NOTE Confidence: 0.8410933

 $00:25:55.300 \longrightarrow 00:25:57.295$ Is there any Association with

NOTE Confidence: 0.8410933

00:25:57.295 --> 00:25:58.891 sleep disordered breathing and

NOTE Confidence: 0.8410933

 $00:25:58.891 \longrightarrow 00:26:00.320$ worsening glycemic control?

NOTE Confidence: 0.8410933

 $00:26:00.320 \longrightarrow 00:26:02.624$ And what they found here in this study

NOTE Confidence: 0.8410933

 $00{:}26{:}02.624 \dashrightarrow 00{:}26{:}05.112$ where they hit took 65 participants with

NOTE Confidence: 0.8410933

 $00:26:05.112 \longrightarrow 00:26:07.380$ just stational diabetes and sleep apnea.

NOTE Confidence: 0.8410933

 $00{:}26{:}07.380 \dashrightarrow 00{:}26{:}09.055$ And they had them undergo

NOTE Confidence: 0.8410933

 $00:26:09.055 \longrightarrow 00:26:10.060$ continuous glucose monitoring.

NOTE Confidence: 0.8410933

 $00:26:10.060 \longrightarrow 00:26:11.740$ And as you can see,

 $00:26:11.740 \longrightarrow 00:26:14.204$ the women with the highest age eyes

NOTE Confidence: 0.8410933

00:26:14.204 --> 00:26:16.780 with shown in the red bars up top.

NOTE Confidence: 0.8410933

 $00:26:16.780 \longrightarrow 00:26:19.564$ Those with the age eyes of

NOTE Confidence: 0.8410933

 $00:26:19.564 \longrightarrow 00:26:22.100$ greater than or equal to 30.

NOTE Confidence: 0.8410933

 $00:26:22.100 \longrightarrow 00:26:24.635$ They had the highest nocturnal

NOTE Confidence: 0.8410933

00:26:24.635 --> 00:26:27.170 and morning levels of glucose,

NOTE Confidence: 0.8410933

00:26:27.170 --> 00:26:29.705 so an Association here in

NOTE Confidence: 0.8410933

00:26:29.705 --> 00:26:32.240 this small study with Ahi,

NOTE Confidence: 0.8410933

 $00{:}26{:}32.240 \dashrightarrow 00{:}26{:}34.268$ an worsening lexemic control.

NOTE Confidence: 0.8478917

 $00:26:38.200 \longrightarrow 00:26:41.800$ Would it take a few minutes now I'm kind of

NOTE Confidence: 0.8478917

 $00{:}26{:}41.888 \dashrightarrow 00{:}26{:}45.171$ to cover some other sleep related questions

NOTE Confidence: 0.8478917

 $00:26:45.171 \longrightarrow 00:26:49.180$ that come up in in talking about pregnancy.

NOTE Confidence: 0.8478917

 $00:26:49.180 \longrightarrow 00:26:53.368$ One is the sleep position controversy.

NOTE Confidence: 0.8478917

00:26:53.370 --> 00:26:56.770 So it's been kind of common for women to get

NOTE Confidence: 0.8478917

00:26:56.847 --> 00:27:00.165 advice about how to sleep during pregnancy,

NOTE Confidence: 0.8478917

 $00{:}27{:}00.170 \dashrightarrow 00{:}27{:}02.170$ especially after 20 weeks gestation.

 $00:27:02.170 \longrightarrow 00:27:03.770$ And if you search,

NOTE Confidence: 0.8478917

00:27:03.770 --> 00:27:06.170 sleep or sleep positions in pregnancy,

NOTE Confidence: 0.8478917

 $00:27:06.170 \longrightarrow 00:27:09.326$ you'll often find pictures like the

NOTE Confidence: 0.8478917

 $00:27:09.326 \longrightarrow 00:27:13.364$ one here where it's like 7 best or

NOTE Confidence: 0.8478917

 $00:27:13.364 \longrightarrow 00:27:16.118$ seven safe positions to sleep in.

NOTE Confidence: 0.8478917

 $00:27:16.120 \longrightarrow 00:27:18.052$ And the reason for this is

NOTE Confidence: 0.8478917

 $00:27:18.052 \longrightarrow 00:27:19.840$ kind of through the years.

NOTE Confidence: 0.8478917

 $00:27:19.840 \longrightarrow 00:27:21.675$ Women have been discouraged from

NOTE Confidence: 0.8478917

00:27:21.675 --> 00:27:24.287 sleeping on their back or on their

NOTE Confidence: 0.8478917

 $00:27:24.287 \longrightarrow 00:27:26.411$ right side because it was thought

NOTE Confidence: 0.8478917

00:27:26.411 --> 00:27:28.581 that sleeping on your back or on

NOTE Confidence: 0.8478917

 $00:27:28.581 \longrightarrow 00:27:31.074$ the right side would lead to more

NOTE Confidence: 0.8478917

 $00{:}27{:}31.074 \dashrightarrow 00{:}27{:}33.809$ cable cable compression that can.

NOTE Confidence: 0.8478917

 $00:27:33.810 \longrightarrow 00:27:39.490$ Alter blood flow to the.

NOTE Confidence: 0.8478917

 $00:27:39.490 \longrightarrow 00:27:41.828$ Uterus and decrease blood flow to the

 $00:27:41.828 \longrightarrow 00:27:44.246$ uterus has been postulated as potentially

NOTE Confidence: 0.8478917

 $00:27:44.246 \longrightarrow 00:27:46.940$ a risk for adverse pregnancy outcomes.

NOTE Confidence: 0.5580192

 $00:27:50.610 \longrightarrow 00:27:52.550$ Um so.

NOTE Confidence: 0.85415095

00:27:55.310 --> 00:27:57.884 And there's been a lot of interest in this,

NOTE Confidence: 0.85415095

 $00:27:57.890 \longrightarrow 00:27:59.038$ because obviously seek position

NOTE Confidence: 0.85415095

00:27:59.038 --> 00:27:59.899 is potentially modifiable,

NOTE Confidence: 0.85415095

 $00:27:59.900 \longrightarrow 00:28:02.332$ so there's been a lot of interest in

NOTE Confidence: 0.85415095

00:28:02.332 --> 00:28:04.319 giving campaigns to tell women to sleep

NOTE Confidence: 0.85415095

 $00{:}28{:}04.319 \dashrightarrow 00{:}28{:}06.498$ on their sides or sleep on their back.

NOTE Confidence: 0.85415095

00:28:06.500 --> 00:28:08.796 But this, instead of sleeping on their back

NOTE Confidence: 0.85415095

 $00{:}28{:}08.796 \dashrightarrow 00{:}28{:}10.519$ and specifically favoring the left side,

NOTE Confidence: 0.85415095

 $00:28:10.520 \longrightarrow 00:28:12.529$ if they can over the right side.

NOTE Confidence: 0.85415095

 $00:28:12.530 \longrightarrow 00:28:13.965$ But obviously this leads to

NOTE Confidence: 0.85415095

00:28:13.965 --> 00:28:15.400 a lot of maternal anxiety,

NOTE Confidence: 0.85415095

00:28:15.400 --> 00:28:16.840 'cause you get questions about.

NOTE Confidence: 0.85415095

00:28:16.840 --> 00:28:18.828 Well, what if I wake up and

00:28:18.828 --> 00:28:20.279 I'm sleeping on my back?

NOTE Confidence: 0.85415095

 $00:28:20.280 \longrightarrow 00:28:21.081$ Is that bad?

NOTE Confidence: 0.85415095

00:28:21.081 --> 00:28:22.950 Or do I need to use pillows

NOTE Confidence: 0.85415095

 $00:28:23.018 \longrightarrow 00:28:24.418$ and prompts to avoid?

NOTE Confidence: 0.85415095

 $00:28:24.420 \longrightarrow 00:28:26.692$ Kind of rolling on to my back and

NOTE Confidence: 0.85415095

 $00:28:26.692 \longrightarrow 00:28:29.136$ she's been a lot of anxiety about this.

NOTE Confidence: 0.85415095

 $00:28:29.140 \longrightarrow 00:28:32.083$ And you know when we look at the sleep

NOTE Confidence: 0.85415095

 $00{:}28{:}32.083 \dashrightarrow 00{:}28{:}34.067$ position data and pregnancy outcomes

NOTE Confidence: 0.85415095

 $00{:}28{:}34.067 \dashrightarrow 00{:}28{:}36.931$ which we have to recognize is that

NOTE Confidence: 0.85415095

 $00{:}28{:}36.931 \dashrightarrow 00{:}28{:}39.391$ the prior studies have included small

NOTE Confidence: 0.85415095

 $00:28:39.391 \longrightarrow 00:28:41.524$ numbers of women and importantly,

NOTE Confidence: 0.85415095

 $00:28:41.524 \longrightarrow 00:28:43.312$ the interviews regarding maternal

NOTE Confidence: 0.85415095

 $00{:}28{:}43.312 \dashrightarrow 00{:}28{:}45.490$ sleep were conducted after a

NOTE Confidence: 0.85415095

 $00:28:45.490 \longrightarrow 00:28:47.440$ still birth or another adverse of

NOTE Confidence: 0.85415095

 $00:28:47.440 \longrightarrow 00:28:49.059$ pregnancy outcome of the Kurds.

 $00:28:49.060 \longrightarrow 00:28:51.734$ So especially in the still birth literature,

NOTE Confidence: 0.85415095

 $00{:}28{:}51.740 \longrightarrow 00{:}28{:}53.610$ that's usually like case control

NOTE Confidence: 0.85415095

 $00{:}28{:}53.610 \dashrightarrow 00{:}28{:}55.892$ studies where they take cases of

NOTE Confidence: 0.85415095

 $00:28:55.892 \longrightarrow 00:28:57.956$ stillbirths and compare it to kind

NOTE Confidence: 0.85415095

 $00:28:57.956 \longrightarrow 00:28:59.780$ of controls without still births.

NOTE Confidence: 0.85415095

00:28:59.780 --> 00:29:02.432 And they ask women about their

NOTE Confidence: 0.85415095

 $00:29:02.432 \longrightarrow 00:29:03.316$ sleep position.

NOTE Confidence: 0.85415095

 $00{:}29{:}03.320 \dashrightarrow 00{:}29{:}06.304$ And have come up with kind of some

NOTE Confidence: 0.85415095

 $00{:}29{:}06.304 \dashrightarrow 00{:}29{:}08.959$ Association with sleeping on your back or.

NOTE Confidence: 0.85415095

 $00:29:08.960 \longrightarrow 00:29:11.150$ Left on the right side and

NOTE Confidence: 0.85415095

 $00{:}29{:}11.150 \dashrightarrow 00{:}29{:}12.245$ adverse pregnancy outcomes.

NOTE Confidence: 0.85415095

00:29:12.250 --> 00:29:14.819 But by conducting studies in this way,

NOTE Confidence: 0.85415095

 $00{:}29{:}14.820 \dashrightarrow 00{:}29{:}17.977$ we all know that it introduces the

NOTE Confidence: 0.85415095

 $00:29:17.977 \longrightarrow 00:29:20.299$ potential for considerable recall bias.

NOTE Confidence: 0.85415095

 $00{:}29{:}20.300 \dashrightarrow 00{:}29{:}22.436$ So what was nice about the new mom

NOTE Confidence: 0.85415095

 $00:29:22.436 \longrightarrow 00:29:24.986$ to be data is that we actually

 $00:29:24.986 \longrightarrow 00:29:26.926$ had collected sleep position data

NOTE Confidence: 0.85415095

 $00{:}29{:}26.998 \mathrel{--}{>} 00{:}29{:}28.938$ prospectively in this cohort,

NOTE Confidence: 0.85415095

 $00:29:28.940 \longrightarrow 00:29:30.851$ both with the Sleep survey data and

NOTE Confidence: 0.85415095

 $00:29:30.851 \longrightarrow 00:29:33.634$ also in the subgroup that did sleep

NOTE Confidence: 0.85415095

 $00:29:33.634 \longrightarrow 00:29:35.056$ disordered breathing assessments.

NOTE Confidence: 0.85415095

 $00:29:35.060 \longrightarrow 00:29:36.930$ The embedded device recorded sleep

NOTE Confidence: 0.85415095

 $00:29:36.930 \longrightarrow 00:29:38.800$ position during the night that

NOTE Confidence: 0.85415095

 $00{:}29{:}38.862 \dashrightarrow 00{:}29{:}40.818$ they were the sleep apnea monitor.

NOTE Confidence: 0.85415095

 $00{:}29{:}40.820 \dashrightarrow 00{:}29{:}42.580$ So this was prospectively collected

NOTE Confidence: 0.85415095

 $00{:}29{:}42.580 \dashrightarrow 00{:}29{:}45.140$ data and visit one and visit three.

NOTE Confidence: 0.85415095

00:29:45.140 --> 00:29:47.860 And what we found was in the survey

NOTE Confidence: 0.85415095

 $00:29:47.860 \longrightarrow 00:29:50.550$ data that going to sleep in the

NOTE Confidence: 0.85415095

 $00:29:50.550 \longrightarrow 00:29:52.094$ supine or right lateral.

NOTE Confidence: 0.85415095

 $00:29:52.100 \longrightarrow 00:29:54.095$ Position was not associated with

NOTE Confidence: 0.85415095

 $00:29:54.095 \longrightarrow 00:29:56.090$ an increased risk of composite

 $00:29:56.153 \longrightarrow 00:29:57.608$ outcome of stillbirths.

NOTE Confidence: 0.85415095

00:29:57.610 --> 00:29:58.930 Small Burgess Stational

NOTE Confidence: 0.85415095

 $00:29:58.930 \longrightarrow 00:30:00.250$ age newborn gestation.

NOTE Confidence: 0.85415095

 $00:30:00.250 \longrightarrow 00:30:01.838$ Hypertensive disorders compared to

NOTE Confidence: 0.85415095

 $00:30:01.838 \longrightarrow 00:30:04.220$ going to sleep within the quote.

NOTE Confidence: 0.85415095

00:30:04.220 --> 00:30:05.012 Ideal position,

NOTE Confidence: 0.85415095

 $00:30:05.012 \dashrightarrow 00:30:07.388$ which is what has traditionally been

NOTE Confidence: 0.85415095

 $00:30:07.388 \longrightarrow 00:30:09.170$ considered. The left lateral position.

NOTE Confidence: 0.85415095

 $00{:}30{:}09.170 \dashrightarrow 00{:}30{:}11.644$ And the null finding was also shown

NOTE Confidence: 0.85415095

 $00:30:11.644 \longrightarrow 00:30:13.678$ using the objective data on sleep

NOTE Confidence: 0.85415095

 $00{:}30{:}13.678 \dashrightarrow 00{:}30{:}16.430$ position in the subgroup of women in

NOTE Confidence: 0.85415095

 $00:30:16.430 \longrightarrow 00:30:18.520$ the sleep disordered breathing substudy.

NOTE Confidence: 0.85415095

 $00:30:18.520 \longrightarrow 00:30:20.560$ So even though it was smaller

NOTE Confidence: 0.85415095

 $00:30:20.560 \longrightarrow 00:30:21.580$ and less powered,

NOTE Confidence: 0.85415095

 $00:30:21.580 \longrightarrow 00:30:23.722$ that's that objective data confirmed to

NOTE Confidence: 0.85415095

 $00:30:23.722 \longrightarrow 00:30:26.358$ what we were seeing in the survey data,

00:30:26.360 --> 00:30:28.290 which was no Association between

NOTE Confidence: 0.85415095

 $00{:}30{:}28.290 \dashrightarrow 00{:}30{:}30{:}220$ sleep position and this composite

NOTE Confidence: 0.85415095

 $00:30:30.286 \longrightarrow 00:30:32.216$ of adverse pregnancy outcomes so.

NOTE Confidence: 0.85415095

00:30:32.220 --> 00:30:34.572 It's not kind of a definitive, I think.

NOTE Confidence: 0.85415095

 $00{:}30{:}34.572 \dashrightarrow 00{:}30{:}36.469$ Nail on the coffin on this question

NOTE Confidence: 0.85415095

 $00:30:36.469 \longrightarrow 00:30:38.480$ on sleep position and pregnancy,

NOTE Confidence: 0.85415095

 $00:30:38.480 \longrightarrow 00:30:40.208$ but certainly data to reassure our

NOTE Confidence: 0.85415095

 $00:30:40.208 \longrightarrow 00:30:42.267$ pregnant women who come to us with

NOTE Confidence: 0.85415095

 $00{:}30{:}42.267 \dashrightarrow 00{:}30{:}43.965$ these questions about sleep position or

NOTE Confidence: 0.85415095

00:30:43.965 --> 00:30:45.797 waking up in the middle of the night,

NOTE Confidence: 0.85415095

00:30:45.800 --> 00:30:47.426 or having anxiety of not being

NOTE Confidence: 0.85415095

 $00:30:47.426 \longrightarrow 00:30:48.510$ able to sleep in,

NOTE Confidence: 0.85415095

 $00:30:48.510 \dashrightarrow 00:30:50.407$ quote unquote the right position at night.

NOTE Confidence: 0.85900927

 $00{:}30{:}54.080 \dashrightarrow 00{:}30{:}56.250$ I'm gonna just say a word on

NOTE Confidence: 0.85900927

 $00:30:56.250 \longrightarrow 00:30:57.938$ restless leg syndrome and periodic

 $00:30:57.938 \longrightarrow 00:31:00.020$ limb movements in sleep because I

NOTE Confidence: 0.85900927

 $00{:}31{:}00.020 \dashrightarrow 00{:}31{:}02.577$ think not doing a sleep talk without

NOTE Confidence: 0.85900927

 $00{:}31{:}02.577 \dashrightarrow 00{:}31{:}04.373$ addressing this important issue.

NOTE Confidence: 0.85900927

 $00:31:04.380 \longrightarrow 00:31:05.852$ Asleep talking pregnancy without

NOTE Confidence: 0.85900927

00:31:05.852 --> 00:31:08.060 addressing it would not be correct,

NOTE Confidence: 0.85900927

 $00{:}31{:}08.060 \dashrightarrow 00{:}31{:}11.174$ but I will also say that I'm not an

NOTE Confidence: 0.85900927

 $00:31:11.174 \longrightarrow 00:31:14.247$ expert in this area and has not been kind

NOTE Confidence: 0.85900927

00:31:14.247 --> 00:31:17.630 of an area of ongoing research for me,

NOTE Confidence: 0.85900927

 $00:31:17.630 \longrightarrow 00:31:19.300$ but other researchers have been

NOTE Confidence: 0.85900927

00:31:19.300 --> 00:31:21.407 very interested in RLS or periodic

NOTE Confidence: 0.85900927

 $00:31:21.407 \longrightarrow 00:31:23.282$ limb movements in pregnancy because

NOTE Confidence: 0.85900927

 $00:31:23.282 \longrightarrow 00:31:25.430$ we know that during pregnancy.

NOTE Confidence: 0.85900927

 $00:31:25.430 \longrightarrow 00:31:27.290$ The rates of these disorders

NOTE Confidence: 0.85900927

00:31:27.290 --> 00:31:28.778 do increase during pregnancy.

NOTE Confidence: 0.85900927

 $00:31:28.780 \longrightarrow 00:31:30.775$ About 20% of women experience

NOTE Confidence: 0.85900927

 $00:31:30.775 \longrightarrow 00:31:32.770$ these symptoms compared to two

 $00:31:32.841 \longrightarrow 00:31:34.676$ to 10% of the general population.

NOTE Confidence: 0.85900927

 $00{:}31{:}34.676 \dashrightarrow 00{:}31{:}36.830$ The symptoms seem to peak in

NOTE Confidence: 0.85900927

 $00:31:36.903 \longrightarrow 00:31:38.079$ the 3rd trimester,

NOTE Confidence: 0.85900927

 $00:31:38.080 \longrightarrow 00:31:39.835$ but often can resolve around

NOTE Confidence: 0.85900927

 $00{:}31{:}39.835 \dashrightarrow 00{:}31{:}41.590$ delivery and studies have shown

NOTE Confidence: 0.85900927

 $00:31:41.655 \longrightarrow 00:31:43.623$ that women with just stational RLS

NOTE Confidence: 0.85900927

00:31:43.623 --> 00:31:45.914 are at increased risk of difficulty

NOTE Confidence: 0.85900927

 $00:31:45.914 \longrightarrow 00:31:47.750$ initiating and maintaining sleep.

NOTE Confidence: 0.85900927

 $00{:}31{:}47.750 \dashrightarrow 00{:}31{:}49.962$ They are at increased risk of poor

NOTE Confidence: 0.85900927

 $00:31:49.962 \longrightarrow 00:31:51.893$ sleep quality for daytime function

NOTE Confidence: 0.85900927

 $00{:}31{:}51.893 \dashrightarrow 00{:}31{:}53.737$ and excessive day time sleepiness

NOTE Confidence: 0.85900927

 $00:31:53.737 \longrightarrow 00:31:56.379$ compared to pregnant women without RLS.

NOTE Confidence: 0.85900927

 $00{:}31{:}56.380 \dashrightarrow 00{:}31{:}58.546$ And there's also data showing a

NOTE Confidence: 0.85900927

 $00{:}31{:}58.546 {\:\raisebox{--}{\text{--}}}{\:\raisebox{--}{\text{--}}}{\:\raisebox{--}{\text{--}}} 00{:}32{:}00.379$ potential link between our less

NOTE Confidence: 0.85900927

 $00:32:00.379 \longrightarrow 00:32:01.357$ or periodic PMS.

00:32:01.360 --> 00:32:02.840 Two adverse pregnancy outcomes,

NOTE Confidence: 0.85900927

 $00{:}32{:}02.840 \dashrightarrow 00{:}32{:}05.789$ and I'm not going to review all that

NOTE Confidence: 0.85900927

 $00:32:05.789 \longrightarrow 00:32:07.763$ data here because of time issues,

NOTE Confidence: 0.85900927

 $00:32:07.770 \longrightarrow 00:32:11.010$ but I kind of this is a good review that

NOTE Confidence: 0.85900927

 $00:32:11.097 \dashrightarrow 00:32:14.177$ I have come across and have used that.

NOTE Confidence: 0.85900927

 $00:32:14.180 \dashrightarrow 00:32:16.316$ I've provided the reference here for.

NOTE Confidence: 0.86001426

00:32:18.580 --> 00:32:21.370 And then I want to before I move into

NOTE Confidence: 0.86001426

 $00:32:21.370 \longrightarrow 00:32:23.967$ kind of the second half of my talk,

NOTE Confidence: 0.86001426

00:32:23.970 --> 00:32:25.788 I just want to mention also

NOTE Confidence: 0.86001426

00:32:25.788 --> 00:32:27.460 sleep and maternal mental health.

NOTE Confidence: 0.86001426

 $00{:}32{:}27.460 \dashrightarrow 00{:}32{:}29.768$ This is a huge.

NOTE Confidence: 0.86001426

00:32:29.770 --> 00:32:31.765 Area of research into clinical

NOTE Confidence: 0.86001426

 $00:32:31.765 \longrightarrow 00:32:33.760$ relevance to our pregnant women.

NOTE Confidence: 0.86001426

 $00:32:33.760 \longrightarrow 00:32:36.546$ It's a whole lecture on its own.

NOTE Confidence: 0.86001426

 $00:32:36.550 \longrightarrow 00:32:38.950$ We recognize that there's a bidirectional

NOTE Confidence: 0.86001426

 $00:32:38.950 \longrightarrow 00:32:41.002$ relationship between sleep and mental

00:32:41.002 --> 00:32:43.336 health issues like anxiety and depression,

NOTE Confidence: 0.86001426

 $00:32:43.340 \longrightarrow 00:32:44.864$ and that in pregnancy.

NOTE Confidence: 0.86001426

 $00:32:44.864 \longrightarrow 00:32:46.769$ Mental health issues can often

NOTE Confidence: 0.86001426

 $00:32:46.769 \longrightarrow 00:32:48.919$ be exacerbated or new onset.

NOTE Confidence: 0.86001426

 $00:32:48.920 \longrightarrow 00:32:50.920$ Also in the postpartum period,

NOTE Confidence: 0.86001426

 $00:32:50.920 \longrightarrow 00:32:53.308$ which presents its whole unique sleep,

NOTE Confidence: 0.86001426

 $00:32:53.310 \longrightarrow 00:32:56.096$ challenges relating to caring for a newborn.

NOTE Confidence: 0.86001426

 $00:32:56.100 \longrightarrow 00:32:58.680$ So this is a super interesting

NOTE Confidence: 0.86001426

 $00:32:58.680 \longrightarrow 00:33:00.400$ area of research other.

NOTE Confidence: 0.86001426

 $00{:}33{:}00.400 \dashrightarrow 00{:}33{:}02.570$ Researchers in pregnancy and also

NOTE Confidence: 0.86001426

 $00:33:02.570 \longrightarrow 00:33:05.175$ sleep have focused on this and

NOTE Confidence: 0.86001426

00:33:05.175 --> 00:33:07.660 just want to make sure that we

NOTE Confidence: 0.86001426

 $00{:}33{:}07.660 \dashrightarrow 00{:}33{:}09.636$ recognize this as an important

NOTE Confidence: 0.86001426

 $00:33:09.636 \longrightarrow 00:33:11.626$ area in sleep and pregnancy.

NOTE Confidence: 0.8398661

 $00:33:14.340 \longrightarrow 00:33:15.010$ Research.

00:33:17.230 --> 00:33:19.950 Alright, and so now kind of the second

NOTE Confidence: 0.8480881

 $00{:}33{:}19.950 \dashrightarrow 00{:}33{:}23.242$ half of my talk is going to focus on the

NOTE Confidence: 0.8480881

 $00:33:23.242 \longrightarrow 00:33:26.029$ question I posed at the very beginning,

NOTE Confidence: 0.8480881

 $00:33:26.030 \longrightarrow 00:33:27.790$ which was is sleep healthy?

NOTE Confidence: 0.8480881

 $00:33:27.790 \longrightarrow 00:33:29.194$ Modifiable risk factor for

NOTE Confidence: 0.8480881

 $00:33:29.194 \longrightarrow 00:33:30.247$ adverse pregnancy outcomes?

NOTE Confidence: 0.8480881

 $00{:}33{:}30.250 \dashrightarrow 00{:}33{:}32.970$ So I showed you kind of the data

NOTE Confidence: 0.8480881

 $00:33:32.970 \longrightarrow 00:33:34.486$ suggesting that sleep disruption

NOTE Confidence: 0.8480881

 $00{:}33{:}34.486 {\:{\circ}{\circ}{\circ}\:} > 00{:}33{:}37.160$ is a real issue in our pregnant

NOTE Confidence: 0.8480881

00:33:37.160 --> 00:33:39.387 women that pregnant women have.

NOTE Confidence: 0.8480881

 $00{:}33{:}39.390 \dashrightarrow 00{:}33{:}42.126$ Significant rates of short sleep duration

NOTE Confidence: 0.8480881

00:33:42.126 --> 00:33:44.800 of circadian disruption with later sleep,

NOTE Confidence: 0.8480881

 $00:33:44.800 \longrightarrow 00:33:47.446$ tight time timing and that pregnancy

NOTE Confidence: 0.8480881

 $00{:}33{:}47.446 \dashrightarrow 00{:}33{:}50.210$ increases the rate of sleep apnea,

NOTE Confidence: 0.8480881

 $00:33:50.210 \longrightarrow 00:33:52.916$ especially in our most at risk,

NOTE Confidence: 0.8480881

 $00:33:52.920 \longrightarrow 00:33:54.273$ individuals frequent snores

 $00:33:54.273 \longrightarrow 00:33:56.077$ and individuals with obesity.

NOTE Confidence: 0.8480881

 $00:33:56.080 \longrightarrow 00:33:59.028$ So what do we know, though,

NOTE Confidence: 0.8480881

00:33:59.028 --> 00:34:01.820 from these Association studies?

NOTE Confidence: 0.8480881

 $00:34:01.820 \longrightarrow 00:34:06.916$ In terms of can we modify the?

NOTE Confidence: 0.8480881

 $00{:}34{:}06.920 \dashrightarrow 00{:}34{:}10.622$ The Sleep risk factor an improved

NOTE Confidence: 0.8480881

 $00:34:10.622 \longrightarrow 00:34:11.856$ pregnancy outcomes.

NOTE Confidence: 0.8480881

 $00:34:11.860 \longrightarrow 00:34:15.217$ And the issue is what that we don't know.

NOTE Confidence: 0.8480881

00:34:15.220 --> 00:34:18.140 We don't have a lot of data regarding

NOTE Confidence: 0.8480881

 $00{:}34{:}18.140 \dashrightarrow 00{:}34{:}19.766$ interventions in pregnancy that

NOTE Confidence: 0.8480881

 $00:34:19.766 \longrightarrow 00:34:22.238$ have addressed sleep and how they

NOTE Confidence: 0.8480881

 $00:34:22.238 \longrightarrow 00:34:24.219$ could impact maternal health.

NOTE Confidence: 0.8480881

 $00:34:24.220 \longrightarrow 00:34:26.596$ The majority of studies that have

NOTE Confidence: 0.8480881

 $00{:}34{:}26.596 \dashrightarrow 00{:}34{:}28.180$ looked at sleep interventions

NOTE Confidence: 0.8480881

 $00:34:28.251 \longrightarrow 00:34:29.699$ are small pilot trials.

NOTE Confidence: 0.8480881

 $00:34:29.700 \longrightarrow 00:34:31.555$ And the outcomes are typically

00:34:31.555 --> 00:34:33.410 focused on subjective sleep symptoms,

NOTE Confidence: 0.8480881

 $00:34:33.410 \longrightarrow 00:34:34.814$ as now common.

NOTE Confidence: 0.8480881

 $00:34:34.814 \longrightarrow 00:34:37.154$ Some have addressed maternal mood.

NOTE Confidence: 0.8480881

 $00:34:37.160 \longrightarrow 00:34:37.870$ As outcomes,

NOTE Confidence: 0.8480881

 $00:34:37.870 \longrightarrow 00:34:40.000$ this is a good systematic review

NOTE Confidence: 0.8480881

 $00:34:40.000 \longrightarrow 00:34:41.969$ that was published in 2020.

NOTE Confidence: 0.85071534

00:34:44.670 --> 00:34:48.214 In this review they looked and found 16

NOTE Confidence: 0.85071534

 $00:34:48.214 \longrightarrow 00:34:51.758$ studies of about 1250 expectant mothers.

NOTE Confidence: 0.85071534

 $00{:}34{:}51.760 \dashrightarrow 00{:}34{:}54.203$ And they found that the studies evaluated

NOTE Confidence: 0.85071534

 $00:34:54.203 \longrightarrow 00:34:56.346$ the efficacy of various interventions

NOTE Confidence: 0.85071534

 $00:34:56.346 \longrightarrow 00:34:58.926$ such as cognitive behavioral therapy.

NOTE Confidence: 0.85071534

00:34:58.930 --> 00:35:00.979 Cite pharmacotherapy, acupuncture,

NOTE Confidence: 0.85071534

 $00:35:00.979 \longrightarrow 00:35:03.028$ mindfulness, and yoga,

NOTE Confidence: 0.85071534

 $00:35:03.030 \longrightarrow 00:35:05.770$ relaxation and herbal medications.

NOTE Confidence: 0.80066943

 $00:35:08.150 \longrightarrow 00:35:11.740$ Only six were randomized control trial and

NOTE Confidence: 0.80066943

 $00:35:11.740 \longrightarrow 00:35:14.600$ only four evaluated longitudinal outcomes.

 $00:35:14.600 \longrightarrow 00:35:16.875$ And they, the authors of this review,

NOTE Confidence: 0.80066943

 $00{:}35{:}16.880 \dashrightarrow 00{:}35{:}18.410$ noted that there was preliminary

NOTE Confidence: 0.80066943

 $00:35:18.410 \longrightarrow 00:35:20.692$ support that was found for all the

NOTE Confidence: 0.80066943

00:35:20.692 --> 00:35:22.076 interventions that were studied,

NOTE Confidence: 0.80066943

 $00:35:22.080 \dashrightarrow 00:35:26.296$ but that the knowledge is still too limited.

NOTE Confidence: 0.80066943

00:35:26.300 --> 00:35:28.716 At this point in time to really understand

NOTE Confidence: 0.80066943

 $00:35:28.716 \longrightarrow 00:35:30.898$ how sleep interventions can improve.

NOTE Confidence: 0.80066943

 $00:35:30.900 \longrightarrow 00:35:33.276$ Sleep in pregnancy and how this

NOTE Confidence: 0.80066943

 $00:35:33.276 \longrightarrow 00:35:34.860$ should translate to improved

NOTE Confidence: 0.80066943

 $00{:}35{:}34.929 \dashrightarrow 00{:}35{:}36.577$ maternal is the outcomes.

NOTE Confidence: 0.80066943

 $00{:}35{:}36.580 \dashrightarrow 00{:}35{:}39.002$ This is one of the largest trials

NOTE Confidence: 0.80066943

 $00:35:39.002 \longrightarrow 00:35:41.599$ that has been published on a

NOTE Confidence: 0.80066943

 $00{:}35{:}41.599 \dashrightarrow 00{:}35{:}43.575$ sleep intervention in pregnancy.

NOTE Confidence: 0.80066943

 $00:35:43.580 \longrightarrow 00:35:45.996$ It was a study that was titled efficacy

NOTE Confidence: 0.80066943

 $00:35:45.996 \longrightarrow 00:35:48.295$ of a digital cognitive behavioral

00:35:48.295 --> 00:35:51.000 therapy for treatment of insomnia,

NOTE Confidence: 0.80066943

 $00:35:51.000 \dashrightarrow 00:35:53.060$ symptoms and among pregnant women.

NOTE Confidence: 0.80066943

 $00:35:53.060 \longrightarrow 00:35:56.356$ It was one of the randomized control trials.

NOTE Confidence: 0.80066943

 $00:35:56.360 \longrightarrow 00:35:59.090$ It included 200 women who are randomized

NOTE Confidence: 0.80066943

 $00:35:59.090 \longrightarrow 00:36:01.192$ to either receive cognitive behavioral

NOTE Confidence: 0.80066943

00:36:01.192 --> 00:36:03.766 therapy or kind of usual care,

NOTE Confidence: 0.80066943

 $00:36:03.770 \longrightarrow 00:36:06.608$ and they found that women randomized.

NOTE Confidence: 0.80066943

 $00:36:06.610 \longrightarrow 00:36:08.745$ Received the digital Cognitive Behavioral

NOTE Confidence: 0.80066943

00:36:08.745 --> 00:36:10.453 therapy experience statistically significant.

NOTE Confidence: 0.80066943

 $00:36:10.460 \longrightarrow 00:36:12.052$ Greater improvements in insomnia

NOTE Confidence: 0.80066943

 $00:36:12.052 \longrightarrow 00:36:14.042$ symptom severity from baseline to

NOTE Confidence: 0.80066943

 $00:36:14.042 \longrightarrow 00:36:16.313$ post intervention compared to women

NOTE Confidence: 0.80066943

 $00:36:16.313 \longrightarrow 00:36:18.583$ randomized to receive standard treatments,

NOTE Confidence: 0.80066943

 $00{:}36{:}18.590 \dashrightarrow 00{:}36{:}22.442$ so this is kind of a very important study,

NOTE Confidence: 0.80066943

 $00:36:22.450 \longrightarrow 00:36:23.252$ but again,

NOTE Confidence: 0.80066943

 $00:36:23.252 \longrightarrow 00:36:26.059$ kind of very focused on the maternal

 $00{:}36{:}26.059 --> 00{:}36{:}27.150 \ {\rm sleep \ symptom},$

NOTE Confidence: 0.80066943

 $00{:}36{:}27.150 {\:{\circ}{\circ}{\circ}}>00{:}36{:}29.978$ which is a first step in understanding

NOTE Confidence: 0.80066943

 $00:36:29.978 \longrightarrow 00:36:32.207$ sleep as potentially modifiable for

NOTE Confidence: 0.80066943

00:36:32.207 --> 00:36:35.039 maternal fetal health and certainly helping

NOTE Confidence: 0.80066943

 $00{:}36{:}35.039 \dashrightarrow 00{:}36{:}37.976$ women feel better in terms of insomnia.

NOTE Confidence: 0.80066943

 $00:36:37.980 \longrightarrow 00:36:39.685$ Symptoms and just the quality

NOTE Confidence: 0.80066943

 $00:36:39.685 \longrightarrow 00:36:42.140$ of the sleep is very important,

NOTE Confidence: 0.80066943

 $00:36:42.140 \longrightarrow 00:36:44.025$ but as a maternal fetal

NOTE Confidence: 0.80066943

 $00{:}36{:}44.025 \dashrightarrow 00{:}36{:}45.533$ medicine physician and clinic,

NOTE Confidence: 0.80066943

 $00:36:45.540 \longrightarrow 00:36:48.450$ I'm also interested in kind of

NOTE Confidence: 0.80066943

 $00:36:48.450 \longrightarrow 00:36:51.529$ taking it to the next step.

NOTE Confidence: 0.80066943

 $00:36:51.530 \longrightarrow 00:36:54.060$ Which is understanding how potentially

NOTE Confidence: 0.80066943

 $00{:}36{:}54.060 \dashrightarrow 00{:}36{:}56.084$ sleep interventions can improve

NOTE Confidence: 0.80066943

 $00:36:56.084 \longrightarrow 00:36:57.860$ pregnancy outcomes for women,

NOTE Confidence: 0.80066943

 $00:36:57.860 \longrightarrow 00:37:00.295$ and particularly given the associations

 $00:37:00.295 \longrightarrow 00:37:02.730$ we found which stational diabetes,

NOTE Confidence: 0.80066943

 $00{:}37{:}02.730 \dashrightarrow 00{:}37{:}05.370$ preeclampsia and preterm birth

NOTE Confidence: 0.80066943

 $00{:}37{:}05.370 \dashrightarrow 00{:}37{:}08.010$ could sleep interventions help

NOTE Confidence: 0.80066943

 $00:37:08.010 \longrightarrow 00:37:11.530$ reduce the rate of these outcomes.

NOTE Confidence: 0.80066943

 $00:37:11.530 \longrightarrow 00:37:13.990$ So one of the most interesting

NOTE Confidence: 0.80066943

 $00:37:13.990 \longrightarrow 00:37:16.884$ areas of research in this on this

NOTE Confidence: 0.80066943

 $00:37:16.884 \longrightarrow 00:37:18.444$ topic is sleep apnea.

NOTE Confidence: 0.80066943

 $00{:}37{:}18.450 \dashrightarrow 00{:}37{:}20.640$ Because we know that sleep apnea

NOTE Confidence: 0.80066943

 $00:37:20.640 \longrightarrow 00:37:23.100$ has an effective treatment which is

NOTE Confidence: 0.80066943

00:37:23.100 --> 00:37:24.960 continuous positive airway pressure,

NOTE Confidence: 0.80066943

 $00:37:24.960 \longrightarrow 00:37:27.760$ and so we have this real opportunity

NOTE Confidence: 0.80066943

 $00:37:27.760 \longrightarrow 00:37:30.658$ in pregnancy to study of sleep apnea.

NOTE Confidence: 0.80066943

 $00{:}37{:}30.660 \dashrightarrow 00{:}37{:}32.535$ Treatment can reduce the incidence

NOTE Confidence: 0.80066943

 $00:37:32.535 \longrightarrow 00:37:34.916$ of kind of complications such as

NOTE Confidence: 0.80066943

00:37:34.916 --> 00:37:36.692 hypertensive disorders or just

NOTE Confidence: 0.80066943

 $00:37:36.692 \longrightarrow 00:37:37.580$ stational diabetes.

00:37:39.670 --> 00:37:42.428 CPAP trials in non primary cohorts and

NOTE Confidence: 0.81881964

 $00:37:42.428 \longrightarrow 00:37:45.304$ I don't have to tell this audience

NOTE Confidence: 0.81881964

00:37:45.304 --> 00:37:48.251 here because I'm sure you know I

NOTE Confidence: 0.81881964

00:37:48.251 --> 00:37:50.506 speak to both pregnancy audience,

NOTE Confidence: 0.81881964

 $00:37:50.510 \longrightarrow 00:37:51.761$ pregnancy centered audience

NOTE Confidence: 0.81881964

 $00:37:51.761 \longrightarrow 00:37:53.429$ and sleep centered audiences.

NOTE Confidence: 0.81881964

00:37:53.430 --> 00:37:56.286 But obviously you know this group knows

NOTE Confidence: 0.81881964

 $00:37:56.286 \longrightarrow 00:37:59.703$ that what we know from CPAP trials and

NOTE Confidence: 0.81881964

 $00{:}37{:}59.703 \dashrightarrow 00{:}38{:}02.610$ non pregnant cohorts is that it works.

NOTE Confidence: 0.81881964

 $00{:}38{:}02.610 \dashrightarrow 00{:}38{:}05.137$ It normalizes the HI and that very

NOTE Confidence: 0.81881964

 $00:38:05.137 \dashrightarrow 00:38:07.752$ clearly is shown improved sleep quality

NOTE Confidence: 0.81881964

 $00:38:07.752 \longrightarrow 00:38:10.674$ in daytime symptoms in individuals who.

NOTE Confidence: 0.81881964

 $00:38:10.680 \longrightarrow 00:38:13.690$ Have become compliant on their see PAP.

NOTE Confidence: 0.81881964

 $00:38:13.690 \longrightarrow 00:38:17.302$ There's also some signal that CPAP may

NOTE Confidence: 0.81881964

 $00:38:17.302 \longrightarrow 00:38:19.602$ improve cardiovascular outcomes in non

 $00:38:19.602 \longrightarrow 00:38:22.314$ pregnant cohorts and this is one of the

NOTE Confidence: 0.81881964

 $00:38:22.388 \longrightarrow 00:38:24.488$ biggest trials regarding this which

NOTE Confidence: 0.81881964

 $00:38:24.488 \longrightarrow 00:38:28.057$ is a trial by Barbara at all that.

NOTE Confidence: 0.81881964

 $00:38:28.057 \longrightarrow 00:38:30.991$ Look at OSA participants without Dasein

NOTE Confidence: 0.81881964

 $00:38:30.991 \longrightarrow 00:38:33.698$ sleepiness and they prescribe them CPAP

NOTE Confidence: 0.81881964

 $00{:}38{:}33.698 \dashrightarrow 00{:}38{:}36.629$ compared to usual care and what they

NOTE Confidence: 0.81881964

 $00{:}38{:}36.629 \dashrightarrow 00{:}38{:}39.485$ looked at was the follow up rates of

NOTE Confidence: 0.81881964

 $00:38:39.490 \longrightarrow 00:38:41.210$ hypertension of cardiovascular events.

NOTE Confidence: 0.81881964

 $00:38:41.210 \longrightarrow 00:38:43.790$ And on the left was their

NOTE Confidence: 0.81881964

 $00:38:43.867 \longrightarrow 00:38:45.547$ sample of the entire RCT,

NOTE Confidence: 0.81881964

 $00:38:45.550 \longrightarrow 00:38:47.350$ and while the curves looked

NOTE Confidence: 0.81881964

 $00:38:47.350 \longrightarrow 00:38:48.430$ a little different,

NOTE Confidence: 0.81881964

 $00:38:48.430 \longrightarrow 00:38:50.248$ it looks like the control group

NOTE Confidence: 0.81881964

 $00:38:50.248 \longrightarrow 00:38:51.934$ had higher rates of hypertension

NOTE Confidence: 0.81881964

 $00:38:51.934 \longrightarrow 00:38:53.574$ and cardiovascular events compared

NOTE Confidence: 0.81881964

 $00:38:53.574 \longrightarrow 00:38:55.624$ to the see PAP group.

 $00:38:55.630 \longrightarrow 00:38:58.136$ But the trend that they saw did

NOTE Confidence: 0.81881964

 $00{:}38{:}58.136 \dashrightarrow 00{:}38{:}59.690$ not reach statistical significance

NOTE Confidence: 0.81881964

 $00:38:59.690 \longrightarrow 00:39:02.126$ when they did a subgroup analysis

NOTE Confidence: 0.81881964

 $00:39:02.126 \longrightarrow 00:39:04.627$ based on uses of usage of C Pap.

NOTE Confidence: 0.81881964

00:39:04.630 --> 00:39:05.032 However,

NOTE Confidence: 0.81881964

 $00:39:05.032 \dashrightarrow 00:39:07.444$ they did find that individuals who

NOTE Confidence: 0.81881964

00:39:07.444 --> 00:39:09.717 were compliant with CPAP by definition

NOTE Confidence: 0.81881964

 $00:39:09.717 \dashrightarrow 00:39:12.300$ of using it greater than or equal to.

NOTE Confidence: 0.81881964

 $00:39:12.300 \longrightarrow 00:39:13.756$ 4 hours per night.

NOTE Confidence: 0.81881964

 $00:39:13.756 \longrightarrow 00:39:15.576$ Did have a statistically significant

NOTE Confidence: 0.81881964

 $00{:}39{:}15.576 \dashrightarrow 00{:}39{:}17.850$ reduction in the rate of hypertension

NOTE Confidence: 0.81881964

 $00:39{:}17.850 \dashrightarrow 00{:}39{:}19.700$ or cardiovascular events at follow-up.

NOTE Confidence: 0.8797566

 $00:39:22.810 \dashrightarrow 00:39:25.666$ The see PAP in pregnancy data is very

NOTE Confidence: 0.8797566

 $00{:}39{:}25.666 \dashrightarrow 00{:}39{:}28.256$ very limited and I didn't pull up a

NOTE Confidence: 0.8797566

00:39:28.256 --> 00:39:30.688 lot of studies here because I will

 $00:39:30.688 \longrightarrow 00:39:33.390$ tell you the majority are case reports.

NOTE Confidence: 0.8797566

 $00:39:33.390 \longrightarrow 00:39:35.460$ For example, they'll have a women

NOTE Confidence: 0.8797566

 $00:39:35.460 \longrightarrow 00:39:37.278$ woman with preeclampsia in early

NOTE Confidence: 0.8797566

 $00:39:37.278 \longrightarrow 00:39:39.522$ pregnancy that they're trying to manage

NOTE Confidence: 0.8797566

 $00:39:39.522 \longrightarrow 00:39:41.395$ expectantly and not deliver because

NOTE Confidence: 0.8797566

 $00:39:41.395 \longrightarrow 00:39:43.465$ of her early just stational age,

NOTE Confidence: 0.8797566

 $00:39:43.470 \longrightarrow 00:39:45.990$ they'll find that she has sleep apnea.

NOTE Confidence: 0.8797566

 $00:39:45.990 \longrightarrow 00:39:47.930$ They'll put her on.

NOTE Confidence: 0.8797566

 $00{:}39{:}47.930 \dashrightarrow 00{:}39{:}49.956$ You happen, they'll notice an

NOTE Confidence: 0.8797566

 $00:39:49.956 \longrightarrow 00:39:51.364$ improvement of blood pressure,

NOTE Confidence: 0.8797566

 $00{:}39{:}51.370 \dashrightarrow 00{:}39{:}53.811$ and they'll write up that case, report,

NOTE Confidence: 0.8797566

 $00:39:53.811 \longrightarrow 00:39:56.128$ or kind of other smaller case series

NOTE Confidence: 0.8797566

 $00:39:56.128 \longrightarrow 00:39:58.415$ with very similar kind of outcomes

NOTE Confidence: 0.8797566

 $00:39:58.415 \longrightarrow 00:40:00.360$ that improved in blood pressure.

NOTE Confidence: 0.8797566

 $00:40:00.360 \longrightarrow 00:40:03.260$ In small groups of women.

NOTE Confidence: 0.8797566

 $00{:}40{:}03.260 \dashrightarrow 00{:}40{:}06.872$ So we really don't know how CPAP

00:40:06.872 --> 00:40:09.380 can improve pregnancy outcomes.

NOTE Confidence: 0.8797566

 $00:40:09.380 \longrightarrow 00:40:11.739$ And this is despite the fact that

NOTE Confidence: 0.8797566

00:40:11.739 --> 00:40:13.831 actually pregnancy is an ideal scenario

NOTE Confidence: 0.8797566

 $00:40:13.831 \longrightarrow 00:40:15.853$ to better understand the role of

NOTE Confidence: 0.8797566

 $00:40:15.853 \longrightarrow 00:40:18.675$ CPAP as a preventative strategy to

NOTE Confidence: 0.8797566

 $00:40:18.675 \longrightarrow 00:40:20.124$ reduce cardiometabolic morbidity.

NOTE Confidence: 0.8797566

00:40:20.130 --> 00:40:22.818 If we think about outside of pregnancy,

NOTE Confidence: 0.8797566

 $00:40:22.820 \longrightarrow 00:40:24.899$ we know that in order to really

NOTE Confidence: 0.8797566

 $00:40:24.899 \longrightarrow 00:40:27.408$ study the see Pap's role in

NOTE Confidence: 0.8797566

 $00:40:27.408 \longrightarrow 00:40:28.959$ cardiovascular metabolic disease,

NOTE Confidence: 0.8797566

 $00{:}40{:}28.960 \dashrightarrow 00{:}40{:}31.528$ we have to take individuals diagnosed

NOTE Confidence: 0.8797566

 $00:40:31.528 \longrightarrow 00:40:34.298$ him with sleep apnea and follow them

NOTE Confidence: 0.8797566

 $00{:}40{:}34.298 \dashrightarrow 00{:}40{:}37.444$ for kind of years to see and look for

NOTE Confidence: 0.8797566

 $00:40:37.444 \longrightarrow 00:40:39.826$ the incidence of kind of diabetes.

NOTE Confidence: 0.8797566

 $00:40:39.830 \longrightarrow 00:40:40.982$ Or cardiovascular disease,

 $00:40:40.982 \longrightarrow 00:40:43.670$ and a lot of times some studies

NOTE Confidence: 0.8797566

00:40:43.745 --> 00:40:45.665 like the same study you know,

NOTE Confidence: 0.8797566

 $00:40:45.670 \longrightarrow 00:40:47.889$ because of the fact that you know

NOTE Confidence: 0.8797566

 $00:40:47.889 \longrightarrow 00:40:50.528$ you have to follow people for years

NOTE Confidence: 0.8797566

 $00:40:50.528 \longrightarrow 00:40:53.377$ to look at new onset hypertension or

NOTE Confidence: 0.8797566

00:40:53.377 --> 00:40:55.897 new onset diabetes or act or actually

NOTE Confidence: 0.8797566

 $00:40:55.897 \longrightarrow 00:40:57.862$ doing CPAP studies as secondary

NOTE Confidence: 0.8797566

 $00:40:57.862 \longrightarrow 00:40:59.518$ prevention taking individuals who

NOTE Confidence: 0.8797566

 $00{:}40{:}59.518 {\: --}{\:>\:} 00{:}41{:}01.185$ already have underlying cardiovascular

NOTE Confidence: 0.8797566

00:41:01.185 --> 00:41:03.747 disease and using CPAP as kind of

NOTE Confidence: 0.8797566

 $00{:}41{:}03.747 \dashrightarrow 00{:}41{:}05.449$ secondary prevention of like worsening

NOTE Confidence: 0.8797566

 $00:41:05.449 \longrightarrow 00:41:07.267$ of their cardiovascular status or a

NOTE Confidence: 0.8797566

00:41:07.267 --> 00:41:10.276 new event on top of their baseline.

NOTE Confidence: 0.8797566

00:41:10.280 --> 00:41:11.300 But in pregnancy,

NOTE Confidence: 0.8797566

 $00:41:11.300 \longrightarrow 00:41:13.340$ what's interesting is a woman can

NOTE Confidence: 0.8797566

 $00:41:13.340 \longrightarrow 00:41:15.130$ go from being completely,

00:41:15.130 --> 00:41:15.806 you know,

NOTE Confidence: 0.8797566

 $00:41:15.806 \longrightarrow 00:41:17.496$ euglycemic at the beginning of

NOTE Confidence: 0.8797566

00:41:17.496 --> 00:41:19.367 pregnancy and within nine months

NOTE Confidence: 0.8797566

 $00{:}41{:}19.367 \dashrightarrow 00{:}41{:}21.362$ develop a real metabolic dysfunction

NOTE Confidence: 0.8797566

 $00:41:21.362 \longrightarrow 00:41:23.339$ that requires treatment with insulin.

NOTE Confidence: 0.8797566

00:41:23.340 --> 00:41:23.700 Similarly,

NOTE Confidence: 0.8797566

00:41:23.700 --> 00:41:25.860 a woman can go into pregnancy

NOTE Confidence: 0.8797566

 $00:41:25.860 \longrightarrow 00:41:27.440$ and be completely normal,

NOTE Confidence: 0.8797566

 $00:41:27.440 \longrightarrow 00:41:29.305$ tensive and developed by the

NOTE Confidence: 0.8797566

 $00:41:29.305 \longrightarrow 00:41:30.797$ end of their pregnancy.

NOTE Confidence: 0.8797566

00:41:30.800 --> 00:41:33.026 A very severe form of hypertension,

NOTE Confidence: 0.8797566

 $00:41:33.030 \longrightarrow 00:41:35.080$ such as severe preeclampsia that

NOTE Confidence: 0.8797566

 $00:41:35.080 \longrightarrow 00:41:36.720$ requires medical management and

NOTE Confidence: 0.8797566

 $00:41:36.720 \longrightarrow 00:41:38.994$ so given kind of the Physiology

NOTE Confidence: 0.8797566

 $00:41:38.994 \longrightarrow 00:41:40.434$ of normal pregnancy and.

 $00:41:40.440 \longrightarrow 00:41:41.955$ Adverse pregnancy outcomes.

NOTE Confidence: 0.8797566

 $00{:}41{:}41.955 \dashrightarrow 00{:}41{:}44.985$ Studying sleep apnea in pregnancy and

NOTE Confidence: 0.8797566

 $00:41:44.985 \longrightarrow 00:41:47.717$ the role of CPAP is very exciting for

NOTE Confidence: 0.8797566

 $00:41:47.717 \longrightarrow 00:41:50.548$ me and I think exciting for the C,

NOTE Confidence: 0.8797566

 $00:41:50.550 \longrightarrow 00:41:52.800$ pap and sleep world in general

NOTE Confidence: 0.8797566

 $00:41:52.800 \longrightarrow 00:41:55.045$ because it really gives us an

NOTE Confidence: 0.8797566

 $00:41:55.045 \longrightarrow 00:41:57.049$ opportunity to understand C pap as

NOTE Confidence: 0.8797566

00:41:57.049 --> 00:42:00.290 kind of a preventative strategy for

NOTE Confidence: 0.8797566

 $00:42:00.290 \longrightarrow 00:42:02.168$ reducing cardiometabolic morbidity.

NOTE Confidence: 0.8797566

00:42:02.170 --> 00:42:04.528 So I'm going to bring you to kind of

NOTE Confidence: 0.8797566

 $00{:}42{:}04.528 \to 00{:}42{:}07.406$ my last few sides which review a CPAP

NOTE Confidence: 0.8797566

 $00:42:07.406 \longrightarrow 00:42:10.067$ trial and pregnancy which is run by

NOTE Confidence: 0.8797566

 $00{:}42{:}10.067 \dashrightarrow 00{:}42{:}11.937$ the maternal fetal medicine units.

NOTE Confidence: 0.8797566

00:42:11.940 --> 00:42:13.785 Networking is called with sleep

NOTE Confidence: 0.8797566

 $00{:}42{:}13.785 \dashrightarrow 00{:}42{:}15.979$ trial and it's a multicenter RCT

NOTE Confidence: 0.8797566

 $00:42:15.979 \longrightarrow 00:42:17.665$ and yell is actually a site.

 $00:42:17.670 \longrightarrow 00:42:19.862$ I don't know if any of you here

NOTE Confidence: 0.8797566

 $00:42:19.862 \longrightarrow 00:42:22.364$ are aware of the study or have had

NOTE Confidence: 0.8797566

00:42:22.364 --> 00:42:24.131 patients that you have potentially

NOTE Confidence: 0.8797566

00:42:24.131 --> 00:42:26.765 interacted with were in our study,

NOTE Confidence: 0.8797566

 $00{:}42{:}26.770 \dashrightarrow 00{:}42{:}28.570$ but yell is participating as a

NOTE Confidence: 0.8797566

00:42:28.570 --> 00:42:30.480 subsite of our Brown University,

NOTE Confidence: 0.8797566

 $00:42:30.480 \longrightarrow 00:42:32.690$ which is one of the.

NOTE Confidence: 0.84486306

 $00:42:32.690 \longrightarrow 00:42:34.940$ The central sites of the study.

NOTE Confidence: 0.84486306

 $00:42:34.940 \longrightarrow 00:42:37.446$ So pregnant individuals who have a BMI

NOTE Confidence: 0.84486306

 $00:42:37.446 \longrightarrow 00:42:40.246$ greater than or equal to 30 are actually

NOTE Confidence: 0.84486306

 $00{:}42{:}40.246 \dashrightarrow 00{:}42{:}42.692$ identified to take home a home sleep

NOTE Confidence: 0.84486306

 $00:42:42.692 \longrightarrow 00:42:45.198$ test and to identify as either having

NOTE Confidence: 0.84486306

 $00{:}42{:}45.198 \dashrightarrow 00{:}42{:}47.884$ sleep apnea by an HIV greater than or

NOTE Confidence: 0.84486306

 $00:42:47.884 \longrightarrow 00:42:50.868$ equal 5 or having a no sleep apnea.

NOTE Confidence: 0.84486306

 $00:42:50.870 \longrightarrow 00:42:53.816$ An women who are identified as

 $00:42:53.816 \longrightarrow 00:42:56.320$ sleep apnea positive are then.

NOTE Confidence: 0.84486306

 $00:42:56.320 \longrightarrow 00:42:58.426$ Recruited to be randomized into the

NOTE Confidence: 0.84486306

 $00:42:58.426 \longrightarrow 00:43:00.800$ RCT and the randomized control trials,

NOTE Confidence: 0.84486306

 $00:43:00.800 \longrightarrow 00:43:03.624$ it's the the two arms are the use

NOTE Confidence: 0.84486306

 $00:43:03.624 \longrightarrow 00:43:06.660$ of auto titrating CPAP or a sleep

NOTE Confidence: 0.84486306

 $00:43:06.660 \longrightarrow 00:43:09.361$ hygiene control or in kind of

NOTE Confidence: 0.84486306

 $00:43:09.361 \longrightarrow 00:43:12.345$ another way to say a usual care arm.

NOTE Confidence: 0.84486306

00:43:12.350 --> 00:43:13.905 Our primary hypothesis of this

NOTE Confidence: 0.84486306

 $00{:}43{:}13.905 \dashrightarrow 00{:}43{:}15.802$ trial is the treatment of sleep

NOTE Confidence: 0.84486306

00:43:15.802 --> 00:43:17.500 apnea with CPAP in pregnancy will

NOTE Confidence: 0.84486306

 $00:43:17.500 \longrightarrow 00:43:20.289$ result in a reduction in the rate of

NOTE Confidence: 0.84486306

00:43:20.289 --> 00:43:21.793 hypertensive disorders of pregnancy.

NOTE Confidence: 0.8333344

 $00:43:24.700 \longrightarrow 00:43:26.548$ So why are we screaming individuals

NOTE Confidence: 0.8333344

 $00{:}43{:}26.548 \dashrightarrow 00{:}43{:}28.872$ with a BMI of greater than equal

NOTE Confidence: 0.8333344

 $00:43:28.872 \longrightarrow 00:43:30.924$ 30 and not all pregnant women?

NOTE Confidence: 0.8333344

 $00:43:30.930 \longrightarrow 00:43:33.370$ Well, we know from the Newmont to be

 $00:43:33.370 \longrightarrow 00:43:36.089$ data that actually this is kind of the

NOTE Confidence: 0.8333344

 $00{:}43{:}36.089 \dashrightarrow 00{:}43{:}38.487$ highest risk group and it's an easy

NOTE Confidence: 0.8333344

 $00:43:38.487 \longrightarrow 00:43:41.097$ thing for us to ascertain and screen by.

NOTE Confidence: 0.8333344

 $00:43:41.097 \longrightarrow 00:43:43.713$ So from the new mom to be data,

NOTE Confidence: 0.8333344

 $00:43:43.720 \longrightarrow 00:43:46.016$ we knew that in the mid pregnancy

NOTE Confidence: 0.8333344

00:43:46.016 --> 00:43:47.680 assessment about 20% of individuals

NOTE Confidence: 0.8333344

 $00:43:47.680 \longrightarrow 00:43:50.610$ had an HIV greater than or equal to 5.

NOTE Confidence: 0.80874044

 $00:43:52.820 \longrightarrow 00:43:55.172$ In turning in terms of the timing of

NOTE Confidence: 0.80874044

00:43:55.172 --> 00:43:57.966 when we screen our women for this trial,

NOTE Confidence: 0.80874044

00:43:57.970 --> 00:43:59.896 when we kind of conceptualizes trial,

NOTE Confidence: 0.80874044

 $00:43:59.900 \longrightarrow 00:44:02.042$ we really talked a lot about the

NOTE Confidence: 0.80874044

 $00{:}44{:}02.042 \dashrightarrow 00{:}44{:}04.354$ balance in terms of when to screen

NOTE Confidence: 0.80874044

 $00:44:04.354 \longrightarrow 00:44:06.019$ for sleep apnea and pregnancy.

NOTE Confidence: 0.80874044

 $00:44:06.020 \longrightarrow 00:44:07.630$ Obviously, the later you recruit,

NOTE Confidence: 0.80874044

 $00:44:07.630 \longrightarrow 00:44:10.070$ the more sleep apnea you will find as

00:44:10.070 --> 00:44:12.264 the changes weight gain, adima, etc.

NOTE Confidence: 0.80874044

 $00:44:12.264 \longrightarrow 00:44:14.938$ Of pregnancy will likely continue to increase

NOTE Confidence: 0.80874044

 $00:44:14.938 \longrightarrow 00:44:17.828$ the rate of preeclampsia in pregnant women.

NOTE Confidence: 0.80874044

00:44:17.830 --> 00:44:20.260 So you'll find more sleep apnea,

NOTE Confidence: 0.80874044

 $00:44:20.260 \longrightarrow 00:44:22.948$ but however fighting it really late

NOTE Confidence: 0.80874044

 $00{:}44{:}22.948 \dashrightarrow 00{:}44{:}25.746$ really minimizes your ability to treat it

NOTE Confidence: 0.80874044

 $00:44:25.746 \longrightarrow 00:44:28.433$ in terms of getting people on the CPAP

NOTE Confidence: 0.80874044

 $00:44:28.433 \longrightarrow 00:44:30.638$ therapy and getting them comfortable

NOTE Confidence: 0.80874044

 $00{:}44{:}30.638 \dashrightarrow 00{:}44{:}32.781$ and compliant with the therapy,

NOTE Confidence: 0.80874044

 $00:44:32.781 \longrightarrow 00:44:35.378$ and so the earlier you get women

NOTE Confidence: 0.80874044

00:44:35.378 --> 00:44:36.870 into the pipeline,

NOTE Confidence: 0.80874044

 $00:44:36.870 \longrightarrow 00:44:39.186$ the hopefully you'll have the highest

NOTE Confidence: 0.80874044

00:44:39.186 --> 00:44:41.320 amount of exposure to therapy,

NOTE Confidence: 0.80874044

 $00:44:41.320 \longrightarrow 00:44:43.750$ and probably the optimal treatment effect.

NOTE Confidence: 0.80874044

 $00:44:43.750 \longrightarrow 00:44:46.375$ So you have to balance these two

NOTE Confidence: 0.80874044

 $00{:}44{:}46.375 \dashrightarrow 00{:}44{:}48.680$ things when you're thinking about.

 $00:44:48.680 \longrightarrow 00:44:50.820$ Screening and treating sleep apnea

NOTE Confidence: 0.80874044

 $00{:}44{:}50.820 \dashrightarrow 00{:}44{:}53.439$ and pregnancy and then kind of

NOTE Confidence: 0.80874044

 $00:44:53.439 \longrightarrow 00:44:55.474$ having these discussions are group

NOTE Confidence: 0.80874044

 $00:44:55.474 \longrightarrow 00:44:57.896$ has decided to screen women and

NOTE Confidence: 0.80874044

 $00{:}44{:}57.896 \dashrightarrow 00{:}45{:}00.050$ randomize them between 16 weeks and

NOTE Confidence: 0.80874044

 $00:45:00.050 \longrightarrow 00:45:04.470$ 20 and 620 weeks 60s in gestation.

NOTE Confidence: 0.80874044

 $00:45:04.470 \longrightarrow 00:45:06.282$ We diagnose sleep apnea

NOTE Confidence: 0.80874044

 $00:45:06.282 \longrightarrow 00:45:08.547$ via a home sleep test,

NOTE Confidence: 0.80874044

 $00:45:08.550 \longrightarrow 00:45:11.566$ so we are using the apnea link shown

NOTE Confidence: 0.80874044

 $00:45:11.566 \longrightarrow 00:45:14.986$ here to diagnose sleep apnea and all of

NOTE Confidence: 0.80874044

 $00{:}45{:}14.986 \dashrightarrow 00{:}45{:}18.417$ the acne links are downloaded an read

NOTE Confidence: 0.80874044

 $00:45:18.417 \longrightarrow 00:45:21.675$ by a centralized sleep reading center,

NOTE Confidence: 0.80874044

 $00{:}45{:}21.680 \dashrightarrow 00{:}45{:}25.411$ so we all have centralized and quality

NOTE Confidence: 0.80874044

00:45:25.411 --> 00:45:28.939 control procedures for diagnosing RC Batman.

NOTE Confidence: 0.80874044

 $00:45:28.940 \longrightarrow 00:45:31.620$ We do have an exclusion for severe sleep

00:45:31.620 --> 00:45:34.437 apnea and for severe nocturnal hypoxemia,

NOTE Confidence: 0.80874044

 $00:45:34.440 \longrightarrow 00:45:37.176$ so women with an age I have greater

NOTE Confidence: 0.80874044

 $00:45:37.176 \longrightarrow 00:45:40.095$ than or equal to 30 or nocturnal

NOTE Confidence: 0.80874044

00:45:40.095 --> 00:45:42.717 hypoxemia as defined here are told

NOTE Confidence: 0.80874044

 $00:45:42.717 \longrightarrow 00:45:45.447$ that that is what the results of

NOTE Confidence: 0.80874044

 $00:45:45.447 \longrightarrow 00:45:47.926$ their sleep apnea test showed and

NOTE Confidence: 0.80874044

 $00:45:47.926 \longrightarrow 00:45:50.470$ then they are given local resources

NOTE Confidence: 0.80874044

 $00:45:50.553 \longrightarrow 00:45:53.305$ to see clinical care if they want to.

NOTE Confidence: 0.80874044

 $00{:}45{:}53.310 \dashrightarrow 00{:}45{:}55.764$ It is anticipated an action we

NOTE Confidence: 0.80874044

00:45:55.764 --> 00:45:58.235 have found through the early phases

NOTE Confidence: 0.80874044

 $00{:}45{:}58.235 \dashrightarrow 00{:}46{:}00.874$ of the study that this is rare.

NOTE Confidence: 0.80874044

 $00:46:00.880 \longrightarrow 00:46:03.170$ As I showed you in the new mom to be

NOTE Confidence: 0.80874044

 $00:46:03.234 \longrightarrow 00:46:05.768$ studying severe sleep apnea is rare in

NOTE Confidence: 0.80874044

 $00:46:05.768 \longrightarrow 00:46:07.829$ pregnancy and then this is anticipated

NOTE Confidence: 0.80874044

 $00:46:07.829 \longrightarrow 00:46:11.968$ to be less than 1% of our patient population.

NOTE Confidence: 0.80874044

 $00:46:11.970 \longrightarrow 00:46:14.184$ Here are two arms I mentioned

00:46:14.184 --> 00:46:16.080 that auto titrating CPAP rman.

NOTE Confidence: 0.80874044

00:46:16.080 --> 00:46:17.576 The sleep hygiene control

NOTE Confidence: 0.80874044

00:46:17.576 --> 00:46:19.446 and auto titrating CPAP farm.

NOTE Confidence: 0.80874044

 $00:46:19.450 \longrightarrow 00:46:21.760$ There given information about healthy sleep

NOTE Confidence: 0.80874044

00:46:21.760 --> 00:46:24.688 and then they are given AC pap machine,

NOTE Confidence: 0.80874044

00:46:24.690 --> 00:46:26.928 appropriate mask and a lot of

NOTE Confidence: 0.80874044

 $00:46:26.928 \longrightarrow 00:46:29.549$ education and follow up about CPAP use.

NOTE Confidence: 0.80874044

 $00:46:29.550 \longrightarrow 00:46:32.063$ They get weekly follow up in that

NOTE Confidence: 0.80874044

00:46:32.063 --> 00:46:34.640 group where we monitor compliance.

NOTE Confidence: 0.80874044

 $00:46:34.640 \longrightarrow 00:46:36.520$ In the Sleep Hygiene group,

NOTE Confidence: 0.80874044

 $00:46:36.520 \longrightarrow 00:46:39.025$ they get similar informational handouts

NOTE Confidence: 0.80874044

 $00:46:39.025 \longrightarrow 00:46:42.023$ about healthy sleep and also seek

NOTE Confidence: 0.80874044

 $00{:}46{:}42.023 \dashrightarrow 00{:}46{:}44.489$ resources should they seek to too.

NOTE Confidence: 0.80874044

 $00:46:44.490 \longrightarrow 00:46:46.956$ Need to seek care for clinical

NOTE Confidence: 0.80874044

 $00:46:46.956 \longrightarrow 00:46:49.649$ issues and then they get monthly.

 $00:46:49.650 \longrightarrow 00:46:52.230$ Follow up through our study team.

NOTE Confidence: 0.80874044

 $00:46:52.230 \longrightarrow 00:46:55.240$ We do a lot of compliance monitoring.

NOTE Confidence: 0.80874044

 $00:46:55.240 \longrightarrow 00:46:58.224$ We are using the an app to help

NOTE Confidence: 0.80874044

 $00:46:58.224 \longrightarrow 00:47:00.470$ participants see their own CPAP

NOTE Confidence: 0.80874044

 $00:47:00.470 \longrightarrow 00:47:03.314$ compliance data and monitor their own

NOTE Confidence: 0.80874044

 $00:47:03.314 \longrightarrow 00:47:06.001$ progress and we also offer compliance

NOTE Confidence: 0.80874044

 $00:47:06.001 \longrightarrow 00:47:09.392$ incentives as part of this trial to

NOTE Confidence: 0.80874044

 $00:47:09.392 \longrightarrow 00:47:14.400$ help optimize C packing in our treatment arm.

NOTE Confidence: 0.80874044

 $00{:}47{:}14.400 \dashrightarrow 00{:}47{:}17.074$ The primary outcome as I mentioned earlier,

NOTE Confidence: 0.8243074

00:47:17.080 --> 00:47:19.000 is hypertensive disorders of pregnancy,

NOTE Confidence: 0.8243074

 $00{:}47{:}19.000 \dashrightarrow 00{:}47{:}21.292$ which is a composite of just

NOTE Confidence: 0.8243074

00:47:21.292 --> 00:47:22.444 stational hypertension, preeclampsia,

NOTE Confidence: 0.8243074

00:47:22.444 --> 00:47:23.980 superimposed pre clamp, Sia,

NOTE Confidence: 0.8243074

 $00:47:23.980 \longrightarrow 00:47:25.364$ HELLP syndrome, and eclampsia.

NOTE Confidence: 0.8243074

 $00:47:25.364 \longrightarrow 00:47:28.287$ But we are also very excited to look

NOTE Confidence: 0.8243074

 $00{:}47{:}28.287 \dashrightarrow 00{:}47{:}30.252$ at some crucial secondary outcomes

 $00{:}47{:}30.252 \dashrightarrow 00{:}47{:}32.020$ that include gestational diabetes,

NOTE Confidence: 0.8243074

 $00:47:32.020 \longrightarrow 00:47:34.628$ pre term birth and.

NOTE Confidence: 0.8243074

00:47:34.630 --> 00:47:36.706 The fetal fetal and neonatal outcomes,

NOTE Confidence: 0.8243074

 $00:47:36.710 \longrightarrow 00:47:39.790$ such as birth weight.

NOTE Confidence: 0.8243074

 $00:47:39.790 \longrightarrow 00:47:43.862$ I just put up here the local Contacts

NOTE Confidence: 0.8243074

 $00:47:43.862 \longrightarrow 00:47:47.492$ for the sleep trial at Yale as

NOTE Confidence: 0.8243074

 $00:47:47.492 \longrightarrow 00:47:51.120$ well as the main site at Brown.

NOTE Confidence: 0.8243074

 $00:47:51.120 \longrightarrow 00:47:54.515$ So if anyone is interested and learning

NOTE Confidence: 0.8243074

00:47:54.515 --> 00:47:57.300 more or getting more involved,

NOTE Confidence: 0.8243074

 $00:47:57.300 \longrightarrow 00:48:00.905$ locali referring a patient to be screened,

NOTE Confidence: 0.8243074

 $00:48:00.910 \longrightarrow 00:48:05.260$ we're happy to take your emails

NOTE Confidence: 0.8243074

 $00:48:05.260 \longrightarrow 00:48:07.435$ and get connected.

NOTE Confidence: 0.8243074

 $00{:}48{:}07.440 \dashrightarrow 00{:}48{:}09.421$ And then this is my last slide

NOTE Confidence: 0.8243074

 $00{:}48{:}09.421 \dashrightarrow 00{:}48{:}11.620$ and I thought I would just leave

NOTE Confidence: 0.8243074

 $00:48:11.620 \longrightarrow 00:48:13.546$ the last minute last 10 minutes

00:48:13.617 --> 00:48:15.507 for any questions or comments and

NOTE Confidence: 0.8243074

 $00{:}48{:}15.507 \dashrightarrow 00{:}48{:}17.703$ I was just very happy to have

NOTE Confidence: 0.8243074

00:48:17.703 --> 00:48:18.947 this opportunity to present.

NOTE Confidence: 0.8243074

 $00:48:18.950 \longrightarrow 00:48:20.500$ So thank you very much.

NOTE Confidence: 0.8197691

00:48:23.530 --> 00:48:25.336 Thank you so much Doctor Fackeln,

NOTE Confidence: 0.8197691

 $00:48:25.340 \longrightarrow 00:48:29.356$ that was really a great and relevant talk.

NOTE Confidence: 0.8197691

 $00:48:29.360 \longrightarrow 00:48:32.461$ Yeah, as you mentioned the MFM you

NOTE Confidence: 0.8197691

 $00:48:32.461 \longrightarrow 00:48:35.940$ study being at yell alot of us here on

NOTE Confidence: 0.8197691

 $00{:}48{:}35.940 \dashrightarrow 00{:}48{:}39.534$ the call I see part of the sleep center

NOTE Confidence: 0.8197691

 $00:48:39.534 \longrightarrow 00:48:42.845$ we actually do get the patients that I

NOTE Confidence: 0.8197691

 $00:48:42.845 \longrightarrow 00:48:45.610$ guess are excluded from this study which

NOTE Confidence: 0.8197691

00:48:45.681 --> 00:48:48.219 are the severe sleep apnea patients.

NOTE Confidence: 0.8197691

 $00:48:48.220 \longrightarrow 00:48:50.854$ An just speaking from my experience

NOTE Confidence: 0.8197691

00:48:50.854 --> 00:48:53.419 I definitely see severe sleep apnea

NOTE Confidence: 0.8197691

00:48:53.419 --> 00:48:56.424 an I get very very nervous, you know.

NOTE Confidence: 0.8197691

 $00:48:56.424 \longrightarrow 00:49:00.230$ And there's sort of this urgency to get them.

00:49:00.230 --> 00:49:02.370 You know, formally diagnosed and

NOTE Confidence: 0.8197691

00:49:02.370 --> 00:49:04.528 treated right away. Unfortunately just.

NOTE Confidence: 0.8197691

00:49:04.528 --> 00:49:08.000 You know are are just the way things

NOTE Confidence: 0.8197691

 $00:49:08.087 \longrightarrow 00:49:10.649$ work with insurance and all that.

NOTE Confidence: 0.8197691

 $00:49:10.650 \longrightarrow 00:49:12.214$ Often it is difficult.

NOTE Confidence: 0.8197691

00:49:12.214 --> 00:49:13.778 I wonder you know,

NOTE Confidence: 0.8197691

00:49:13.780 --> 00:49:16.932 as you had mentioned in all all your

NOTE Confidence: 0.8197691

 $00:49:16.932 \longrightarrow 00:49:19.659$ previous studies as well as other studies,

NOTE Confidence: 0.8197691

 $00:49:19.660 \longrightarrow 00:49:20.836$ the sleep apnea,

NOTE Confidence: 0.8197691

 $00:49:20.836 \longrightarrow 00:49:22.796$ the degree of sleep apnea.

NOTE Confidence: 0.8197691

 $00{:}49{:}22.800 \dashrightarrow 00{:}49{:}24.780$ Often seeing these young otherwise

NOTE Confidence: 0.8197691

 $00:49:24.780 \longrightarrow 00:49:27.110$ healthy pregnant women are pretty mild,

NOTE Confidence: 0.8197691

 $00:49:27.110 \longrightarrow 00:49:29.819$ but is your feeling that it this

NOTE Confidence: 0.8197691

 $00:49:29.819 \longrightarrow 00:49:33.148$ mild group are also the mild disease

NOTE Confidence: 0.8197691

 $00:49:33.148 \longrightarrow 00:49:35.753$ is very impactful during pregnancy.

 $00:49:35.760 \longrightarrow 00:49:36.318$ And when?

NOTE Confidence: 0.8197691

 $00{:}49{:}36.318 \dashrightarrow 00{:}49{:}38.550$ Or what data do we have to explore

NOTE Confidence: 0.8197691

00:49:38.615 --> 00:49:40.703 these other people who are presenting

NOTE Confidence: 0.8197691

 $00{:}49{:}40.703 \dashrightarrow 00{:}49{:}43.500$ to the clinic who are just very severe?

NOTE Confidence: 0.8197691

 $00:49:43.500 \longrightarrow 00:49:45.756$ They may not be the majority of the

NOTE Confidence: 0.8197691

00:49:45.756 --> 00:49:47.448 pregnant women, but they're pretty scary.

NOTE Confidence: 0.8514287

 $00:49:47.450 \longrightarrow 00:49:48.578$ I must say, yeah,

NOTE Confidence: 0.8514287

00:49:48.578 --> 00:49:50.834 I will say first of all, thanks for

NOTE Confidence: 0.8514287

 $00{:}49{:}50.834 \dashrightarrow 00{:}49{:}52.526$ the question about the mild disease.

NOTE Confidence: 0.8514287

00:49:52.530 --> 00:49:55.482 I mean, I'm always I always kind of

NOTE Confidence: 0.8514287

 $00:49:55.482 \longrightarrow 00:49:58.397$ going back to the new mom slide here.

NOTE Confidence: 0.8514287

 $00:49:58.400 \longrightarrow 00:49:59.920$ I'm always. You know?

NOTE Confidence: 0.8514287

 $00:49:59.920 \longrightarrow 00:50:03.106$ So impressed that you know the majority of

NOTE Confidence: 0.8514287

 $00:50:03.106 \longrightarrow 00:50:06.004$ these people had very mild sleep apnea,

NOTE Confidence: 0.8514287

00:50:06.010 --> 00:50:08.600 and Despite that it being very mild,

NOTE Confidence: 0.8514287

 $00:50:08.600 \longrightarrow 00:50:11.230$ the rates of their adverse

 $00:50:11.230 \longrightarrow 00:50:12.808$ outcomes compared to.

NOTE Confidence: 0.8514287

00:50:12.810 --> 00:50:14.580 To the non Seebacher group,

NOTE Confidence: 0.8514287

00:50:14.580 --> 00:50:16.340 even after adjustment for BMI

NOTE Confidence: 0.8514287

 $00:50:16.340 \longrightarrow 00:50:17.396$ and chronic hypertension,

NOTE Confidence: 0.8514287

 $00:50:17.400 \longrightarrow 00:50:19.030$ what significant here you can

NOTE Confidence: 0.8514287

 $00:50:19.030 \longrightarrow 00:50:21.106$ see odd ratios close to three

NOTE Confidence: 0.8514287

00:50:21.106 --> 00:50:22.630 for just stational hypertension

NOTE Confidence: 0.8514287

 $00:50:22.630 \longrightarrow 00:50:25.280$ and odds ratios close to two for

NOTE Confidence: 0.8514287

 $00{:}50{:}25.280 \to 00{:}50{:}26.970$ preeclampsia so mild disease seems

NOTE Confidence: 0.8514287

 $00:50:26.970 \longrightarrow 00:50:28.923$ to be really relevant in pregnancy.

NOTE Confidence: 0.8514287

 $00:50:28.923 \longrightarrow 00:50:30.478$ In terms of that question

NOTE Confidence: 0.8514287

 $00:50:30.478 \longrightarrow 00:50:32.229$ about the severe preeclamptic.

NOTE Confidence: 0.8514287

 $00{:}50{:}32.230 \dashrightarrow 00{:}50{:}34.694$ I mean, I think that's super interesting.

NOTE Confidence: 0.8514287

 $00:50:34.700 \longrightarrow 00:50:37.340$ They are very hard to gather into one

NOTE Confidence: 0.8514287

 $00:50:37.340 \longrightarrow 00:50:40.338$ cohort and study and look at their outcomes.

 $00:50:40.340 \longrightarrow 00:50:43.300$ I can only postulate that they probably have.

NOTE Confidence: 0.8514287

 $00:50:43.300 \longrightarrow 00:50:44.845$ Worse outcomes than women with

NOTE Confidence: 0.8514287

 $00{:}50{:}44.845 \dashrightarrow 00{:}50{:}47.039$ mild disease and is kind of more

NOTE Confidence: 0.8514287

 $00:50:47.039 \longrightarrow 00:50:48.809$ urgent to evaluate and treat them.

NOTE Confidence: 0.8514287

00:50:48.810 --> 00:50:50.730 That was the reason our group

NOTE Confidence: 0.8514287

 $00:50:50.730 \longrightarrow 00:50:52.788$ decided to exclude women with an age.

NOTE Confidence: 0.8514287

 $00:50:52.790 \longrightarrow 00:50:54.932$ I have greater than or equal to

NOTE Confidence: 0.8514287

 $00:50:54.932 \longrightarrow 00:50:55.850$ 30 from randomization.

NOTE Confidence: 0.8514287

 $00{:}50{:}55.850 \dashrightarrow 00{:}50{:}57.154$ But what was interesting,

NOTE Confidence: 0.8514287

00:50:57.154 --> 00:50:59.110 your comment that you made about

NOTE Confidence: 0.8514287

 $00{:}50{:}59.168 {\:{\mbox{--}}\!>}\ 00{:}51{:}01.135$ it's so hard to get women into

NOTE Confidence: 0.8514287

00:51:01.135 --> 00:51:02.879 treatment that's on the other hand,

NOTE Confidence: 0.8514287

 $00:51:02.880 \longrightarrow 00:51:04.950$ people were arguing we shouldn't exclude

NOTE Confidence: 0.8514287

 $00:51:04.950 \longrightarrow 00:51:06.822$ those women even though they only

NOTE Confidence: 0.8514287

 $00:51:06.822 \longrightarrow 00:51:08.850$ have a 50% chance of getting treatment,

NOTE Confidence: 0.8514287

 $00:51:08.850 \longrightarrow 00:51:10.575$ because getting treatment for them

00:51:10.575 --> 00:51:12.191 outside of pregnancy is really hard

NOTE Confidence: 0.8514287

 $00:51:12.191 \longrightarrow 00:51:14.570$ and 50% chance is better than 0.

NOTE Confidence: 0.8514287

 $00:51:14.570 \longrightarrow 00:51:16.676$ So was super interesting that we

NOTE Confidence: 0.8514287

00:51:16.676 --> 00:51:18.782 had kind of that, that discussion,

NOTE Confidence: 0.8514287

00:51:18.782 --> 00:51:20.537 and ultimately through the IRB,

NOTE Confidence: 0.8514287

00:51:20.540 --> 00:51:22.640 an R data safety monitoring Board.

NOTE Confidence: 0.8514287

 $00:51:22.640 \longrightarrow 00:51:24.400$ We made it an exclusion,

NOTE Confidence: 0.8514287

00:51:24.400 --> 00:51:26.008 but you're absolutely right,

NOTE Confidence: 0.8514287

 $00{:}51{:}26.008 \dashrightarrow 00{:}51{:}28.782$ some people were like get them in

NOTE Confidence: 0.8514287

 $00:51:28.782 \longrightarrow 00:51:31.126$ the study 'cause at least they get a

NOTE Confidence: 0.8514287

 $00{:}51{:}31.126 \dashrightarrow 00{:}51{:}33.075$ 50% chance of treatment and really

NOTE Confidence: 0.8514287

 $00:51:33.075 \longrightarrow 00:51:35.280$ intense follow up through your protocol,

NOTE Confidence: 0.8514287

 $00{:}51{:}35.280 \dashrightarrow 00{:}51{:}37.569$ but we you know we share that

NOTE Confidence: 0.8514287

 $00:51:37.569 \longrightarrow 00:51:39.435$ experience here of getting people

NOTE Confidence: 0.8514287

00:51:39.435 --> 00:51:41.883 into treatment and it centers like

 $00:51:41.883 \longrightarrow 00:51:44.068$ yours that really have helped.

NOTE Confidence: 0.8514287

00:51:44.070 --> 00:51:44.624 Our study,

NOTE Confidence: 0.8514287

00:51:44.624 --> 00:51:46.286 because it was crucial to develop

NOTE Confidence: 0.8514287

 $00:51:46.286 \longrightarrow 00:51:47.630$ collaborations with sleep specialist.

NOTE Confidence: 0.8514287

 $00:51:47.630 \longrightarrow 00:51:49.604$ So when we have a patient that

NOTE Confidence: 0.8514287

 $00{:}51{:}49.604 \dashrightarrow 00{:}51{:}51.455$ screens out for severe sleep apnea

NOTE Confidence: 0.8514287

 $00:51:51.455 \longrightarrow 00:51:53.646$ that they're not felt to be kind

NOTE Confidence: 0.8514287

 $00:51:53.709 \longrightarrow 00:51:55.059$ of lost in the system,

NOTE Confidence: 0.8514287

 $00:51:55.060 \longrightarrow 00:51:57.118$ then we were able to get them

NOTE Confidence: 0.8514287

 $00:51:57.118 \longrightarrow 00:51:58.620$ links if they want to.

NOTE Confidence: 0.8514287

00:51:58.620 --> 00:51:59.202 You know,

NOTE Confidence: 0.8514287

 $00:51:59.202 \longrightarrow 00:52:00.366$ to get clinical treatment

NOTE Confidence: 0.8514287

 $00:52:00.366 \longrightarrow 00:52:01.890$ for their severe sleep apnea.

NOTE Confidence: 0.8993784

 $00:52:03.970 \longrightarrow 00:52:05.170$ So I'd like

NOTE Confidence: 0.8993784

 $00:52:05.170 \longrightarrow 00:52:09.649$ to ask a question. This is Mary.

NOTE Confidence: 0.8347107

 $00:52:13.020 \longrightarrow 00:52:15.558$ There I think you're frozen pregnant.

 $00{:}52{:}15.560 \to 00{:}52{:}19.720$ Can you hear me? Yeah, I think you

NOTE Confidence: 0.8347107

 $00{:}52{:}19.720 \dashrightarrow 00{:}52{:}21.940$ might have to repeat your question.

NOTE Confidence: 0.8347107

00:52:21.940 --> 00:52:24.780 Yeah, over the years I've seen a very

NOTE Confidence: 0.8347107

 $00:52:24.780 \longrightarrow 00:52:27.489$ large number of pregnant women with very

NOTE Confidence: 0.8894163

 $00:52:27.490 \longrightarrow 00:52:30.560$ severe sleep apnea. And the

NOTE Confidence: 0.8726988

 $00:52:30.560 \longrightarrow 00:52:32.756$ main concern that I have isn't

NOTE Confidence: 0.8726988

00:52:32.760 --> 00:52:34.585 sort of their acute Physiology,

NOTE Confidence: 0.8726988

 $00:52:34.585 \longrightarrow 00:52:37.146$ it's can they take care of the

NOTE Confidence: 0.8726988

 $00:52:37.146 \longrightarrow 00:52:38.612$ baby when they're discharged.

NOTE Confidence: 0.8726988

00:52:38.612 --> 00:52:40.660 Finally having given birth.

NOTE Confidence: 0.8726988

00:52:40.660 --> 00:52:42.760 And, and that's really the big

NOTE Confidence: 0.8726988

 $00:52:42.760 \longrightarrow 00:52:44.604$ challenge is getting them on

NOTE Confidence: 0.8726988

00:52:44.604 --> 00:52:46.060 treatment because many women

NOTE Confidence: 0.8726988

 $00:52:46.060 \longrightarrow 00:52:48.220$ don't have anybody to help them

NOTE Confidence: 0.8726988

 $00:52:48.220 \longrightarrow 00:52:51.320$ when they get home with the baby.

 $00:52:51.320 \longrightarrow 00:52:54.290$ And so that is that is, to me,

NOTE Confidence: 0.8726988

 $00{:}52{:}54.290 \dashrightarrow 00{:}52{:}55.770$ an extremely important issue.

NOTE Confidence: 0.84362364

 $00:52:56.670 \longrightarrow 00:52:57.702$ I totally agree.

NOTE Confidence: 0.84362364

00:52:57.702 --> 00:52:59.950 I mean, I should also have put

NOTE Confidence: 0.84362364

00:52:59.950 --> 00:53:02.702 up a slide we know like I did

NOTE Confidence: 0.84362364

 $00{:}53{:}02.702 \dashrightarrow 00{:}53{:}04.557$ for sleep and mental health.

NOTE Confidence: 0.84362364

 $00:53:04.560 \longrightarrow 00:53:05.246$ It's postpartum.

NOTE Confidence: 0.84362364

00:53:05.246 --> 00:53:07.990 Sleep is a lecture in and of itself,

NOTE Confidence: 0.84362364

00:53:07.990 --> 00:53:09.700 like how women cope with

NOTE Confidence: 0.84362364

00:53:09.700 --> 00:53:10.726 postpartum sleep disturbances,

NOTE Confidence: 0.84362364

 $00:53:10.730 \longrightarrow 00:53:12.104$ including sleep apnea,

NOTE Confidence: 0.84362364

 $00:53:12.104 \longrightarrow 00:53:14.852$ and also new onset disturbances related

NOTE Confidence: 0.84362364

 $00:53:14.852 \longrightarrow 00:53:17.364$ to the postpartum state is super

NOTE Confidence: 0.84362364

 $00:53:17.364 \longrightarrow 00:53:20.189$ important and I think that you really.

NOTE Confidence: 0.84362364

 $00:53:20.190 \longrightarrow 00:53:22.406$ Birth and so glad you brought that up.

NOTE Confidence: 0.84362364

 $00:53:22.410 \longrightarrow 00:53:23.910$ I will tell you what we

 $00:53:23.910 \longrightarrow 00:53:25.470$ is nice about our studies.

NOTE Confidence: 0.84362364

 $00:53:25.470 \longrightarrow 00:53:26.874$ We let the women keep their

NOTE Confidence: 0.84362364

 $00:53:26.874 \longrightarrow 00:53:28.222$ C pap machines if they're

NOTE Confidence: 0.84362364

 $00:53:28.222 \longrightarrow 00:53:29.638$ randomized to sleep apnea.

NOTE Confidence: 0.84362364

00:53:29.640 --> 00:53:31.243 So all of our patients you have

NOTE Confidence: 0.84362364

 $00{:}53{:}31.243 \to 00{:}53{:}32.555$ sleep apnea in our randomized

NOTE Confidence: 0.84362364

 $00:53:32.555 \longrightarrow 00:53:34.571$ control trial get to continue to keep

NOTE Confidence: 0.84362364

 $00:53:34.571 \longrightarrow 00:53:36.308$ their machine and their equipment,

NOTE Confidence: 0.84362364

 $00{:}53{:}36.310 \dashrightarrow 00{:}53{:}37.732$ and obviously their urge to follow

NOTE Confidence: 0.84362364

 $00{:}53{:}37.732 \dashrightarrow 00{:}53{:}39.353$ up with a primary care doctor

NOTE Confidence: 0.84362364

 $00{:}53{:}39.353 \dashrightarrow 00{:}53{:}40.609$ or sleep specialist regarding

NOTE Confidence: 0.84362364

00:53:40.609 --> 00:53:41.865 ongoing need and treatment.

NOTE Confidence: 0.8243576

 $00:53:44.580 \longrightarrow 00:53:47.076$ We have a lot of questions in the

NOTE Confidence: 0.8243576

 $00{:}53{:}47.076 \dashrightarrow 00{:}53{:}49.745$ chat box and I'm glad you left some

NOTE Confidence: 0.8243576

 $00:53:49.745 \longrightarrow 00:53:51.708$ time for us here. Doctor tackle,

00:53:51.708 --> 00:53:53.976 but I'll try to get through them.

NOTE Confidence: 0.8243576

 $00{:}53{:}53.980 \to 00{:}53{:}55.344$ Doctor motioning is asking

NOTE Confidence: 0.8243576

 $00:53:55.344 \longrightarrow 00:53:56.708$ if there's any relationship

NOTE Confidence: 0.8243576

00:53:56.708 --> 00:53:58.188 between weight gain and water,

NOTE Confidence: 0.8243576

 $00:53:58.190 \longrightarrow 00:54:00.128$ water weight and sleep disordered breathing.

NOTE Confidence: 0.8243576

 $00:54:00.130 \longrightarrow 00:54:01.750$ That's that's part of those

NOTE Confidence: 0.8243576

00:54:01.750 --> 00:54:03.226 factors. So great question.

NOTE Confidence: 0.8243576

 $00:54:03.226 \longrightarrow 00:54:05.440$ And actually there I want to

NOTE Confidence: 0.8243576

 $00{:}54{:}05.508 {\:\dashrightarrow\:} 00{:}54{:}07.489$ refer you guys to a paper that

NOTE Confidence: 0.8243576

 $00:54:07.489 \longrightarrow 00:54:09.529$ was came out of Newmont to be.

NOTE Confidence: 0.8243576

 $00{:}54{:}09.530 \dashrightarrow 00{:}54{:}11.468$ They didn't have time to review,

NOTE Confidence: 0.8243576

 $00:54:11.470 \longrightarrow 00:54:12.766$ which looked at prediction

NOTE Confidence: 0.8243576

 $00:54:12.766 \longrightarrow 00:54:14.386$ and sleep apnea in pregnancy.

NOTE Confidence: 0.8243576

 $00:54:14.390 \longrightarrow 00:54:16.180$ The greatest.

NOTE Confidence: 0.8243576

 $00:54:16.180 \longrightarrow 00:54:17.970$ Predictors words.

NOTE Confidence: 0.8243576

 $00:54:17.970 \longrightarrow 00:54:19.538$ BMI and frequent snoring.

 $00:54:19.538 \longrightarrow 00:54:21.106$ They did specifically look

NOTE Confidence: 0.8243576

 $00:54:21.106 \longrightarrow 00:54:22.839$ at waking and pregnancy.

NOTE Confidence: 0.8243576

 $00:54:22.840 \longrightarrow 00:54:25.336$ They found that weight gain in

NOTE Confidence: 0.8243576

00:54:25.336 --> 00:54:27.000 pregnancy was associated with

NOTE Confidence: 0.8243576

 $00:54:27.070 \longrightarrow 00:54:29.146$ sleep apnea in the mid trimester

NOTE Confidence: 0.8243576

 $00:54:29.146 \longrightarrow 00:54:31.370$ that that visit 3 assessment.

NOTE Confidence: 0.8243576

 $00:54:31.370 \longrightarrow 00:54:33.656$ But when they looked at strong

NOTE Confidence: 0.8243576

 $00:54:33.656 \longrightarrow 00:54:35.685$ predictor it didn't really improve

NOTE Confidence: 0.8243576

 $00{:}54{:}35.685 \dashrightarrow 00{:}54{:}37.855$ the prediction model that much.

NOTE Confidence: 0.8243576

 $00:54:37.860 \longrightarrow 00:54:40.152$ So there is associations with excessive

NOTE Confidence: 0.8243576

00:54:40.152 --> 00:54:42.739 weight gain and an increased rate.

NOTE Confidence: 0.8243576

00:54:42.740 --> 00:54:43.572 But fundamentally,

NOTE Confidence: 0.8243576

 $00:54:43.572 \longrightarrow 00:54:45.652$ what really kind of differentiated

NOTE Confidence: 0.8243576

00:54:45.652 --> 00:54:47.200 risk was baseline BMI.

NOTE Confidence: 0.8243576

 $00:54:47.200 \longrightarrow 00:54:49.840$ I'm going into pregnancy.

 $00:54:49.840 \longrightarrow 00:54:51.898$ And that paper is the first

NOTE Confidence: 0.8243576

00:54:51.898 --> 00:54:53.270 author of that paper.

NOTE Confidence: 0.8243576

 $00:54:53.270 \longrightarrow 00:54:54.985$ Is Juliette Lewis and it's

NOTE Confidence: 0.8243576

 $00:54:54.985 \longrightarrow 00:54:56.357$ a really great paper.

NOTE Confidence: 0.8243576

 $00:54:56.360 \longrightarrow 00:54:58.280$ And it actually is links to

NOTE Confidence: 0.8243576

 $00:54:58.280 \longrightarrow 00:55:00.000$ an online risk Calculator for

NOTE Confidence: 0.8243576

 $00:55:00.000 \longrightarrow 00:55:01.500$ sleep apnea and presidency.

NOTE Confidence: 0.8747878

 $00:55:04.250 \longrightarrow 00:55:05.776$ We have a question about how many

NOTE Confidence: 0.8747878

 $00{:}55{:}05.776 {\:{\circ}{\circ}{\circ}}>00{:}55{:}07.280$ hours of sleep would you recommend

NOTE Confidence: 0.8747878

 $00:55:07.280 \longrightarrow 00:55:08.882$ for pregnant women at this point.

NOTE Confidence: 0.87208134

00:55:09.740 --> 00:55:11.804 I mean, I think that what we tell

NOTE Confidence: 0.87208134

00:55:11.804 --> 00:55:13.459 pregnant women at least clinically,

NOTE Confidence: 0.87208134

 $00:55:13.460 \longrightarrow 00:55:15.550$ you know what I do is that we should follow

NOTE Confidence: 0.87208134

 $00{:}55{:}15.605 \dashrightarrow 00{:}55{:}17.235$ general sleep health recommendations that

NOTE Confidence: 0.87208134

 $00:55:17.235 \longrightarrow 00:55:19.749$ are out like the National Sleep Foundation.

NOTE Confidence: 0.87208134

00:55:19.750 --> 00:55:22.009 Kind of recommending you know 7 to 9 hours

 $00:55:22.009 \longrightarrow 00:55:24.609$ of sleep in general for healthy adult sleep.

NOTE Confidence: 0.87208134

 $00:55:24.610 \dashrightarrow 00:55:27.110$ But we also do, you know, talk about that.

NOTE Confidence: 0.87208134

 $00:55:27.110 \longrightarrow 00:55:28.930$ Each individual has their own sleep need

NOTE Confidence: 0.87208134

 $00:55:28.977 \longrightarrow 00:55:30.617$ and there's certain some variations.

NOTE Confidence: 0.87208134

 $00:55:30.620 \longrightarrow 00:55:32.629$ Some people need a little less and

NOTE Confidence: 0.87208134

00:55:32.629 --> 00:55:34.340 some people need a little more,

NOTE Confidence: 0.87208134

 $00:55:34.340 \longrightarrow 00:55:36.556$ but generally I try to tell people to

NOTE Confidence: 0.87208134

 $00:55:36.556 \longrightarrow 00:55:38.909$ aim for kind of seven to nine hours,

NOTE Confidence: 0.87208134

 $00.55:38.910 \longrightarrow 00.55:40.054$ which is, I think,

NOTE Confidence: 0.87208134

 $00:55:40.054 \longrightarrow 00:55:41.484$ the general recommendation for adults.

NOTE Confidence: 0.8096609

 $00:55:44.560 \longrightarrow 00:55:45.808$ I think David has.

NOTE Confidence: 0.8096609

 $00:55:45.808 \longrightarrow 00:55:47.056$ It is very engaging.

NOTE Confidence: 0.8096609

 $00:55:47.060 \longrightarrow 00:55:48.926$ You're talking as numerous questions here,

NOTE Confidence: 0.8096609

 $00:55:48.930 \longrightarrow 00:55:50.796$ but I'm going to pick one.

NOTE Confidence: 0.8096609

00:55:50.800 --> 00:55:52.858 David, I'm sorry, maybe you can contact

 $00:55:52.858 \longrightarrow 00:55:54.859$ a perbacco faculty address these others,

NOTE Confidence: 0.8096609

 $00:55:54.860 \longrightarrow 00:55:56.420$ but you wanted to know,

NOTE Confidence: 0.8096609

 $00:55:56.420 \longrightarrow 00:55:58.240$ but I guess the trajectory of the

NOTE Confidence: 0.8096609

 $00:55:58.240 \longrightarrow 00:56:00.112$ sleep apnea is the difference between

NOTE Confidence: 0.8096609

 $00:56:00.112 \longrightarrow 00:56:02.188$ those who develop mild sleep apnea

NOTE Confidence: 0.8096609

00:56:02.188 --> 00:56:04.220 during pregnancy versus those who had

NOTE Confidence: 0.8096609

 $00:56:04.220 \longrightarrow 00:56:05.464$ it prior to pregnancy.

NOTE Confidence: 0.8096609

 $00.56:05.464 \longrightarrow 00.56:06.397$ So what's interesting,

NOTE Confidence: 0.8096609

 $00:56:06.400 \longrightarrow 00:56:09.208$ if I kind of look at this slide here,

NOTE Confidence: 0.8096609

 $00:56:09.210 \longrightarrow 00:56:11.052$ we looked at like early pregnancy

NOTE Confidence: 0.8096609

 $00:56:11.052 \longrightarrow 00:56:12.984$ and then mid pregnancy and obviously

NOTE Confidence: 0.8096609

 $00{:}56{:}12.984 \dashrightarrow 00{:}56{:}14.916$ in the mid pregnancy sleep apnea.

NOTE Confidence: 0.8096609

 $00:56:14.920 \longrightarrow 00:56:16.845$ These are a lot of women who

NOTE Confidence: 0.8096609

 $00:56:16.845 \longrightarrow 00:56:18.838$ had sleep apnea and continued to

NOTE Confidence: 0.8096609

00:56:18.838 --> 00:56:20.673 have it as pregnancy progress,

NOTE Confidence: 0.8096609

 $00:56:20.680 \longrightarrow 00:56:23.866$ but it also contained nuance set.

00:56:23.870 --> 00:56:25.620 Sleep apnea out participants in,

NOTE Confidence: 0.8096609

 $00{:}56{:}25.620 {\:{\circ}{\circ}{\circ}}>00{:}56{:}27.504$ you know, in our sample we

NOTE Confidence: 0.8096609

00:56:27.504 --> 00:56:29.508 weren't able to kind of really

NOTE Confidence: 0.8096609

 $00:56:29.508 \longrightarrow 00:56:31.548$ differentiate a lot the risk of

NOTE Confidence: 0.8096609

00:56:31.548 --> 00:56:33.638 new onset versus pre existing,

NOTE Confidence: 0.8096609

00:56:33.640 --> 00:56:36.424 but I will tell you kind of clinically.

NOTE Confidence: 0.8096609

 $00:56:36.430 \longrightarrow 00:56:38.173$ In another work I do think what

NOTE Confidence: 0.8096609

00:56:38.173 --> 00:56:39.915 is probably the most relevant

NOTE Confidence: 0.8096609

00:56:39.915 --> 00:56:41.783 pathophysiological from a pathophysiology

NOTE Confidence: 0.8096609

 $00{:}56{:}41.783 \dashrightarrow 00{:}56{:}43.651$ perspective is that preeclampsia

NOTE Confidence: 0.8096609

 $00{:}56{:}43.711 \dashrightarrow 00{:}56{:}45.301$ that is either preexists pregnancy

NOTE Confidence: 0.8096609

00:56:45.301 --> 00:56:47.600 and you go into pregnancy with it

NOTE Confidence: 0.8096609

 $00{:}56{:}47.600 \dashrightarrow 00{:}56{:}50.050$ or you develop it very early on.

NOTE Confidence: 0.8096609

 $00:56:50.050 \longrightarrow 00:56:52.633$ Between that 16 and 20 weeks with

NOTE Confidence: 0.8096609

00:56:52.633 --> 00:56:54.998 some weight gain and some of the.

 $00:56:55.000 \longrightarrow 00:56:56.588$ Physiologic changes of pregnancy

NOTE Confidence: 0.8096609

 $00:56:56.588 \longrightarrow 00:56:58.970$ so that early pregnancy period and

NOTE Confidence: 0.8096609

 $00:56:59.039 \longrightarrow 00:57:00.880$ that's why we chose in the MSM.

NOTE Confidence: 0.8096609

 $00:57:00.880 \longrightarrow 00:57:03.435$ You trial to kind of really focus

NOTE Confidence: 0.8096609

 $00:57:03.435 \longrightarrow 00:57:05.524$ on screening between 16 and 20

NOTE Confidence: 0.8096609

 $00:57:05.524 \longrightarrow 00:57:06.760$ weeks because of that,

NOTE Confidence: 0.8096609

 $00{:}57{:}06.760 {\:\dashrightarrow\:} 00{:}57{:}08.722$ that probably the the longer exposure

NOTE Confidence: 0.8096609

 $00:57:08.722 \longrightarrow 00:57:11.149$ to the sleep apnea and the exposure

NOTE Confidence: 0.8096609

 $00{:}57{:}11.149 \dashrightarrow 00{:}57{:}12.904$ earlier in pregnancy is probably

NOTE Confidence: 0.8096609

 $00:57:12.904 \longrightarrow 00:57:14.719$ leading to an increased risk.

NOTE Confidence: 0.8096609

 $00{:}57{:}14.720 \dashrightarrow 00{:}57{:}16.840$ But I do think it's like looking at

NOTE Confidence: 0.8096609

 $00:57:16.840 \longrightarrow 00:57:19.112$ the the shift stational diabetes data

NOTE Confidence: 0.8096609

 $00:57:19.112 \longrightarrow 00:57:21.626$ preeclampsia data that you can't argue

NOTE Confidence: 0.8096609

 $00:57:21.694 \longrightarrow 00:57:24.406$ that even developing it later is a relevant.

NOTE Confidence: 0.8096609

 $00:57:24.410 \longrightarrow 00:57:25.241$ So what I?

NOTE Confidence: 0.8096609

 $00{:}57{:}25.241 \dashrightarrow 00{:}57{:}26.626$ Typically tell people who ask

 $00:57:26.626 \longrightarrow 00:57:28.683$ about like clinically, what you do.

NOTE Confidence: 0.8096609

00:57:28.683 --> 00:57:28.964 Obviously,

NOTE Confidence: 0.8096609

 $00:57:28.964 \longrightarrow 00:57:30.088$ outside of a trial,

NOTE Confidence: 0.8096609

 $00:57:30.090 \longrightarrow 00:57:31.620$ like right now what we're trying

NOTE Confidence: 0.8096609

 $00:57:31.620 \longrightarrow 00:57:33.615$ to do is get all these women

NOTE Confidence: 0.8096609

00:57:33.615 --> 00:57:35.140 you know into these trials,

NOTE Confidence: 0.8096609

00:57:35.140 --> 00:57:37.107 but you know, outside of a trial,

NOTE Confidence: 0.8096609

 $00{:}57{:}37.110 \dashrightarrow 00{:}57{:}39.382$ I tell individuals if someone is coming to

NOTE Confidence: 0.8096609

 $00:57:39.382 \longrightarrow 00:57:41.609$ you pregnant with a lot of sleep complaints.

NOTE Confidence: 0.8096609

00:57:41.610 --> 00:57:43.591 I can't stay up during the day

NOTE Confidence: 0.8096609

 $00:57:43.591 \longrightarrow 00:57:45.260$ I'm falling asleep at the wheel.

NOTE Confidence: 0.8096609

00:57:45.260 --> 00:57:47.227 I can't take care of my kids.

NOTE Confidence: 0.8096609

 $00{:}57{:}47.230 --> 00{:}57{:}47.790$ 'cause I'm,

NOTE Confidence: 0.8096609

00:57:47.790 --> 00:57:48.630 you know, sleeping.

NOTE Confidence: 0.8096609

 $00:57:48.630 \longrightarrow 00:57:51.159$ My husband tells me it's more out of time.

00:57:51.160 --> 00:57:53.408 I like CEREC because of all of this.

NOTE Confidence: 0.8096609

 $00{:}57{:}53.410 \dashrightarrow 00{:}57{:}54.990$ Absolutely no matter when in

NOTE Confidence: 0.8096609

 $00:57:54.990 \longrightarrow 00:57:56.570$ pregnancy they present to you.

NOTE Confidence: 0.8096609

 $00:57:56.570 \longrightarrow 00:57:58.220$ It's important to refer them

NOTE Confidence: 0.8096609

 $00:57:58.220 \longrightarrow 00:57:59.540$ for evaluation and treatment.

NOTE Confidence: 0.8096609

00:57:59.540 --> 00:58:01.080 Do I think referring someone

NOTE Confidence: 0.8096609

 $00:58:01.080 \longrightarrow 00:58:03.394$ at 34 weeks is going to alter

NOTE Confidence: 0.8096609

 $00:58:03.394 \longrightarrow 00:58:05.149$ the course of their pregnancy?

NOTE Confidence: 0.8096609

00:58:05.150 --> 00:58:07.130 Well, I don't know for sure,

NOTE Confidence: 0.8096609

 $00:58:07.130 \longrightarrow 00:58:08.780$ and there's no definitive data,

NOTE Confidence: 0.8096609

 $00{:}58{:}08.780 \dashrightarrow 00{:}58{:}10.838$ but I'm not as excited as excited

NOTE Confidence: 0.8096609

 $00:58:10.838 \longrightarrow 00:58:13.238$ about that as like in terms of

NOTE Confidence: 0.8096609

00:58:13.238 --> 00:58:15.048 more screening and treatment early,

NOTE Confidence: 0.8096609

00:58:15.050 --> 00:58:17.300 but certainly from the point of

NOTE Confidence: 0.8096609

00:58:17.300 --> 00:58:19.256 view of helping pregnant women

NOTE Confidence: 0.8096609

 $00:58:19.256 \longrightarrow 00:58:20.808$ function and have good.

00:58:20.810 --> 00:58:22.270 Sleep quality and daytime functioning

NOTE Confidence: 0.8096609

 $00:58:22.270 \longrightarrow 00:58:24.190$ if they're coming for that complete.

NOTE Confidence: 0.8096609

 $00:58:24.190 \longrightarrow 00:58:25.414$ It doesn't matter what.

NOTE Confidence: 0.8096609

 $00:58:25.414 \longrightarrow 00:58:26.638$ Just stational age period.

NOTE Confidence: 0.8250044

 $00:58:28.510 \longrightarrow 00:58:30.410$ Great and just a couple.

NOTE Confidence: 0.8250044

 $00:58:30.410 \longrightarrow 00:58:32.545$ Maybe we can get in a couple

NOTE Confidence: 0.8250044

 $00:58:32.545 \longrightarrow 00:58:34.492$ of one or two questions

NOTE Confidence: 0.8250044

 $00:58:34.492 \longrightarrow 00:58:36.847$ other than BMI and snoring.

NOTE Confidence: 0.8250044

 $00:58:36.850 \longrightarrow 00:58:38.745$ Are there any other screen

NOTE Confidence: 0.8250044

 $00:58:38.745 \longrightarrow 00:58:40.640$ screening tools for pregnancy for

NOTE Confidence: 0.8250044

 $00{:}58{:}40.640 \dashrightarrow 00{:}58{:}42.758$ pregnant women and see this sort

NOTE Confidence: 0.8250044

 $00{:}58{:}42.758 \dashrightarrow 00{:}58{:}44.869$ of breathing so you know there's

NOTE Confidence: 0.8250044

00:58:44.869 --> 00:58:47.053 a lot of data about using kind

NOTE Confidence: 0.8250044

 $00:58:47.053 \longrightarrow 00:58:49.345$ of the Berlin question naire or

NOTE Confidence: 0.8250044

00:58:49.345 --> 00:58:51.249 the Stop Bang Questionnaire?

00:58:51.250 --> 00:58:53.150 You know, those are fine,

NOTE Confidence: 0.8250044

 $00:58:53.150 \longrightarrow 00:58:54.965$ but fundamentally they don't function

NOTE Confidence: 0.8250044

00:58:54.965 --> 00:58:57.310 much better than BMI and snoring,

NOTE Confidence: 0.8250044

 $00:58:57.310 \longrightarrow 00:58:58.862$ and that's what, basically.

NOTE Confidence: 0.8250044

00:58:58.862 --> 00:59:00.669 That paper, Juliette Lewis is

NOTE Confidence: 0.8250044

 $00:59:00.669 \longrightarrow 00:59:03.070$ paper kind of came to kind of.

NOTE Confidence: 0.78442335

 $00:59:05.080 \longrightarrow 00:59:08.960$ A conclusion that those were the two best.

NOTE Confidence: 0.78442335

 $00:59:08.960 \longrightarrow 00:59:11.284$ Tools what has been shown over and

NOTE Confidence: 0.78442335

 $00{:}59{:}11.284 \to 00{:}59{:}13.800$ over and over again at the every word

NOTE Confidence: 0.78442335

 $00:59:13.800 \longrightarrow 00:59:16.639$ is not a good tool for pregnant women.

NOTE Confidence: 0.78442335

00:59:16.640 --> 00:59:19.304 They are sleepy for way too many reasons,

NOTE Confidence: 0.78442335

00:59:19.310 --> 00:59:21.648 and the pregnancy in and of itself,

NOTE Confidence: 0.78442335

 $00:59:21.650 \longrightarrow 00:59:24.018$ and nausea and vomiting and all the other

NOTE Confidence: 0.78442335

 $00:59:24.018 \longrightarrow 00:59:26.131$ problems that are associated with that

NOTE Confidence: 0.78442335

 $00:59:26.131 \longrightarrow 00:59:28.327$ disrupt sleep or early daytime functioning.

NOTE Confidence: 0.78442335

 $00:59:28.330 \longrightarrow 00:59:29.416$ Increase those complaints.

 $00:59:29.416 \longrightarrow 00:59:32.315$ And by screening with the every work you're

NOTE Confidence: 0.78442335

 $00{:}59{:}32.315 \dashrightarrow 00{:}59{:}35.006$ not really defining a good code word to test,

NOTE Confidence: 0.78442335

 $00:59:35.010 \longrightarrow 00:59:38.072$ so I will tell you, I don't think that

NOTE Confidence: 0.78442335

 $00:59:38.072 \longrightarrow 00:59:40.160$ it's necessarily wrong to use the.

NOTE Confidence: 0.78442335

 $00{:}59{:}40.160 \dashrightarrow 00{:}59{:}42.190$ Or later they stopped stopping

NOTE Confidence: 0.78442335

 $00:59:42.190 \longrightarrow 00:59:45.260$ or the other kind of sleep apnea.

NOTE Confidence: 0.78442335

 $00:59:45.260 \longrightarrow 00:59:47.360$ Tools that have focused on BMI

NOTE Confidence: 0.78442335

 $00:59:47.360 \longrightarrow 00:59:49.180$ and snoring in their tool.

NOTE Confidence: 0.78442335

00:59:49.180 --> 00:59:51.700 But it turns out daytime sleepiness in

NOTE Confidence: 0.78442335

 $00:59:51.700 \longrightarrow 00:59:54.516$ and of itself is not a good predictor.

NOTE Confidence: 0.83930564

 $00:59:56.480 \longrightarrow 00:59:58.040$ We just have a comment from Doctor Rodriguez.

NOTE Confidence: 0.83930564

 $00:59:58.040 \longrightarrow 00:59:59.405$ I don't want to leave him out.

NOTE Confidence: 0.83930564

00:59:59.410 --> 01:00:00.610 He was just saying that.

NOTE Confidence: 0.83930564

 $01:00:00.610 \longrightarrow 01:00:02.850$ It would be interesting to follow the

NOTE Confidence: 0.83930564

01:00:02.850 --> 01:00:05.218 children of these pregnant women who had,

01:00:05.220 --> 01:00:07.044 I guess, untreated sleep apnea and

NOTE Confidence: 0.83930564

 $01:00:07.044 \longrightarrow 01:00:09.160$ see if there's a correlation of

NOTE Confidence: 0.839443885714286

 $01:00:09.160 \longrightarrow 01:00:10.780$ the city, yeah?

NOTE Confidence: 0.839443885714286

01:00:10.780 --> 01:00:12.940 That's not very interesting.

NOTE Confidence: 0.839443885714286

01:00:12.940 --> 01:00:14.700 And we actually do have,

NOTE Confidence: 0.839443885714286

01:00:14.700 --> 01:00:17.516 and I don't quite have the data already,

NOTE Confidence: 0.839443885714286

 $01:00:17.520 \longrightarrow 01:00:20.304$ but to stay to me actually followed all

NOTE Confidence: 0.839443885714286

 $01:00:20.304 \longrightarrow 01:00:23.495$ these new mom to be women who had untreated.

NOTE Confidence: 0.839443885714286

 $01:00:23.500 \longrightarrow 01:00:25.712$ You know, sleep is mild to moderate

NOTE Confidence: 0.839443885714286

01:00:25.712 --> 01:00:27.810 sleep apnea and pregnancy and follow

NOTE Confidence: 0.839443885714286

 $01{:}00{:}27.810 \dashrightarrow 01{:}00{:}30.330$ them up two to seven years postpartum

NOTE Confidence: 0.839443885714286

 $01:00:30.395 \longrightarrow 01:00:31.859$ for cardiovascular metabolic disease

NOTE Confidence: 0.839443885714286

 $01:00:31.859 \longrightarrow 01:00:34.412$ and we will be kind of eventually,

NOTE Confidence: 0.839443885714286

01:00:34.412 --> 01:00:35.820 hopefully soon publishing data

NOTE Confidence: 0.839443885714286

01:00:35.820 --> 01:00:37.580 regarding sleep apnea in pregnancy,

NOTE Confidence: 0.839443885714286

 $01\text{:}00\text{:}37.580 \dashrightarrow 01\text{:}00\text{:}39.340$ how it potentially persists or

01:00:39.340 --> 01:00:41.100 resolved in the postpartum period.

NOTE Confidence: 0.839443885714286

 $01:00:41.100 \longrightarrow 01:00:43.176$ Cruise is a subgroup of them

NOTE Confidence: 0.839443885714286

 $01:00:43.176 \longrightarrow 01:00:45.390$ agreed to be retested postpartum.

NOTE Confidence: 0.839443885714286

 $01:00:45.390 \longrightarrow 01:00:47.182$ At the two to seven year Mark

NOTE Confidence: 0.839443885714286

 $01:00:47.182 \longrightarrow 01:00:50.109$ and then how it how it relates to

NOTE Confidence: 0.839443885714286

 $01:00:50.109 \longrightarrow 01:00:51.366$ cardiovascular metabolic measures.

NOTE Confidence: 0.839443885714286

 $01:00:51.370 \longrightarrow 01:00:53.356$ Two to seven years after delivery.

NOTE Confidence: 0.7931389

01:00:55.690 --> 01:00:58.408 So I know a few people jumped off this.

NOTE Confidence: 0.7931389

 $01:00:58.410 \longrightarrow 01:01:01.480$ There's a follow up from.

NOTE Confidence: 0.7931389

 $01:01:01.480 \longrightarrow 01:01:02.191$ Follow up conference.

NOTE Confidence: 0.7931389

 $01:01:02.191 \longrightarrow 01:01:03.376$ Grand rounds after this book.

NOTE Confidence: 0.7931389

 $01:01:03.380 \longrightarrow 01:01:04.796$ For those who are still on,

NOTE Confidence: 0.7931389

01:01:04.800 --> 01:01:05.478 I don't know.

NOTE Confidence: 0.7931389

01:01:05.478 --> 01:01:06.834 Maybe you want to ask your

NOTE Confidence: 0.7931389

 $01:01:06.834 \longrightarrow 01:01:08.087$ question since you had a

 $01:01:08.087 \longrightarrow 01:01:09.059$ couple of questions there.

NOTE Confidence: 0.89830613

01:01:11.280 --> 01:01:14.080 I think you're muted.

NOTE Confidence: 0.89830613

 $01:01:14.080 \longrightarrow 01:01:16.098$ Yes, I am muted. Sorry it's

NOTE Confidence: 0.8259441

 $01:01:16.100 \longrightarrow 01:01:18.445$ just a really interesting topic to me

NOTE Confidence: 0.8259441

 $01:01:18.450 \longrightarrow 01:01:21.472$ and I was wondering so is there data on

NOTE Confidence: 0.8259441

 $01:01:21.472 \longrightarrow 01:01:23.485$ whether later pregnancies are more or

NOTE Confidence: 0.8259441

 $01:01:23.485 \longrightarrow 01:01:25.166$ less effective than earlier pregnancies?

NOTE Confidence: 0.8259441

01:01:25.166 --> 01:01:29.380 Like just a number of parity or gravity?

NOTE Confidence: 0.8259441

 $01:01:29.380 \longrightarrow 01:01:30.940$ Affect the results. So really

NOTE Confidence: 0.8218414

 $01:01:30.940 \longrightarrow 01:01:33.388$ interesting. And in fact in so this than

NOTE Confidence: 0.8218414

 $01{:}01{:}33.388 \to 01{:}01{:}36.239$ you Mom data is all on the liparus within.

NOTE Confidence: 0.8218414

 $01:01:36.240 \longrightarrow 01:01:38.440$ So first time moms and it was designed

NOTE Confidence: 0.8218414

 $01:01:38.440 \longrightarrow 01:01:40.889$ that way for a reason because you kind of

NOTE Confidence: 0.8218414

 $01:01:40.889 \longrightarrow 01:01:43.283$ remove a lot of confounding factors from

NOTE Confidence: 0.8218414

 $01:01:43.283 \longrightarrow 01:01:45.898$ prior pregnancies and risks related to that.

NOTE Confidence: 0.8218414

 $01:01:45.898 \longrightarrow 01:01:47.686$ But in our trial we're not

 $01{:}01{:}47.686 \dashrightarrow 01{:}01{:}49.659$ limiting it to first time moms.

NOTE Confidence: 0.8218414

 $01{:}01{:}49.660 \dashrightarrow 01{:}01{:}51.690$ We're doing first time moms and Paris

NOTE Confidence: 0.8218414

 $01:01:51.690 \longrightarrow 01:01:54.190$ women and we actually do find that Paris

NOTE Confidence: 0.8218414

 $01:01:54.190 \longrightarrow 01:01:56.520$ women have higher rates of sleep apnea.

NOTE Confidence: 0.8218414

 $01:01:56.520 \longrightarrow 01:01:59.643$ In our trial day screen at a higher rate.

NOTE Confidence: 0.8218414

 $01:01:59.650 \longrightarrow 01:02:01.220$ Probably also related to the

NOTE Confidence: 0.8218414

01:02:01.220 --> 01:02:02.476 fact that they're older,

NOTE Confidence: 0.8218414

 $01:02:02.480 \longrightarrow 01:02:04.984$ 'cause you know just we have more kids.

NOTE Confidence: 0.8218414

01:02:04.990 --> 01:02:05.953 You get older,

NOTE Confidence: 0.8218414

 $01:02:05.953 \longrightarrow 01:02:08.200$ so they're they're older and there they

NOTE Confidence: 0.8218414

 $01{:}02{:}08.261 \dashrightarrow 01{:}02{:}10.637$ tend to have higher BMI 'cause you know,

NOTE Confidence: 0.8218414

01:02:10.640 --> 01:02:10.954 unfortunately,

NOTE Confidence: 0.8218414

 $01:02:10.954 \longrightarrow 01:02:13.466$ that's what happens as we get older too,

NOTE Confidence: 0.8218414

 $01:02:13.470 \longrightarrow 01:02:15.348$ so they are at increased rates.

NOTE Confidence: 0.8218414

 $01:02:15.350 \longrightarrow 01:02:17.457$ So actually, I don't think this is

 $01:02:17.457 \longrightarrow 01:02:19.750$ just an issue with first time moms.

NOTE Confidence: 0.8218414

 $01{:}02{:}19.750 \dashrightarrow 01{:}02{:}21.878$ I think it's important also to screen other

NOTE Confidence: 0.8218414

 $01:02:21.878 \longrightarrow 01:02:24.140$ at risk women in subsequent pregnancies.

NOTE Confidence: 0.80920625

 $01:02:25.490 \longrightarrow 01:02:27.177$ That's really interesting Doctor Falco.

NOTE Confidence: 0.80920625

 $01:02:27.177 \longrightarrow 01:02:29.880$ So why do you use home sleep apnea

NOTE Confidence: 0.80920625

 $01:02:29.880 \longrightarrow 01:02:31.910$ testing that is dependent on flow

NOTE Confidence: 0.80920625

 $01:02:31.910 \longrightarrow 01:02:34.280$ 'cause we wish we have both systems.

NOTE Confidence: 0.80920625

 $01:02:34.280 \longrightarrow 01:02:36.301$ We use home sleep apnea testing

NOTE Confidence: 0.80920625

 $01:02:36.301 \longrightarrow 01:02:38.330$ that is dependent and then we

NOTE Confidence: 0.80920625

01:02:38.330 --> 01:02:39.682 use pulls arterial tonometry,

NOTE Confidence: 0.80920625

 $01:02:39.690 \longrightarrow 01:02:41.013$ especially in the younger

NOTE Confidence: 0.80920625

 $01:02:41.013 \longrightarrow 01:02:42.578$ populations that the path is

NOTE Confidence: 0.80920625

 $01:02:42.578 \dashrightarrow 01:02:45.089$ seems to be a lot more sensitive.

NOTE Confidence: 0.80920625

 $01:02:45.090 \longrightarrow 01:02:47.118$ You could already eyes that are

NOTE Confidence: 0.80920625

 $01:02:47.120 \longrightarrow 01:02:49.825$ much higher than the hi and so I

NOTE Confidence: 0.80920625

 $01:02:49.825 \longrightarrow 01:02:51.514$ would think that this particular

01:02:51.514 --> 01:02:53.538 population would be very amenable to

NOTE Confidence: 0.80920625

 $01{:}02{:}53.540 \dashrightarrow 01{:}02{:}55.911$ that type of testing like we might

NOTE Confidence: 0.80920625

 $01:02:55.911 \longrightarrow 01:02:57.596$ have some very interesting findings.

NOTE Confidence: 0.85887825

01:02:57.840 --> 01:03:00.006 I I think that's super interesting,

NOTE Confidence: 0.85887825

 $01:03:00.010 \longrightarrow 01:03:02.890$ and in fact when we designed the trial,

NOTE Confidence: 0.85887825

 $01:03:02.890 \longrightarrow 01:03:04.700$ we brought up two things.

NOTE Confidence: 0.85887825

 $01:03:04.700 \longrightarrow 01:03:07.949$ We brought up what device to use an watch.

NOTE Confidence: 0.85887825

 $01:03:07.950 \longrightarrow 01:03:10.554$ Pat came up, you know which uses

NOTE Confidence: 0.85887825

 $01{:}03{:}10.554 \dashrightarrow 01{:}03{:}12.653$ peripheral tear tanama tree and part

NOTE Confidence: 0.85887825

01:03:12.653 --> 01:03:14.781 of it was cost those systems in

NOTE Confidence: 0.85887825

 $01:03:14.854 \longrightarrow 01:03:17.206$ terms of research costs were much

NOTE Confidence: 0.85887825

 $01:03:17.206 \longrightarrow 01:03:19.500$ more prohibitive for the study.

NOTE Confidence: 0.85887825

 $01{:}03{:}19.500 \dashrightarrow 01{:}03{:}21.580$ The other concern was, you know,

NOTE Confidence: 0.85887825

 $01:03:21.580 \longrightarrow 01:03:23.820$ in gathering as much data as we

NOTE Confidence: 0.85887825

 $01:03:23.820 \longrightarrow 01:03:26.627$ could in terms of what the sleep

01:03:26.627 --> 01:03:28.235 apnea look like physiologically.

NOTE Confidence: 0.85887825

 $01:03:28.240 \longrightarrow 01:03:30.190$ From both the flow and a

NOTE Confidence: 0.85887825

01:03:30.190 --> 01:03:31.165 pulse oximetry perspective,

NOTE Confidence: 0.85887825

 $01:03:31.170 \longrightarrow 01:03:32.800$ it went back and forth.

NOTE Confidence: 0.85887825

 $01:03:32.800 \longrightarrow 01:03:35.698$ We also went back and forth in terms of

NOTE Confidence: 0.85887825

 $01:03:35.698 \longrightarrow 01:03:38.201$ should we use ody greater than or equal

NOTE Confidence: 0.85887825

 $01:03:38.201 \longrightarrow 01:03:41.278$ to five as inclusion in the trial or not,

NOTE Confidence: 0.85887825

 $01:03:41.280 \longrightarrow 01:03:43.856$ and whether or not that would be enough

NOTE Confidence: 0.85887825

 $01{:}03{:}43.856 \dashrightarrow 01{:}03{:}46.205$ because some women you know meet ody

NOTE Confidence: 0.85887825

 $01:03:46.205 \longrightarrow 01:03:48.779$ criteria but don't quite have the like flow.

NOTE Confidence: 0.85887825

01:03:48.780 --> 01:03:50.910 The flow events aren't quite enough

NOTE Confidence: 0.85887825

 $01:03:50.910 \longrightarrow 01:03:53.551$ to count in those and then so they

NOTE Confidence: 0.85887825

01:03:53.551 --> 01:03:55.949 screen out based on hi and you know,

NOTE Confidence: 0.85887825

01:03:55.950 --> 01:03:57.900 I don't think there's a right

NOTE Confidence: 0.85887825

 $01:03:57.900 \longrightarrow 01:03:58.875$ or wrong answer,

NOTE Confidence: 0.85887825

 $01:03:58.880 \longrightarrow 01:04:01.022$ and obviously for a trial you just

 $01:04:01.022 \longrightarrow 01:04:03.250$ have to make some decisions and.

NOTE Confidence: 0.85887825

 $01:04:03.250 \longrightarrow 01:04:05.200$ Kind of go with them,

NOTE Confidence: 0.85887825

01:04:05.200 --> 01:04:07.867 but I do think it's super interesting

NOTE Confidence: 0.85887825

 $01:04:07.867 \longrightarrow 01:04:10.646$ to think about kind of non flow

NOTE Confidence: 0.85887825

 $01:04:10.646 \longrightarrow 01:04:12.980$ related ways to measure sleep apnea,

NOTE Confidence: 0.85887825

 $01{:}04{:}12.980 \dashrightarrow 01{:}04{:}14.920$ including simpler cost, effective ways.

NOTE Confidence: 0.85887825

01:04:14.920 --> 01:04:16.472 Potentially even just with

NOTE Confidence: 0.85887825

01:04:16.472 --> 01:04:17.636 nocturnal pulse oximetry.

NOTE Confidence: 0.85887825

01:04:17.640 --> 01:04:20.448 And I know that there is some interest

NOTE Confidence: 0.85887825

 $01:04:20.448 \longrightarrow 01:04:23.479$ in we're using the Sleep Rating Center.

NOTE Confidence: 0.85887825

01:04:23.480 --> 01:04:26.049 Doctor Susan Redline is our is our

NOTE Confidence: 0.85887825

 $01:04:26.049 \longrightarrow 01:04:28.370$ coordinator of our H Set meetings

NOTE Confidence: 0.85887825

 $01{:}04{:}28.370 \dashrightarrow 01{:}04{:}30.275$ and she's constantly pushing us

NOTE Confidence: 0.85887825

 $01:04:30.275 \longrightarrow 01:04:32.429$ to think about these things.

NOTE Confidence: 0.85887825

01:04:32.430 --> 01:04:34.370 And you know, who knows?

 $01:04:34.370 \longrightarrow 01:04:35.046$ Maybe download.

NOTE Confidence: 0.85887825

 $01{:}04{:}35.046 \dashrightarrow 01{:}04{:}37.412$ Trying to get some modifications to our

NOTE Confidence: 0.85887825

01:04:37.412 --> 01:04:39.307 inclusion criteria to re evaluate that,

NOTE Confidence: 0.85887825

 $01:04:39.310 \longrightarrow 01:04:41.176$ but I totally agree with you

NOTE Confidence: 0.85887825

 $01:04:41.176 \longrightarrow 01:04:43.050$ and I think that it's in.

NOTE Confidence: 0.85887825

01:04:43.050 --> 01:04:45.000 It's important to think about those

NOTE Confidence: 0.85887825

 $01:04:45.000 \longrightarrow 01:04:47.229$ and also that pregnant women don't love

NOTE Confidence: 0.85887825

01:04:47.229 --> 01:04:49.266 going home with the you know nasal.

NOTE Confidence: 0.85887825

 $01{:}04{:}49.270 \dashrightarrow 01{:}04{:}49.538 \ {\rm Yeah},$

NOTE Confidence: 0.85887825

 $01:04:49.538 \longrightarrow 01:04:51.414$ monitor it it they do well when

NOTE Confidence: 0.85887825

 $01:04:51.414 \longrightarrow 01:04:52.999$ they are properly trained,

NOTE Confidence: 0.85887825

 $01:04:53.000 \longrightarrow 01:04:55.280$ but it's a huge area where it falls

NOTE Confidence: 0.85887825

 $01:04:55.280 \longrightarrow 01:04:57.626$ offen in the trial then they if they

NOTE Confidence: 0.85887825

 $01{:}04{:}57.626 \dashrightarrow 01{:}04{:}59.878$ don't get a good signal from the

NOTE Confidence: 0.85887825

 $01:04:59.878 \longrightarrow 01:05:03.036$ respiratory belts they have to like we do it.

NOTE Confidence: 0.85887825

 $01:05:03.036 \longrightarrow 01:05:05.507$ And so I agree be super interesting

 $01:05:05.507 \longrightarrow 01:05:07.519$ to explore that and in.

NOTE Confidence: 0.85887825

 $01{:}05{:}07.520 \dashrightarrow 01{:}05{:}08.920$ Large group of pregnant women.

NOTE Confidence: 0.8633835

 $01:05:10.730 \longrightarrow 01:05:12.458$ Great, thank you so much for

NOTE Confidence: 0.8633835

 $01:05:12.458 \longrightarrow 01:05:13.610$ this very excellent talk.

NOTE Confidence: 0.8633835

01:05:13.610 --> 01:05:15.878 I like I said few people had to peel

NOTE Confidence: 0.8633835

 $01:05:15.878 \longrightarrow 01:05:18.215$ off because of the the grand rounds.

NOTE Confidence: 0.8633835

01:05:18.220 --> 01:05:20.230 But thank you, we really appreciate it.

NOTE Confidence: 0.8633835

 $01{:}05{:}20.230 \dashrightarrow 01{:}05{:}21.940$ Really informative and we're happy as

NOTE Confidence: 0.8633835

 $01:05:21.940 \longrightarrow 01:05:24.389$ a as a institution to be part of your

NOTE Confidence: 0.8633835

 $01:05:24.389 \longrightarrow 01:05:26.280$ clinical trial with were eagerly waiting.

NOTE Confidence: 0.8633835

 $01:05:26.280 \longrightarrow 01:05:27.720$ The results of that alright?

NOTE Confidence: 0.8633835

 $01:05:27.720 \longrightarrow 01:05:29.160$ Well, thank you so much.

NOTE Confidence: 0.8633835

 $01{:}05{:}29.160 \dashrightarrow 01{:}05{:}30.600$ I really appreciate the opportunity.