WEBVTT

- NOTE duration:"00:50:51.4240000"
- NOTE language:en-us
- NOTE Confidence: 0.89239913

 $00:00:02.010 \longrightarrow 00:00:02.850$ OK, there we go.

NOTE Confidence: 0.8448843

00:00:29.240 --> 00:00:30.290 Alright everybody welcome.

NOTE Confidence: 0.8448843

 $00:00:30.290 \longrightarrow 00:00:32.040$ We're going to get started.

NOTE Confidence: 0.8448843

 $00{:}00{:}32.040 \dashrightarrow 00{:}00{:}34.315$ My name is Lauren Tobias and I'd

NOTE Confidence: 0.8448843

 $00{:}00{:}34.315 \dashrightarrow 00{:}00{:}36.847$ like to welcome you to our Yale

NOTE Confidence: 0.8448843

00:00:36.847 -> 00:00:38.335 Sleep Center this afternoon.

NOTE Confidence: 0.8448843

00:00:38.340 --> 00:00:40.090 I have a few quick

NOTE Confidence: 0.8448843

 $00:00:40.090 \dashrightarrow 00:00:41.490$ announcements before we begin.

NOTE Confidence: 0.8448843

 $00:00:41.490 \longrightarrow 00:00:43.422$ First, please take a moment to

NOTE Confidence: 0.8448843

 $00:00:43.422 \rightarrow 00:00:45.902$ ensure that you are muted in order

NOTE Confidence: 0.8448843

 $00:00:45.902 \dashrightarrow 00:00:48.140$ to receive CME credit for attendance,

NOTE Confidence: 0.8448843

00:00:48.140 --> 00:00:50.210 please see the chat room instructions

NOTE Confidence: 0.8448843

 $00:00:50.210 \dashrightarrow 00:00:53.090$ and you can text the unique ID for

NOTE Confidence: 0.8448843

00:00:53.090 - 00:00:55.238 this conference anytime until 3:15 PM.

- NOTE Confidence: 0.8448843
- 00:00:55.240 --> 00:00:57.112 Eastern Time, if you're not already

 $00:00:57.112 \longrightarrow 00:00:58.360$ registered with Chelsea meet.

NOTE Confidence: 0.8448843

 $00:00:58.360 \longrightarrow 00:01:00.537$ You will need to do that first.

NOTE Confidence: 0.8448843

 $00:01:00.540 \longrightarrow 00:01:02.100$ If you have any questions

NOTE Confidence: 0.8448843

 $00:01:02.100 \rightarrow 00:01:03.036$ during the presentation,

NOTE Confidence: 0.8448843

 $00{:}01{:}03.040 \dashrightarrow 00{:}01{:}05.376$ please feel free to make use of the

NOTE Confidence: 0.8448843

 $00{:}01{:}05{.}376 \dashrightarrow 00{:}01{:}07{.}748$ chat rooms throughout the hour or we

NOTE Confidence: 0.8448843

 $00:01:07.748 \rightarrow 00:01:10.107$ will invite people to unmute at the

NOTE Confidence: 0.8448843

 $00{:}01{:}10{.}107 \dashrightarrow 00{:}01{:}12{.}109$ end and you can ask your question

NOTE Confidence: 0.8448843

00:01:12.109 --> 00:01:14.422 then we do have recorded versions of

NOTE Confidence: 0.8448843

 $00:01:14.422 \dashrightarrow 00:01:16.504$ these talks that will be available

NOTE Confidence: 0.8448843

00:01:16.504 --> 00:01:18.821 online within two weeks and the link

NOTE Confidence: 0.8448843

 $00{:}01{:}18.821 \dashrightarrow 00{:}01{:}21.445$ to those is also provided in the chat.

NOTE Confidence: 0.8448843

 $00{:}01{:}21{.}450 \dashrightarrow 00{:}01{:}22{.}216$ And finally,

NOTE Confidence: 0.8448843

 $00:01:22.216 \rightarrow 00:01:24.514$ please feel free to share announcements

 $00:01:24.514 \rightarrow 00:01:26.949$ about our lecture series to anyone else

NOTE Confidence: 0.8448843

 $00{:}01{:}26{.}949 \dashrightarrow 00{:}01{:}29{.}300$ who you think might be interested.

NOTE Confidence: 0.8448843

00:01:29.300 --> 00:01:31.490 Or you can contact Debbie Lovejoy

NOTE Confidence: 0.8448843

 $00:01:31.490 \longrightarrow 00:01:34.169$ to be added to our email list.

NOTE Confidence: 0.8448843

 $00:01:34.170 \longrightarrow 00:01:36.408$ Now a final announcement for today.

NOTE Confidence: 0.8448843

00:01:36.410 --> 00:01:38.654 I just want to let every body

NOTE Confidence: 0.8448843

 $00:01:38.654 \rightarrow 00:01:40.150$ know that this Friday,

NOTE Confidence: 0.8448843

 $00:01:40.150 \longrightarrow 00:01:42.509$ April 30th is our 6th annual Sleep

NOTE Confidence: 0.8448843

 $00{:}01{:}42.509 \dashrightarrow 00{:}01{:}44.432$ and Symposium research slick sleep

NOTE Confidence: 0.8448843

 $00{:}01{:}44{.}432 \dashrightarrow 00{:}01{:}46{.}128$ and Symptom Research Symposium.

NOTE Confidence: 0.8448843

 $00:01:46.130 \dashrightarrow 00:01:48.706$ This is Co sponsored by the School NOTE Confidence: 0.8448843

00:01:48.706 --> 00:01:51.647 of Nursing in the School of Medicine.

NOTE Confidence: 0.8448843

 $00{:}01{:}51.650 \dashrightarrow 00{:}01{:}53.722$ And this is a free event that's

NOTE Confidence: 0.8448843

 $00:01:53.722 \longrightarrow 00:01:55.638$ open to everybody that will run

NOTE Confidence: 0.8448843

 $00:01:55.638 \longrightarrow 00:01:57.558$ from 10:00 o'clock in the morning

NOTE Confidence: 0.8448843

 $00:01:57.558 \longrightarrow 00:01:59.280$ until 2:00 in the afternoon,

- NOTE Confidence: 0.8448843
- $00{:}01{:}59{.}280 \dashrightarrow 00{:}02{:}01{.}422$ so please feel free to join us
- NOTE Confidence: 0.8448843
- $00:02:01.422 \longrightarrow 00:02:03.729$ for part or all of this event.
- NOTE Confidence: 0.8448843
- 00:02:03.730 --> 00:02:05.991 I'm going to put the link to
- NOTE Confidence: 0.8448843
- 00:02:05.991 --> 00:02:07.948 register for this in the chat
- NOTE Confidence: 0.8448843
- $00{:}02{:}07{.}948 \dashrightarrow 00{:}02{:}09{.}772$ and it just takes a moment.
- NOTE Confidence: 0.8448843
- $00:02:09.780 \longrightarrow 00:02:11.544$ So with that I'll turn this
- NOTE Confidence: 0.8448843
- $00:02:11.544 \longrightarrow 00:02:13.115$ microphone over to Andres in
- NOTE Confidence: 0.8448843
- $00{:}02{:}13.115 \dashrightarrow 00{:}02{:}14.780$ check who's going to introduce
- NOTE Confidence: 0.8448843
- 00:02:14.780 --> 00:02:16.450 Doctor Otukolo for today's talk.
- NOTE Confidence: 0.8401873
- 00:02:21.590 --> 00:02:22.727 Good afternoon everyone.
- NOTE Confidence: 0.8401873
- 00:02:22.727 --> 00:02:25.845 Thank you again for joining us and I
- NOTE Confidence: 0.8401873
- $00:02:25.845 \dashrightarrow 00:02:28.233$ have a distinct pleasure of introducing NOTE Confidence: 0.8401873
- $00:02:28.233 \dashrightarrow 00:02:30.499$ Doctor Adekola today for today's sleep NOTE Confidence: 0.8401873
- $00{:}02{:}30{.}499 \dashrightarrow 00{:}02{:}32{.}837$ grand rounds and I'm excited to do
- NOTE Confidence: 0.8401873
- $00:02:32.840 \dashrightarrow 00:02:35.087$ so because I have worked with Doctor NOTE Confidence: 0.8401873

 $00:02:35.087 \rightarrow 00:02:37.329$ Adekola and a couple of research

NOTE Confidence: 0.8401873

 $00:02:37.329 \rightarrow 00:02:39.753$ projects and he's been an outstanding

NOTE Confidence: 0.8401873

 $00{:}02{:}39.753 \dashrightarrow 00{:}02{:}42.218$ fellow this year and actually program.

NOTE Confidence: 0.8401873

00:02:42.220 --> 00:02:44.726 But he has received his medical degree

NOTE Confidence: 0.8401873

00:02:44.726 --> 00:02:47.092 at the Obafemi Awolowo College of

NOTE Confidence: 0.8401873

00:02:47.092 --> 00:02:49.480 Health Sciences in Nigeria before he

NOTE Confidence: 0.8401873

 $00:02:49.480 \dashrightarrow 00:02:52.940$ made the journey to the United States and.

NOTE Confidence: 0.8401873

 $00:02:52.940 \longrightarrow 00:02:54.710$ Long and short of it,

NOTE Confidence: 0.8401873

 $00{:}02{:}54{.}710 \dashrightarrow 00{:}02{:}56{.}740$ and he ended up becoming a resident

NOTE Confidence: 0.8401873

 $00{:}02{:}56{.}740 \dashrightarrow 00{:}02{:}58{.}746$ and intern at the University of

NOTE Confidence: 0.8401873

 $00{:}02{:}58.746 \dashrightarrow 00{:}03{:}00.526$ Connecticut and followed that with

NOTE Confidence: 0.8401873

 $00{:}03{:}00{.}526 \dashrightarrow 00{:}03{:}03{.}344$ being a chief resident at the Yale

NOTE Confidence: 0.8401873

00:03:03.344 --> 00:03:04.980 Waterbury Eternal Medicine program.

NOTE Confidence: 0.8401873

 $00{:}03{:}04{.}980 \dashrightarrow 00{:}03{:}06{.}745$ And after that he realized

NOTE Confidence: 0.8401873

 $00:03:06.745 \longrightarrow 00:03:07.804$ that clinical care,

NOTE Confidence: 0.8401873

 $00:03:07.810 \longrightarrow 00:03:08.540$ his passion,

- NOTE Confidence: 0.8401873
- $00:03:08.540 \rightarrow 00:03:11.095$ and so he ended up doing personal

 $00:03:11.095 \dashrightarrow 00:03:13.688$ care fellowships at the Beth Israel

NOTE Confidence: 0.8401873

00:03:13.688 --> 00:03:15.838 Medical Center in New Jersey.

NOTE Confidence: 0.8401873

 $00:03:15.840 \rightarrow 00:03:18.857$ Followed by joining us for Sleep Fellowship.

NOTE Confidence: 0.8401873

 $00:03:18.860 \longrightarrow 00:03:20.396$ Before he did that,

NOTE Confidence: 0.8401873

00:03:20.396 --> 00:03:22.700 he has had a prolific history

NOTE Confidence: 0.8401873

 $00{:}03{:}22{.}778 \dashrightarrow 00{:}03{:}25{.}128$ of presenting at the American

NOTE Confidence: 0.8401873

00:03:25.128 --> 00:03:27.478 Thoracic Society at the Chest,

NOTE Confidence: 0.8401873

 $00{:}03{:}27{.}480 \dashrightarrow 00{:}03{:}30{.}234$ College of Physicians and American Heart

NOTE Confidence: 0.8401873

 $00{:}03{:}30{.}234 \dashrightarrow 00{:}03{:}33{.}334$ Association and is also published in a

NOTE Confidence: 0.8401873

 $00:03:33.334 \rightarrow 00:03:36.099$ paper in journals like the Blue Journal.

NOTE Confidence: 0.8401873

00:03:36.100 --> 00:03:38.686 And so I'm excited to introduce

NOTE Confidence: 0.8401873

00:03:38.686 --> 00:03:40.410 him for today's talk,

NOTE Confidence: 0.8401873

 $00{:}03{:}40{.}410 \dashrightarrow 00{:}03{:}43{.}714$ and he's going to be focusing on the

NOTE Confidence: 0.8401873

 $00:03:43.714 \rightarrow 00:03:46.021$ overlap between sleep apnea, insomnia,

 $00:03:46.021 \rightarrow 00:03:48.226$ something that we see clinically.

NOTE Confidence: 0.8401873

 $00:03:48.230 \longrightarrow 00:03:48.776$ Quite frequently,

NOTE Confidence: 0.8401873

 $00{:}03{:}48.776 \dashrightarrow 00{:}03{:}50.687$ and so just as a little bit

NOTE Confidence: 0.8401873

 $00:03:50.687 \longrightarrow 00:03:51.990$ of an advertisement.

NOTE Confidence: 0.8401873

00:03:51.990 --> 00:03:52.558 In addition,

NOTE Confidence: 0.8401873

00:03:52.558 --> 00:03:53.978 today's stock Holder is going

NOTE Confidence: 0.8401873

 $00{:}03{:}53{.}978 \dashrightarrow 00{:}03{:}55{.}880$ to be giving a presentation at

NOTE Confidence: 0.8401873

 $00{:}03{:}55{.}880 \dashrightarrow 00{:}03{:}57{.}535$ the American Academy of Sleep

NOTE Confidence: 0.8401873

 $00{:}03{:}57{.}535 \dashrightarrow 00{:}03{:}58{.}869$ Medicine meeting this summer.

NOTE Confidence: 0.8401873

00:03:58.870 - 00:04:00.526 He's invited to give a research

NOTE Confidence: 0.8401873

 $00{:}04{:}00{.}526 \dashrightarrow 00{:}04{:}02{.}811$ talk and also will be giving a talk

NOTE Confidence: 0.8401873

 $00:04:02.811 \longrightarrow 00:04:04.497$ at the Sleep Research Symposium or

NOTE Confidence: 0.8401873

 $00:04:04.559 \rightarrow 00:04:06.779$ presenting a poster in Sleep Research

NOTE Confidence: 0.8401873

 $00:04:06.779 \dashrightarrow 00:04:08.259$ Symposium this coming Friday.

NOTE Confidence: 0.8401873

 $00{:}04{:}08.260 \dashrightarrow 00{:}04{:}10.764$ So please stay tuned and without further ado,

NOTE Confidence: 0.8401873

 $00:04:10.770 \longrightarrow 00:04:12.330$ olowe the mic is yours.

- NOTE Confidence: 0.8401873
- $00:04:12.330 \longrightarrow 00:04:13.578$ Let's take it away.
- NOTE Confidence: 0.91894644
- 00:04:15.040 00:04:20.190 Yeah, thank you for that very kind. Uh.
- NOTE Confidence: 0.78016394
- $00:04:22.910 \rightarrow 00:04:25.560$ Presentation are doctors in joke.
- NOTE Confidence: 0.78016394
- $00:04:25.560 \longrightarrow 00:04:28.210$ You know my talk today?
- NOTE Confidence: 0.78016394
- $00:04:28.210 \dashrightarrow 00:04:32.450$ Mr Gas to comorbid insomnia and sleep apnea.
- NOTE Confidence: 0.78016394
- $00{:}04{:}32{.}450 \dashrightarrow 00{:}04{:}35{.}670$ What I call comet for shorts and
- NOTE Confidence: 0.78016394
- $00:04:35.670 \longrightarrow 00:04:38.995$ the question is where are we
- NOTE Confidence: 0.78016394
- $00:04:38.995 \rightarrow 00:04:41.459$ with this clinical presentation?
- NOTE Confidence: 0.78016394
- $00{:}04{:}41{.}460 \dashrightarrow 00{:}04{:}44{.}981$ I decided to go with this topic
- NOTE Confidence: 0.78016394
- $00{:}04{:}44{.}981 \dashrightarrow 00{:}04{:}48{.}927$ just because it's so common and a
- NOTE Confidence: 0.78016394
- $00:04:48.927 \rightarrow 00:04:51.837$ large percentage of our population.
- NOTE Confidence: 0.78016394
- 00:04:51.840 --> 00:04:53.568 In our sleep clinic,
- NOTE Confidence: 0.78016394
- $00:04:53.568 \rightarrow 00:04:55.296$ either presents with sleep
- NOTE Confidence: 0.78016394
- $00{:}04{:}55{.}296 \dashrightarrow 00{:}04{:}57{.}629$ apnea or insomnia or bolts,
- NOTE Confidence: 0.78016394
- $00{:}04{:}57{.}630 \dashrightarrow 00{:}05{:}00{.}700$ so I hope at the end of the stock I
- NOTE Confidence: 0.78016394

 $00:05:00.789 \rightarrow 00:05:04.299$ would have shared something interesting.

NOTE Confidence: 0.8581892

00:05:08.700 --> 00:05:13.369 Alright, I have no conflicts of interest.

NOTE Confidence: 0.8581892

 $00:05:13.370 \longrightarrow 00:05:16.240$ And then if you wish to get

NOTE Confidence: 0.8581892

 $00:05:16.240 \longrightarrow 00:05:19.138$ to see me for this talk,

NOTE Confidence: 0.8581892

 $00{:}05{:}19{.}140 \dashrightarrow 00{:}05{:}23{.}404$ just text 21624 to the year CME accounts.

NOTE Confidence: 0.8581892

 $00{:}05{:}23.410 \dashrightarrow 00{:}05{:}27.900$ So I would first start up by giving a brief NOTE Confidence: 0.8581892

 $00:05:27.900 \dashrightarrow 00:05:32.630$ synopsis of a case I saw in the sleep clinic.

NOTE Confidence: 0.8581892

 $00:05:32.630 \longrightarrow 00:05:36.781$ Miss A is a 48 year old woman with

NOTE Confidence: 0.8581892

00:05:36.781 --> 00:05:40.008 a past medical history of class 3,

NOTE Confidence: 0.8581892

 $00:05:40.010 \dashrightarrow 00:05:41.854$ obesity, anxiety and depression.

NOTE Confidence: 0.8581892

 $00{:}05{:}41{.}854 \dashrightarrow 00{:}05{:}44{.}159$ She presented with sleep onset,

NOTE Confidence: 0.8581892

 $00{:}05{:}44{.}160 \dashrightarrow 00{:}05{:}46{.}000$ in somnia, and frequent awakenings.

NOTE Confidence: 0.8581892

00:05:46.000 --> 00:05:48.300 She also complained of snoring,

NOTE Confidence: 0.8581892

 $00{:}05{:}48{.}300 \dashrightarrow 00{:}05{:}50{.}144$ gasping and choking episodes.

NOTE Confidence: 0.8581892

 $00{:}05{:}50{.}144 \dashrightarrow 00{:}05{:}51{.}527$ I airport sleepiness,

NOTE Confidence: 0.8581892

 $00:05:51.530 \longrightarrow 00:05:53.310$ scale and was 12.

- NOTE Confidence: 0.8581892
- $00:05:53.310 \longrightarrow 00:05:55.980$ Insomnia severity index of 22 and

00:05:56.073 --> 00:05:58.477 modified FSQ functional outcome

NOTE Confidence: 0.8581892

 $00:05:58.477 \longrightarrow 00:06:01.482$ of sleep Questionnaire was 18.

NOTE Confidence: 0.8581892

 $00:06:01.490 \longrightarrow 00:06:04.616$ She wait again June 27 pounds.

NOTE Confidence: 0.8581892

 $00{:}06{:}04{.}620 \dashrightarrow 00{:}06{:}08{.}596$ A BMI of 51 and on visual oral

NOTE Confidence: 0.8581892

 $00{:}06{:}08.596 \dashrightarrow 00{:}06{:}11.910$ examination and she was a mall ampati

NOTE Confidence: 0.8581892

 $00:06:11.910 \longrightarrow 00:06:16.326$ 4 hi on subsequent sleep study was 12

NOTE Confidence: 0.8581892

 $00:06:16.326 \longrightarrow 00:06:19.805$ an hour with them in oxygenation of

NOTE Confidence: 0.8581892

 $00{:}06{:}19.805 \dashrightarrow 00{:}06{:}24.628$ 97% and an idea of 87% a sleep diary.

NOTE Confidence: 0.8581892

 $00:06:24.628 \rightarrow 00:06:26.892$ Also provided objective evidence

NOTE Confidence: 0.8581892

 $00:06:26.892 \longrightarrow 00:06:30.593$ of both sleep onset and sleep

NOTE Confidence: 0.8581892

 $00{:}06{:}30{.}593 \dashrightarrow 00{:}06{:}32{.}495$ and maintenance in somnia.

NOTE Confidence: 0.8581892

 $00{:}06{:}32{.}500 \dashrightarrow 00{:}06{:}34{.}668$ So, having said that,

NOTE Confidence: 0.8581892

 $00{:}06{:}34.668 \dashrightarrow 00{:}06{:}38.852$ this is a common presentation which a lot

NOTE Confidence: 0.8581892

 $00{:}06{:}38.852 \dashrightarrow 00{:}06{:}42.196$ of us can identify with in the clinic,

 $00:06:42.200 \longrightarrow 00:06:44.068$ and it brings forward.

NOTE Confidence: 0.8581892

 $00{:}06{:}44.068 \dashrightarrow 00{:}06{:}48.026$ The thoughts in terms of what are the

NOTE Confidence: 0.8581892

 $00:06:48.026 \rightarrow 00:06:51.206$ risk factors for patients who present

NOTE Confidence: 0.8581892

 $00:06:51.206 \rightarrow 00:06:54.610$ with comorbid insomnia and sleep apnea?

NOTE Confidence: 0.8581892

 $00{:}06{:}54{.}610 \dashrightarrow 00{:}06{:}57{.}195$ What impact will this patients

NOTE Confidence: 0.8581892

00:06:57.195 --> 00:06:59.780 in
somnia have on their obstructive

NOTE Confidence: 0.8581892

 $00:06:59.862 \rightarrow 00:07:02.007$ sleep apnea and vice versa?

NOTE Confidence: 0.8581892

 $00:07:02.010 \dashrightarrow 00:07:04.770$ And what's the optimal timing of

NOTE Confidence: 0.8581892

 $00{:}07{:}04.770 \dashrightarrow 00{:}07{:}07{.}241$ the treatment of this patients

NOTE Confidence: 0.8581892

00:07:07.241 --> 00:07:10.463 once we determine what the best

NOTE Confidence: 0.8581892

 $00{:}07{:}10.463 \dashrightarrow 00{:}07{:}12.849$ approach to treatments will be,

NOTE Confidence: 0.8581892

 $00:07:12.850 \rightarrow 00:07:16.180$ so my learning objectives for today.

NOTE Confidence: 0.8581892

 $00:07:16.180 \longrightarrow 00:07:19.100$ Is to dive into why?

NOTE Confidence: 0.8581892

 $00{:}07{:}19{.}100 \dashrightarrow 00{:}07{:}20{.}932$ Comorbid in somnia and obstructive

NOTE Confidence: 0.8581892

00:07:20.932 --> 00:07:22.764 sleep apnea is important,

NOTE Confidence: 0.8581892

 $00{:}07{:}22.770 \dashrightarrow 00{:}07{:}23.171$ and,

- NOTE Confidence: 0.8581892
- 00:07:23.171 --> 00:07:24.374 to you know,
- NOTE Confidence: 0.8581892
- $00{:}07{:}24.374 \dashrightarrow 00{:}07{:}26.780$ talk about the pathophysiology and the
- NOTE Confidence: 0.8581892
- $00{:}07{:}26.858 \dashrightarrow 00{:}07{:}29.403$ interplay of obstructive sleep apnea
- NOTE Confidence: 0.8581892
- $00{:}07{:}29{.}403 \dashrightarrow 00{:}07{:}31{.}948$ and insomnia in commissa patients.
- NOTE Confidence: 0.8581892
- $00{:}07{:}31{.}950 \dashrightarrow 00{:}07{:}34{.}752$ Review the different clinical faces of
- NOTE Confidence: 0.8581892
- $00{:}07{:}34.752 \dashrightarrow 00{:}07{:}37.807$ Camisa as well as address technical
- NOTE Confidence: 0.8581892
- $00{:}07{:}37.807 \dashrightarrow 00{:}07{:}40.557$ challenges in the management of
- NOTE Confidence: 0.8581892
- $00{:}07{:}40.557 \dashrightarrow 00{:}07{:}43.666$ this patient and I hope that at
- NOTE Confidence: 0.8581892
- $00{:}07{:}43.666 \dashrightarrow 00{:}07{:}46.291$ the end of the stock would have
- NOTE Confidence: 0.8581892
- $00:07:46.291 \longrightarrow 00:07:49.146$ covered all of this objectives.
- NOTE Confidence: 0.8581892
- $00{:}07{:}49{.}150 \dashrightarrow 00{:}07{:}52{.}966$ So insomnia in general is defined as a
- NOTE Confidence: 0.8581892
- 00:07:52.966 --> 00:07:55.750 persistent difficulty with sleep initiation,
- NOTE Confidence: 0.8581892
- $00:07:55.750 \longrightarrow 00:07:56.316$ duration,
- NOTE Confidence: 0.8581892
- $00:07:56.316 \longrightarrow 00:07:56.882$ consolidation,
- NOTE Confidence: 0.8581892
- $00{:}07{:}56.882 \dashrightarrow 00{:}08{:}00.278$ or quality that occurs despite adequate
- NOTE Confidence: 0.8581892

 $00:08:00.278 \rightarrow 00:08:02.353$ opportunity and circumstances for NOTE Confidence: 0.8581892 $00{:}08{:}02{.}353 \dashrightarrow 00{:}08{:}04{.}945$ sleep in and thereby resulting in NOTE Confidence: 0.8581892 $00:08:04.945 \longrightarrow 00:08:07.438$ some form of daytime impairment. NOTE Confidence: 0.8581892 $00:08:07.440 \longrightarrow 00:08:10.315$ Now they the main diagnostic NOTE Confidence: 0.8581892 $00{:}08{:}10.315 \dashrightarrow 00{:}08{:}14.564$ manuals in terms of the I see as NOTE Confidence: 0.8581892 $00:08:14.564 \rightarrow 00:08:18.155$ the three the DSM four or the ICD NOTE Confidence: 0.8581892 00:08:18.155 - 00:08:21.377 10 all vary in their approach. NOTE Confidence: 0.8581892 $00:08:21.380 \rightarrow 00:08:23.730$ With regards to defining insomnia NOTE Confidence: 0.8581892 $00{:}08{:}23.730 \dashrightarrow 00{:}08{:}26.080$ and based on this definition, NOTE Confidence: 0.8581892 $00:08:26.080 \rightarrow 00:08:29.608$ it gives us a range of prevalence NOTE Confidence: 0.8581892 00:08:29.608 --> 00:08:32.190 extending from 10 to 4% depending NOTE Confidence: 0.8581892 $00:08:32.190 \longrightarrow 00:08:34.540$ on how insomnia is defined, NOTE Confidence: 0.8581892 $00:08:34.540 \longrightarrow 00:08:36.890$ either as a symptom or NOTE Confidence: 0.8581892 00:08:36.890 --> 00:08:38.770 as a specific disorder. NOTE Confidence: 0.8581892 00:08:38.770 --> 00:08:43.378 Again, you can have different prevalences. NOTE Confidence: 0.8581892 $00:08:43.380 \longrightarrow 00:08:44.682$ Obstructive sleep order.

- NOTE Confidence: 0.8581892
- $00{:}08{:}44.682 \dashrightarrow 00{:}08{:}47.118$ A apnea, on the other hand,

 $00{:}08{:}47{.}118$ --> $00{:}08{:}49{.}470$ is a disorder characterized by upper

NOTE Confidence: 0.8581892

 $00:08:49.545 \rightarrow 00:08:52.467$ airway narrowing or closure during sleep,

NOTE Confidence: 0.8581892

 $00:08:52.470 \rightarrow 00:08:54.530$ while respiratory effort continues.

NOTE Confidence: 0.8581892

 $00{:}08{:}54{.}530 \dashrightarrow 00{:}08{:}57{.}105$ There is a high disease

NOTE Confidence: 0.8581892

00:08:57.105 - 00:08:59.400 body and as we as we know,

NOTE Confidence: 0.8581892

 $00:08:59.400 \rightarrow 00:09:01.495$ associated with have just having

NOTE Confidence: 0.8581892

 $00:09:01.495 \rightarrow 00:09:04.080$ obstructive sleep apnea alone or sleep

NOTE Confidence: 0.8581892

00:09:04.080 --> 00:09:06.630 apnea seven as an independent risk

NOTE Confidence: 0.8581892

00:09:06.630 --> 00:09:08.490 factor for cardiovascular disease,

NOTE Confidence: 0.8581892

00:09:08.490 --> 00:09:09.922 metabolic disease,

NOTE Confidence: 0.8581892

 $00{:}09{:}09{.}922 \dashrightarrow 00{:}09{:}12.070$ and psychiatric disorders.

NOTE Confidence: 0.8581892

00:09:12.070 --> 00:09:14.800 Doctor sleep apnea has a

NOTE Confidence: 0.8581892

 $00{:}09{:}14.800 \dashrightarrow 00{:}09{:}17.530$ prevalence of about 9 to

NOTE Confidence: 0.851447

 $00:09:17.644 \longrightarrow 00:09:21.990$ 38%, So what is? Call me Sir.

 $00:09:21.990 \rightarrow 00:09:25.658$ What is comorbid insomnia and sleep apnea? NOTE Confidence: 0.851447 $00:09:25.660 \dashrightarrow 00:09:29.685$ The first case of Camisa was actually NOTE Confidence: 0.851447 00:09:29.685 --> 00:09:32.779 destroyed by Glenn Law in 1973 NOTE Confidence: 0.851447 $00{:}09{:}32.779 \dashrightarrow 00{:}09{:}36.386$ when at that time you wrote a paper NOTE Confidence: 0.851447 $00:09:36.386 \rightarrow 00:09:40.264$ where it describes 2 middle age and NOTE Confidence: 0.851447 $00:09:40.264 \rightarrow 00:09:42.970$ patients who had protracted history NOTE Confidence: 0.851447 $00:09:42.970 \dashrightarrow 00:09:45.090$ of persistent night time arousals NOTE Confidence: 0.851447 $00:09:45.090 \rightarrow 00:09:47.140$ and difficulty maintaining sleep. NOTE Confidence: 0.851447 $00{:}09{:}47.140 \dashrightarrow 00{:}09{:}50.560$ Despite use of several are sedatives. NOTE Confidence: 0.851447 $00:09:50.560 \rightarrow 00:09:54.100$ It was an important finding at that time, NOTE Confidence: 0.851447 $00:09:54.100 \longrightarrow 00:09:56.767$ 'cause a lot of patients will put NOTE Confidence: 0.851447 $00:09:56.767 \rightarrow 00:09:58.814$ would present with chronic insomnia NOTE Confidence: 0.851447 $00:09:58.814 \rightarrow 00:10:01.691$ and would have used a sedatives and NOTE Confidence: 0.851447 $00:10:01.691 \rightarrow 00:10:05.303$ and we know the implications of using NOTE Confidence: 0.851447 00:10:05.303 --> 00:10:07.771 benzodiazepine's in obstructive sleep apnea. NOTE Confidence: 0.851447 $00:10:07.771 \longrightarrow 00:10:10.057$ So it concluded that an unknown

 $00:10:10.057 \rightarrow 00:10:12.161$ percentage of the larger number

NOTE Confidence: 0.851447

00:10:12.161 --> 00:10:14.376 of patients complaining of chronic

NOTE Confidence: 0.851447

00:10:14.376 --> 00:10:16.818 insomnia do have profound disorders

NOTE Confidence: 0.851447

 $00:10:16.818 \rightarrow 00:10:18.906$ of respiratory our control.

NOTE Confidence: 0.80921775

 $00:10:22.230 \rightarrow 00:10:26.150$ And then following this paper in 1973,

NOTE Confidence: 0.80921775

00:10:26.150 --> 00:10:30.198 there was a possibly a lack of research

NOTE Confidence: 0.80921775

 $00{:}10{:}30{.}198 \dashrightarrow 00{:}10{:}34{.}527$ studies up to about 1999 and then 2001

NOTE Confidence: 0.80921775

 $00{:}10{:}34{.}527 \dashrightarrow 00{:}10{:}37{.}394$ when Lichstein and Krakow published

NOTE Confidence: 0.80921775

 $00{:}10{:}37{.}394$ --> $00{:}10{:}41{.}713$ papers with regards to Camisa and their NOTE Confidence: 0.80921775

 $00{:}10{:}41.713 \dashrightarrow 00{:}10{:}45.625$ research at that time did bring attention NOTE Confidence: 0.80921775

 $00{:}10{:}45.625 \dashrightarrow 00{:}10{:}49.572$ to the presence of this conditions and

NOTE Confidence: 0.80921775

 $00{:}10{:}49{.}572 \dashrightarrow 00{:}10{:}53{.}653$ that served as a spring spring board.

NOTE Confidence: 0.80921775

 $00{:}10{:}53.660 \dashrightarrow 00{:}10{:}56.125$ For several order publications down

NOTE Confidence: 0.80921775

 $00{:}10{:}56{.}125 \dashrightarrow 00{:}10{:}59{.}879$ the line up to the present time.

NOTE Confidence: 0.80921775

 $00{:}10{:}59{.}880 \dashrightarrow 00{:}11{:}03{.}163$ But even then, in the large scope

00:11:03.163 --> 00:11:07.130 of data of large scheme of things,

NOTE Confidence: 0.80921775

00:11:07.130 --> 00:11:10.714 not a lot of work has been done

NOTE Confidence: 0.80921775

 $00{:}11{:}10.714 \dashrightarrow 00{:}11{:}13.858$ with regards to commiss a research.

NOTE Confidence: 0.80921775

00:11:13.860 --> 00:11:17.647 So having said that, let's talk about

NOTE Confidence: 0.80921775

 $00{:}11{:}17.647 \dashrightarrow 00{:}11{:}20.599$ what the prevalence of camisa ES,

NOTE Confidence: 0.80921775

00:11:20.600 --> 00:11:22.696 Crackle and his colleagues

NOTE Confidence: 0.80921775

 $00{:}11{:}22.696 \dashrightarrow 00{:}11{:}25.316$ looked at about 231 patients.

NOTE Confidence: 0.80921775

 $00{:}11{:}25{.}320 \dashrightarrow 00{:}11{:}28{.}140$ I'm with sleep disordered breathing and

NOTE Confidence: 0.80921775

 $00{:}11{:}28{.}140 \dashrightarrow 00{:}11{:}32{.}570$ they found out that half of the pop off

NOTE Confidence: 0.80921775

 $00{:}11{:}32{.}570 \dashrightarrow 00{:}11{:}35{.}040$ that population had clinically meaningful.

NOTE Confidence: 0.80921775

 $00{:}11{:}35{.}040 \dashrightarrow 00{:}11{:}37{.}470$ I'm insomnia, Smith and others.

NOTE Confidence: 0.80921775

00:11:37.470 --> 00:11:38.928 Also prospectively studied

NOTE Confidence: 0.80921775

00:11:38.928 --> 00:11:41.358 about 105 sleep apnea patients,

NOTE Confidence: 0.80921775

00:11:41.360 --> 00:11:44.270 of which about 29% met the

NOTE Confidence: 0.80921775

00:11:44.270 --> 00:11:45.725 criteria for insomnia.

NOTE Confidence: 0.80921775

 $00:11:45.730 \longrightarrow 00:11:49.125$ So overall, in the literature today,

- NOTE Confidence: 0.80921775
- $00:11:49.130 \longrightarrow 00:11:53.286$ it's about a 30 to 50% comorbidity of

00:11:53.286 --> 00:11:56.376 insomnia in obstructive sleep apnea.

NOTE Confidence: 0.80921775

 $00:11:56.380 \longrightarrow 00:11:59.400$ How about the risk factors?

NOTE Confidence: 0.80921775

 $00:11:59.400 \longrightarrow 00:12:00.390$ Zangon orders?

NOTE Confidence: 0.80921775

00:12:00.390 --> 00:12:03.855 Did a meta analysis on 37 studies

NOTE Confidence: 0.80921775

00:12:03.855 --> 00:12:07.020 of camisa patients and what they

NOTE Confidence: 0.80921775

 $00{:}12{:}07{.}020 \dashrightarrow 00{:}12{:}10{.}492$ found that was that the predominant

NOTE Confidence: 0.80921775

 $00:12:10.492 \rightarrow 00:12:13.684$ insomnia presentation was difficulty

NOTE Confidence: 0.80921775

 $00:12:13.684 \longrightarrow 00:12:16.876$ maintaining sleep at 42%.

NOTE Confidence: 0.80921775

 $00:12:16.880 \rightarrow 00:12:19.895$ There was also difficulty falling

NOTE Confidence: 0.80921775

 $00:12:19.895 \longrightarrow 00:12:23.513$ as leep at 18% and early morning

NOTE Confidence: 0.80921775

00:12:23.513 --> 00:12:26.408 awakening at 21% female patients.

NOTE Confidence: 0.80921775

 $00{:}12{:}26{.}408 \dashrightarrow 00{:}12{:}29{.}128$ Pasculli were more likely to

NOTE Confidence: 0.80921775

 $00{:}12{:}29{.}128 \dashrightarrow 00{:}12{:}31{.}415$ have difficulty falling a sleep

NOTE Confidence: 0.80921775

 $00:12:31.415 \rightarrow 00:12:33.687$ and early morning awakenings,

 $00{:}12{:}33{.}690 \dashrightarrow 00{:}12{:}36{.}726$ and there was a correlation between

NOTE Confidence: 0.80921775

 $00:12:36.726 \rightarrow 00:12:40.690$ having a higher BMI and having insomnia.

NOTE Confidence: 0.766668

 $00:12:43.740 \rightarrow 00:12:47.380$ How about the pathophysiology of cammisa?

NOTE Confidence: 0.766668

 $00{:}12{:}47{.}380 \dashrightarrow 00{:}12{:}49{.}812$ It's interesting because insomnia,

NOTE Confidence: 0.766668

 $00:12:49.812 \rightarrow 00:12:52.238$ perpetrates, obstructive sleep apnea,

NOTE Confidence: 0.766668

 $00:12:52.238 \longrightarrow 00:12:54.056$ and obstructive sleep

NOTE Confidence: 0.766668

 $00{:}12{:}54.056 \dashrightarrow 00{:}12{:}55.874$ apnea perpetrates insomnia,

NOTE Confidence: 0.766668

 $00:12:55.880 \rightarrow 00:13:02.120$ so it is just a a vicious cycle.

NOTE Confidence: 0.766668

00:13:02.120 --> 00:13:05.543 Sleep onset Eegs of patients with Camisa

NOTE Confidence: 0.766668

 $00:13:05.543 \rightarrow 00:13:08.540$ did show elevated cortical arousal,

NOTE Confidence: 0.766668

 $00:13:08.540 \longrightarrow 00:13:10.680$ especially during entry to

NOTE Confidence: 0.766668

 $00:13:10.680 \rightarrow 00:13:13.355$ sleep when compared to controls.

NOTE Confidence: 0.766668

 $00:13:13.360 \rightarrow 00:13:17.272$ Also, we do have studies shown that chronic

NOTE Confidence: 0.766668

 $00:13:17.272 \rightarrow 00:13:19.779$ insomniacs suffer from hyperarousal,

NOTE Confidence: 0.766668

 $00:13:19.780 \longrightarrow 00:13:23.518$ evidenced by increased 24 our metabolic rate.

NOTE Confidence: 0.766668

 $00:13:23.520 \rightarrow 00:13:26.275$ Basically, this state of Hyperarousal

- NOTE Confidence: 0.766668
- $00:13:26.275 \rightarrow 00:13:30.480$ keeps them in a lighter stage of sleep,

 $00:13:30.480 \longrightarrow 00:13:32.508$ which increases their vulnerability.

NOTE Confidence: 0.766668

 $00{:}13{:}32{.}508 \dashrightarrow 00{:}13{:}36{.}793$ To have Nick episodes also when they have

NOTE Confidence: 0.766668

 $00:13:36.793 \rightarrow 00:13:39.129$ ventilatory overshoots during arouse,

NOTE Confidence: 0.766668

00:13:39.130 --> 00:13:42.220 our customers increase our CO2 clearance,

NOTE Confidence: 0.766668

 $00{:}13{:}42.220 \dashrightarrow 00{:}13{:}45.601$ which leads to a decrease in upper

NOTE Confidence: 0.766668

 $00{:}13{:}45{.}601 \dashrightarrow 00{:}13{:}48{.}753$ airway muscle tone and increases the

NOTE Confidence: 0.766668

 $00:13:48.753 \rightarrow 00:13:52.512$ tendency for them to have applied episodes.

NOTE Confidence: 0.766668

 $00:13:52.520 \rightarrow 00:13:55.610$ How about the other way around?

NOTE Confidence: 0.766668

 $00:13:55.610 \rightarrow 00:13:57.155$ Obstructive sleep apnea?

NOTE Confidence: 0.766668

00:13:57.155 --> 00:13:58.700 Perpetrate in insomnia?

NOTE Confidence: 0.766668

 $00:13:58.700 \longrightarrow 00:14:02.354$ We do know that they can serve

NOTE Confidence: 0.766668

 $00{:}14{:}02{.}354 \dashrightarrow 00{:}14{:}03{.}920$ as a precipitant.

NOTE Confidence: 0.766668

00:14:03.920 --> 00:14:06.530 For both our difficulty initiating

NOTE Confidence: 0.766668

 $00:14:06.530 \rightarrow 00:14:09.140$ and difficulty maintaining and sleep,

 $00:14:09.140 \longrightarrow 00:14:13.308$ and the idea is that when there is

NOTE Confidence: 0.766668

00:14:13.308 --> 00:14:15.930 repeated struction of light sleep,

NOTE Confidence: 0.766668

 $00{:}14{:}15{.}930 \dashrightarrow 00{:}14{:}19{.}647$ it can subsequently lead to a perception

NOTE Confidence: 0.766668

 $00:14:19.647 \rightarrow 00:14:22.710$ of continued wakefulness for the patients.

NOTE Confidence: 0.766668

00:14:22.710 --> 00:14:23.214 Now,

NOTE Confidence: 0.766668

 $00{:}14{:}23{.}214 \dashrightarrow 00{:}14{:}26{.}238$ this perceived sleep onset of sleep

NOTE Confidence: 0.766668

00:14:26.238 --> 00:14:28.364 maintenance difficulty can subsequently

NOTE Confidence: 0.766668

00:14:28.364 --> 00:14:31.059 lead to sleep related anxiety,

NOTE Confidence: 0.766668

00:14:31.060 --> 00:14:33.304 thereby triggering the simplenet

NOTE Confidence: 0.766668

00:14:33.304 --> 00:14:34.987 sympathetic nervous system.

NOTE Confidence: 0.766668

 $00{:}14{:}34{.}990 \dashrightarrow 00{:}14{:}38{.}236$ As well as the hypothalamic pituitary

NOTE Confidence: 0.766668

00:14:38.236 --> 00:14:42.008 a drenal axis and which if this occurs

NOTE Confidence: 0.766668

00:14:42.008 --> 00:14:45.038 repeatedly overtime it becomes a cue

NOTE Confidence: 0.766668

00:14:45.038 --> 00:14:49.411 that then leads to conditioned insomnia

NOTE Confidence: 0.766668

 $00{:}14{:}49{.}411 \dashrightarrow 00{:}14{:}51{.}676$ or psychophysiological insomnia.

NOTE Confidence: 0.7632057

 $00:14:53.810 \rightarrow 00:14:57.512$ They thought mechanism I wanted to

 $00{:}14{:}57{.}512$ --> $00{:}15{:}01{.}679$ highlight was the mechanism of sleep depths.

NOTE Confidence: 0.7632057

00:15:01.680 --> 00:15:06.528 We do know that patients with camisa they

NOTE Confidence: 0.7632057

 $00{:}15{:}06{.}528 \dashrightarrow 00{:}15{:}10{.}713$ have excessive wake time and basically we

NOTE Confidence: 0.7632057

 $00{:}15{:}10.713 \dashrightarrow 00{:}15{:}14.989$ know that in patients with sleep apnea,

NOTE Confidence: 0.7632057

 $00{:}15{:}14.990 \dashrightarrow 00{:}15{:}18.015$ one of the pathophysiological Pheno

NOTE Confidence: 0.7632057

 $00{:}15{:}18.015 \dashrightarrow 00{:}15{:}21.040$ type is low arous al threshold.

NOTE Confidence: 0.7632057

00:15:21.040 - 00:15:24.760 However, we studies have shown that.

NOTE Confidence: 0.7632057

 $00{:}15{:}24.760 \dashrightarrow 00{:}15{:}27.100$ Arousal threshold varies across

NOTE Confidence: 0.7632057

 $00{:}15{:}27{.}100 \dashrightarrow 00{:}15{:}30{.}025$ patients with obstructive sleep apnea,

NOTE Confidence: 0.7632057

 $00{:}15{:}30{.}030 \dashrightarrow 00{:}15{:}34{.}041$ and we know that our results treshold

NOTE Confidence: 0.7632057

 $00:15:34.041 \dashrightarrow 00:15:37.069$ reflex the patients sleep debts.

NOTE Confidence: 0.7632057

 $00{:}15{:}37{.}070$ --> $00{:}15{:}41{.}342$ Now, Unisan colleagues came up with a good NOTE Confidence: 0.7632057

 $00{:}15{:}41{.}342 \dashrightarrow 00{:}15{:}46{.}048$ way to measure a patients and slipped EPS NOTE Confidence: 0.7632057

 $00{:}15{:}46.048$ --> $00{:}15{:}51.130$ by a concept called the odds ratio products, NOTE Confidence: 0.7632057

 $00{:}15{:}51{.}130 \dashrightarrow 00{:}15{:}55{.}344$ which you know basically is calculated from.

 $00:15:55.350 \rightarrow 00:15:59.165$ The EEG and it ranges from zero,

NOTE Confidence: 0.7632057

 $00{:}15{:}59{.}170 \dashrightarrow 00{:}16{:}02{.}440$ which means deep sleep to 2.5,

NOTE Confidence: 0.7632057

 $00{:}16{:}02{.}440 \dashrightarrow 00{:}16{:}05{.}275$ which means wakefulness and studies

NOTE Confidence: 0.7632057

00:16:05.275 --> 00:16:09.287 have shown that the sum of a rouser

NOTE Confidence: 0.7632057

00:16:09.287 --> 00:16:12.515 of arousals and during sleep there

NOTE Confidence: 0.7632057

 $00:16:12.515 \longrightarrow 00:16:15.517$ is ability index has a strong,

NOTE Confidence: 0.7632057

 $00{:}16{:}15{.}520 \dashrightarrow 00{:}16{:}17{.}700$ almost perfect correlation with

NOTE Confidence: 0.7632057

 $00:16:17.700 \longrightarrow 00:16:20.970$ the odds and wish your products.

NOTE Confidence: 0.7632057

 $00{:}16{:}20{.}970 \dashrightarrow 00{:}16{:}23{.}740$ Also, the odds ratio products

NOTE Confidence: 0.7632057

 $00:16:23.740 \longrightarrow 00:16:25.956$ correlates with the AHI.

NOTE Confidence: 0.7632057

 $00:16:25.960 \rightarrow 00:16:29.044$ So patients with obstructive sleep apnea

NOTE Confidence: 0.7632057

 $00{:}16{:}29.044 \dashrightarrow 00{:}16{:}32.428$ have a setting degree of sleep depth,

NOTE Confidence: 0.7632057

 $00{:}16{:}32{.}430 \dashrightarrow 00{:}16{:}36{.}414$ which we think is probably a traits cause.

NOTE Confidence: 0.7632057

 $00{:}16{:}36{.}420 \dashrightarrow 00{:}16{:}38{.}408$ Different patients with sleep

NOTE Confidence: 0.7632057

 $00{:}16{:}38{.}408 \dashrightarrow 00{:}16{:}40{.}893$ apnea have different sleep debts,

NOTE Confidence: 0.7632057

 $00:16:40.900 \rightarrow 00:16:44.932$ and even when we control for the patients

- NOTE Confidence: 0.7632057
- $00:16:44.932 \rightarrow 00:16:48.865$ age high by treating them with C Pap,

 $00:16:48.870 \longrightarrow 00:16:49.740$ you know,

NOTE Confidence: 0.7632057

 $00{:}16{:}49{.}740 \dashrightarrow 00{:}16{:}52{.}785$ see PAP would improve the patients hi

NOTE Confidence: 0.7632057

 $00:16:52.785 \rightarrow 00:16:56.389$ and improve the Arousal Awakening index.

NOTE Confidence: 0.7632057

 $00:16:56.390 \longrightarrow 00:16:58.928$ But really doesn't have any effects

NOTE Confidence: 0.7632057

 $00{:}16{:}58{.}928 \dashrightarrow 00{:}17{:}02{.}279$ on the odds and wish your products,

NOTE Confidence: 0.7632057

 $00{:}17{:}02.280 \dashrightarrow 00{:}17{:}04.092$ also confirming that patients

NOTE Confidence: 0.7632057

 $00:17:04.092 \rightarrow 00:17:06.357$ have this intrinsic slip depth,

NOTE Confidence: 0.7632057

 $00:17:06.360 \rightarrow 00:17:09.066$ which in turn determines how aroused,

NOTE Confidence: 0.7632057

 $00:17:09.070 \longrightarrow 00:17:11.524$ able and they have all their

NOTE Confidence: 0.7632057

 $00:17:11.524 \longrightarrow 00:17:14.755$ tendency to arouse when there is an

NOTE Confidence: 0.7632057

 $00{:}17{:}14.755 \dashrightarrow 00{:}17{:}16.775$ external or internal disturbance.

NOTE Confidence: 0.7632057

 $00{:}17{:}16.780 \dashrightarrow 00{:}17{:}19.576$ The odds ratio products nine year

NOTE Confidence: 0.7632057

 $00{:}17{:}19{.}576$ --> $00{:}17{:}22{.}659$ is just a better or a simple.

NOTE Confidence: 0.7632057

 $00{:}17{:}22.660 \dashrightarrow 00{:}17{:}25.444$ I would say simpler way to

- $00:17:25.444 \rightarrow 00:17:27.300$ measure the odds ratio.
- NOTE Confidence: 0.7632057
- $00{:}17{:}27{.}300 \dashrightarrow 00{:}17{:}28{.}788$ Products and it's,
- NOTE Confidence: 0.7632057
- 00:17:28.788 --> 00:17:29.780 you know,
- NOTE Confidence: 0.7632057
- $00{:}17{:}29.780 \dashrightarrow 00{:}17{:}32.145$ the measurements of the orchestration
- NOTE Confidence: 0.7632057
- 00:17:32.145 --> 00:17:35.720 products in the 1st 9 seconds after,
- NOTE Confidence: 0.7632057
- $00{:}17{:}35{.}720 \dashrightarrow 00{:}17{:}37{.}205$ and arous al events.
- NOTE Confidence: 0.7632057
- 00:17:37.205 --> 00:17:39.680 So putting all this together,
- NOTE Confidence: 0.7632057
- $00:17:39.680 \longrightarrow 00:17:42.896$ insomnia in itself will cause hyper
- NOTE Confidence: 0.7632057
- $00{:}17{:}42.896 \dashrightarrow 00{:}17{:}45.578$ arous ability and increase the propensity
- NOTE Confidence: 0.7632057
- $00:17:45.578 \longrightarrow 00:17:48.749$ of the patient of a patient with
- NOTE Confidence: 0.7632057
- $00{:}17{:}48.749 \dashrightarrow 00{:}17{:}52.613$ commissa to wake up on the other and
- NOTE Confidence: 0.7632057
- $00{:}17{:}52.613 \dashrightarrow 00{:}17{:}54.525$ obstructive sleep apnea increases
- NOTE Confidence: 0.7632057
- $00:17:54.530 \rightarrow 00:17:58.247$ apric episodes and in the presence of.
- NOTE Confidence: 0.7632057
- 00:17:58.250 --> 00:17:58.788 No,
- NOTE Confidence: 0.7632057
- $00{:}17{:}58.788 \dashrightarrow 00{:}18{:}00{.}940$ arous al threshold increases their
- NOTE Confidence: 0.7632057
- $00:18:00.940 \longrightarrow 00:18:03.092$ propensity to have excessive

- NOTE Confidence: 0.7632057
- $00:18:03.092 \rightarrow 00:18:05.458$ wait time through the night,

 $00{:}18{:}05{.}460 \dashrightarrow 00{:}18{:}08{.}352$ and when we combine that with

NOTE Confidence: 0.7632057

 $00:18:08.352 \longrightarrow 00:18:11.471$ an already low sleep depth as

NOTE Confidence: 0.7632057

 $00:18:11.471 \rightarrow 00:18:14.729$ measured by the odds ratio products,

NOTE Confidence: 0.7632057

 $00{:}18{:}14.730 \dashrightarrow 00{:}18{:}18.153$ all of that comes together to determine

NOTE Confidence: 0.7632057

 $00{:}18{:}18{.}153 \dashrightarrow 00{:}18{:}21{.}428$ the mechanism for excessive wait time.

NOTE Confidence: 0.7632057

 $00:18:21.430 \longrightarrow 00:18:25.278$ In Camisa there is still a lot of

NOTE Confidence: 0.7632057

 $00:18:25.278 \rightarrow 00:18:28.708$ variance that is still not explained.

NOTE Confidence: 0.7632057

00:18:28.710 --> 00:18:30.090 So you know,

NOTE Confidence: 0.7632057

 $00{:}18{:}30.090 \dashrightarrow 00{:}18{:}32.390$ we still need further research

NOTE Confidence: 0.7632057

 $00{:}18{:}32{.}390 \dashrightarrow 00{:}18{:}35{.}278$ for better understanding of this.

NOTE Confidence: 0.7632057

 $00{:}18{:}35{.}280 \dashrightarrow 00{:}18{:}38{.}226$ Patients haven't talked about the risk

NOTE Confidence: 0.7632057

 $00{:}18{:}38{.}226 \dashrightarrow 00{:}18{:}42{.}349$ factors as well as the mechanism of camisa.

NOTE Confidence: 0.7632057

00:18:42.350 --> 00:18:46.284 Let's delve a little bit into what

NOTE Confidence: 0.7632057

 $00:18:46.284 \rightarrow 00:18:48.486$ their clinical characteristics might

 $00:18:48.486 \dashrightarrow 00:18:51.440$ be Hans Dot C and his colleagues.

NOTE Confidence: 0.7632057

 $00{:}18{:}51{.}440 \dashrightarrow 00{:}18{:}53{.}960$ They examine the Icelandic sleep

NOTE Confidence: 0.7632057

00:18:53.960 --> 00:18:56.485 apnea co-ops, pretty large cohort,

NOTE Confidence: 0.7632057

00:18:56.485 --> 00:18:59.542 and basically they were, you know.

NOTE Confidence: 0.7632057

 $00{:}18{:}59{.}542 \dashrightarrow 00{:}19{:}02{.}122$ Looking for the prevalence of

NOTE Confidence: 0.7632057

00:19:02.122 --> 00:19:04.924 in
somnia symptoms in this patient

NOTE Confidence: 0.7632057

 $00:19:04.924 \longrightarrow 00:19:06.676$ sandwich sleep apnea.

NOTE Confidence: 0.7632057

00:19:06.680 --> 00:19:09.866 They had two groups of patients,

NOTE Confidence: 0.7632057

 $00{:}19{:}09{.}870 \dashrightarrow 00{:}19{:}12{.}530$ those untreated with sleep apnea.

NOTE Confidence: 0.7632057

 $00:19:12.530 \longrightarrow 00:19:14.942$ Sample size of 824,

NOTE Confidence: 0.7632057

 $00{:}19{:}14{.}942 \dashrightarrow 00{:}19{:}18{.}560$ and a control group of sample

NOTE Confidence: 0.8462328

 $00:19:18.691 \longrightarrow 00:19:22.810$ size of 760. At two they obtained a

NOTE Confidence: 0.8462328

 $00{:}19{:}22.810 \dashrightarrow 00{:}19{:}26.061$ symptoms or defined in somnia based on

NOTE Confidence: 0.8462328

 $00{:}19{:}26.061 \dashrightarrow 00{:}19{:}29.157$ the basic Nordic slip question here,

NOTE Confidence: 0.8462328

 $00:19:29.160 \rightarrow 00:19:32.870$ which basically looks at two major questions.

NOTE Confidence: 0.8462328

 $00{:}19{:}32{.}870 \dashrightarrow 00{:}19{:}35{.}540$ Have you had difficulties falling a sleep

 $00:19:35.540 \rightarrow 00:19:39.311$ in the past three months that basically

NOTE Confidence: 0.8462328

 $00:19:39.311 \rightarrow 00:19:41.855$ defines difficulty initiating sleep,

NOTE Confidence: 0.8462328

00:19:41.860 -> 00:19:45.192 or how often have you awakened at

NOTE Confidence: 0.8462328

 $00:19:45.192 \longrightarrow 00:19:48.521$ night and during the past three

NOTE Confidence: 0.8462328

00:19:48.521 --> 00:19:50.917 months to finding difficulty?

NOTE Confidence: 0.8462328

 $00{:}19{:}50{.}920 \dashrightarrow 00{:}19{:}53{.}995$ Maintaining sleep and this questions

NOTE Confidence: 0.8462328

00:19:53.995 --> 00:19:58.067 were rated on five points and if

NOTE Confidence: 0.8462328

 $00:19:58.067 \rightarrow 00:20:00.743$ you have four or more points,

NOTE Confidence: 0.8462328

 $00{:}20{:}00{.}750 \dashrightarrow 00{:}20{:}04{.}500$ you are defined as having insomnia

NOTE Confidence: 0.8462328

 $00:20:04.500 \longrightarrow 00:20:07.000$ in that respective category.

NOTE Confidence: 0.8462328

 $00:20:07.000 \rightarrow 00:20:10.030$ And of course they use excessive

NOTE Confidence: 0.8462328

 $00{:}20{:}10.030 \dashrightarrow 00{:}20{:}12.050$ sleep at the airport,

NOTE Confidence: 0.8462328

 $00{:}20{:}12.050 \dashrightarrow 00{:}20{:}14.070$ sleepiness and score to

NOTE Confidence: 0.8462328

 $00{:}20{:}14.070 \dashrightarrow 00{:}20{:}15.585$ determine excessive sleepiness.

NOTE Confidence: 0.8462328

 $00:20:15.590 \longrightarrow 00:20:18.920$ So basically what they found.

 $00:20:18.920 \longrightarrow 00:20:20.588$ What's that difficulty?

NOTE Confidence: 0.8462328

00:20:20.588 --> 00:20:23.924 Maintaining sleep just as observed earlier,

NOTE Confidence: 0.8462328

 $00:20:23.930 \longrightarrow 00:20:27.278$ and was the overall most common,

NOTE Confidence: 0.8462328

 $00:20:27.280 \longrightarrow 00:20:28.903$ presenting insomnia complaints

NOTE Confidence: 0.8462328

 $00{:}20{:}28{.}903 \dashrightarrow 00{:}20{:}31{.}608$ in sleep apnea patients when

NOTE Confidence: 0.8462328

 $00{:}20{:}31.608 \dashrightarrow 00{:}20{:}34.519$ compared to the general population,

NOTE Confidence: 0.8462328

 $00:20:34.520 \longrightarrow 00:20:37.598$ they also found that woman with

NOTE Confidence: 0.8462328

00:20:37.598 --> 00:20:39.650 obstructive sleep apnea who

NOTE Confidence: 0.8462328

 $00{:}20{:}39{.}742 \dashrightarrow 00{:}20{:}43{.}084$ tend to have both initiating and

NOTE Confidence: 0.8462328

00:20:43.084 --> 00:20:45.312 maintaining sleep in
somnia when

NOTE Confidence: 0.8462328

 $00{:}20{:}45{.}399 \dashrightarrow 00{:}20{:}48{.}897$ they present on patients who also

NOTE Confidence: 0.8462328

00:20:48.897 --> 00:20:51.229 had difficulty maintaining sleep,

NOTE Confidence: 0.8462328

 $00:20:51.230 \longrightarrow 00:20:52.556$ tend to have.

NOTE Confidence: 0.8462328

00:20:52.556 --> 00:20:56.508 A higher F was sleeping at a scale

NOTE Confidence: 0.8462328

 $00{:}20{:}56{.}508 \dashrightarrow 00{:}21{:}00{.}248$ compared to those who presented

NOTE Confidence: 0.8462328

 $00:21:00.248 \rightarrow 00:21:03.240$ with difficulty initiating sleep.

 $00:21:06.550 \longrightarrow 00:21:09.910$ So among the patients who had

NOTE Confidence: 0.81749433

 $00:21:09.910 \rightarrow 00:21:12.710$ obstructive sleep apnea and insomnia,

NOTE Confidence: 0.81749433

 $00{:}21{:}12{.}710$ --> $00{:}21{:}16{.}046$ female gender and smoking were independent

NOTE Confidence: 0.81749433

00:21:16.046 --> 00:21:19.374 risk factors for difficulty initiating sleep

NOTE Confidence: 0.81749433

00:21:19.374 --> 00:21:22.937 while age and RLS were independent risk

NOTE Confidence: 0.81749433

 $00{:}21{:}22{.}937 \dashrightarrow 00{:}21{:}26{.}150$ factors for difficulty maintaining sleep.

NOTE Confidence: 0.81749433

00:21:26.150 --> 00:21:30.486 So I realized his restless leg syndrome also

NOTE Confidence: 0.81749433

 $00{:}21{:}30{.}486 \dashrightarrow 00{:}21{:}34{.}620$ lower mental and physical qualities of life.

NOTE Confidence: 0.81749433

00:21:34.620 --> 00:21:37.986 We also see that with both difficult in the

NOTE Confidence: 0.81749433

 $00{:}21{:}37{.}986$ --> $00{:}21{:}40{.}855$ shading and difficulty maintaining sleep both

NOTE Confidence: 0.81749433

 $00{:}21{:}40.855 \dashrightarrow 00{:}21{:}44.230$ amongst the controls as well as patients,

NOTE Confidence: 0.81749433

 $00{:}21{:}44{.}230 \dashrightarrow 00{:}21{:}47{.}638$ we are sleep apnea.

NOTE Confidence: 0.81749433

 $00{:}21{:}47.640 \dashrightarrow 00{:}21{:}51.875$ So a study by Wallace and colleagues

NOTE Confidence: 0.81749433

00:21:51.875 --> 00:21:54.979 arm followed up with this.

NOTE Confidence: 0.81749433

 $00{:}21{:}54{.}980 \dashrightarrow 00{:}21{:}58{.}876$ An initial study an in Wallace study is

 $00{:}21{:}58.876$ --> $00{:}22{:}03.589$ aim was to identify sleep apnea patients

NOTE Confidence: 0.81749433

 $00{:}22{:}03.589 \dashrightarrow 00{:}22{:}07.219$ based on their insomnia presentation.

NOTE Confidence: 0.81749433

 $00{:}22{:}07{.}220 \dashrightarrow 00{:}22{:}11{.}357$ So he was to determine their their

NOTE Confidence: 0.81749433

 $00:22:11.357 \rightarrow 00:22:15.179$ category based on the ISI profiles,

NOTE Confidence: 0.81749433

 $00{:}22{:}15.180 \dashrightarrow 00{:}22{:}17.584$ Insomnia Severity Index profiles.

NOTE Confidence: 0.81749433

00:22:17.584 --> 00:22:21.809 And basically what it did was that

NOTE Confidence: 0.81749433

 $00{:}22{:}21.809 \dashrightarrow 00{:}22{:}25.477$ he also wanted to determine what the

NOTE Confidence: 0.81749433

 $00:22:25.477 \rightarrow 00:22:28.628$ predictors of these profiles where,

NOTE Confidence: 0.81749433

 $00:22:28.630 \longrightarrow 00:22:31.420$ and as we can see,

NOTE Confidence: 0.81749433

 $00:22:31.420 \rightarrow 00:22:34.870$ a large percentage of this patients

NOTE Confidence: 0.81749433

 $00{:}22{:}34{.}870 \dashrightarrow 00{:}22{:}38{.}678$ actually up to some the 774% of

NOTE Confidence: 0.81749433

 $00{:}22{:}38.678 \dashrightarrow 00{:}22{:}41.468$ this patients actually had insomnia.

NOTE Confidence: 0.81749433

 $00{:}22{:}41.470 \dashrightarrow 00{:}22{:}43.099$ The caveat, though,

NOTE Confidence: 0.81749433

 $00:22:43.099 \rightarrow 00:22:46.900$ is that this study was done among

NOTE Confidence: 0.81749433

 $00{:}22{:}47.009 \dashrightarrow 00{:}22{:}49.058$ VA veter an patients.

NOTE Confidence: 0.81749433

 $00:22:49.060 \rightarrow 00:22:53.028$ Who we know have a higher level of

- NOTE Confidence: 0.81749433
- $00:22:53.028 \rightarrow 00:22:56.108$ insomnia than the general population

 $00{:}22{:}56{.}108 \dashrightarrow 00{:}22{:}59{.}403$ which regards to predict us.

NOTE Confidence: 0.81749433

00:22:59.410 --> 00:23:02.860 He found out that mood disorder,

NOTE Confidence: 0.81749433

00:23:02.860 --> 00:23:04.010 chronic pain,

NOTE Confidence: 0.81749433

 $00{:}23{:}04.010 \dashrightarrow 00{:}23{:}06.885$ and PTSD were predictors for

NOTE Confidence: 0.81749433

00:23:06.885 --> 00:23:08.610 having severe insomnia,

NOTE Confidence: 0.81749433

 $00:23:08.610 \longrightarrow 00:23:12.614$ whereas age was more of a predictor

NOTE Confidence: 0.81749433

 $00:23:12.614 \longrightarrow 00:23:15.700$ for having less of insomnia

NOTE Confidence: 0.81749433

 $00:23:15.700 \longrightarrow 00:23:18.825$ and having more of daytime.

NOTE Confidence: 0.81749433

00:23:18.830 --> 00:23:21.932 Symptoms and actually a one year

NOTE Confidence: 0.81749433

 $00{:}23{:}21{.}932 \dashrightarrow 00{:}23{:}25{.}102$ age increment was associated with an

NOTE Confidence: 0.81749433

00:23:25.102 --> 00:23:27.683 approximately 4% lower likelihood of

NOTE Confidence: 0.81749433

 $00:23:27.683 \rightarrow 00:23:30.809$ belonging to the severe insomnia category.

NOTE Confidence: 0.7885802

 $00{:}23{:}34{.}910 \dashrightarrow 00{:}23{:}39{.}066$ So now that we know what the clinical

NOTE Confidence: 0.7885802

 $00:23:39.066 \rightarrow 00:23:41.789$ characteristics of this patients is,

 $00:23:41.790 \longrightarrow 00:23:43.826$ what I had consequences.

NOTE Confidence: 0.7885802

 $00{:}23{:}43.826 \dashrightarrow 00{:}23{:}46.880$ Why is camisa important and why

NOTE Confidence: 0.7885802

 $00{:}23{:}46{.}975 \dashrightarrow 00{:}23{:}50{.}245$ should we know about this condition?

NOTE Confidence: 0.7885802

00:23:50.250 --> 00:23:54.359 Well, the study by Cyrus Ranta and

NOTE Confidence: 0.7885802

 $00{:}23{:}54{.}359 \dashrightarrow 00{:}23{:}57{.}139$ colleagues really delved into that

NOTE Confidence: 0.7885802

00:23:57.139 --> 00:24:00.345 he was a cluster analysis and it

NOTE Confidence: 0.7885802

 $00{:}24{:}00{.}345 \dashrightarrow 00{:}24{:}03{.}587$ was a large quarts of patients.

NOTE Confidence: 0.7885802

 $00:24:03.590 \longrightarrow 00:24:05.835$ The patients were actually got

NOTE Confidence: 0.7885802

00:24:05.835 --> 00:24:08.621 in from the European sleep apnea

NOTE Confidence: 0.7885802

 $00{:}24{:}08{.}621 \dashrightarrow 00{:}24{:}11{.}363$ database and she looked at almost NOTE Confidence: 0.7885802

 $00:24:11.363 \rightarrow 00:24:13.730$ 7000 patients with obstructive sleep NOTE Confidence: 0.7885802

 $00:24:13.730 \longrightarrow 00:24:16.472$ apnea in this database and what

NOTE Confidence: 0.7885802

 $00:24:16.472 \longrightarrow 00:24:19.690$ you know she found out was she.

NOTE Confidence: 0.7885802

 $00{:}24{:}19.690 \dashrightarrow 00{:}24{:}22.450$ She came up with four categories,

NOTE Confidence: 0.7885802

 $00{:}24{:}22{.}450 \dashrightarrow 00{:}24{:}23{.}830$ those with insomnia,

NOTE Confidence: 0.7885802

 $00:24:23.830 \rightarrow 00:24:26.130$ those with excessive daytime sleepiness,

- NOTE Confidence: 0.7885802
- $00:24:26.130 \longrightarrow 00:24:28.430$ those with both insomnia and

00:24:28.430 --> 00:24:29.810 excessive daytime sleepiness,

NOTE Confidence: 0.7885802

 $00:24:29.810 \longrightarrow 00:24:33.914$ as well as those who had none of.

NOTE Confidence: 0.7885802

 $00{:}24{:}33{.}920 \dashrightarrow 00{:}24{:}37{.}539$ This symptoms and again as we can

NOTE Confidence: 0.7885802

 $00:24:37.539 \longrightarrow 00:24:41.280$ see a large population more than

NOTE Confidence: 0.7885802

 $00{:}24{:}41{.}280 \dashrightarrow 00{:}24{:}44{.}694$ 50% had some form of insomnia and

NOTE Confidence: 0.7885802

 $00{:}24{:}44{.}694 \dashrightarrow 00{:}24{:}47{.}996$ the other thing she found out was

NOTE Confidence: 0.7885802

 $00:24:47.996 \rightarrow 00:24:50.774$ there was a higher comma mobility

NOTE Confidence: 0.7885802

00:24:50.774 --> 00:24:52.913 of cardiovascular pulmonary

NOTE Confidence: 0.7885802

 $00:24:52.913 \rightarrow 00:24:56.065$ psychiatric disorders with respect

NOTE Confidence: 0.7885802

00:24:56.065 --> 00:24:59.217 to the insomnia category,

NOTE Confidence: 0.7885802

 $00:24:59.220 \rightarrow 00:25:04.467$ and they also had a trend towards lower CPK.

NOTE Confidence: 0.7885802

 $00{:}25{:}04{.}470 \dashrightarrow 00{:}25{:}06{.}218$ Usage which has been

NOTE Confidence: 0.7885802

 $00{:}25{:}06{.}218 \dashrightarrow 00{:}25{:}07{.}966$ improving in the literature.

NOTE Confidence: 0.810811640000001

 $00{:}25{:}12.010 \dashrightarrow 00{:}25{:}14.894$ So there are other studies that have

 $00:25:14.894 \rightarrow 00:25:17.654$ looked at the other possible consequences

NOTE Confidence: 0.810811640000001

 $00{:}25{:}17.654 \dashrightarrow 00{:}25{:}21.643$ and what we know is that there is

NOTE Confidence: 0.810811640000001

 $00:25:21.643 \rightarrow 00:25:24.961$ greater use of sedative and psychotropic

NOTE Confidence: 0.810811640000001

 $00:25:24.961 \rightarrow 00:25:27.107$ medications in commissa patients.

NOTE Confidence: 0.810811640000001

 $00:25:27.107 \rightarrow 00:25:30.029$ They do have greater daytime impairments.

NOTE Confidence: 0.810811640000001

 $00:25:30.030 \longrightarrow 00:25:32.544$ They have poorer physical and mental

NOTE Confidence: 0.810811640000001

 $00:25:32.544 \rightarrow 00:25:35.872$ quality of life an they have higher

NOTE Confidence: 0.810811640000001

 $00{:}25{:}35{.}872 \dashrightarrow 00{:}25{:}37{.}972$ likelihood of cerebrovascular disease

NOTE Confidence: 0.810811640000001

 $00{:}25{:}37{.}972 \dashrightarrow 00{:}25{:}41{.}229$ as observed by Gupta and colleagues.

NOTE Confidence: 0.79638267

 $00:25:43.640 \longrightarrow 00:25:45.684$ So having said that,

NOTE Confidence: 0.79638267

 $00{:}25{:}45{.}684 \dashrightarrow 00{:}25{:}49{.}452$ we can see that the healthcare burden

NOTE Confidence: 0.79638267

 $00:25:49.452 \rightarrow 00:25:53.058$ of camisa he is quite astronomical.

NOTE Confidence: 0.79638267

 $00:25:53.060 \longrightarrow 00:25:56.500$ Not only that, we can see that to

NOTE Confidence: 0.79638267

 $00{:}25{:}56{.}500 \dashrightarrow 00{:}25{:}59{.}673$ some extent as conditions we we

NOTE Confidence: 0.79638267

 $00{:}25{:}59{.}673 \dashrightarrow 00{:}26{:}02{.}443$ under diagnose patients with camisa

NOTE Confidence: 0.79638267

 $00:26:02.443 \longrightarrow 00:26:05.774$ as opposed to just obstructive

 $00:26:05.774 \rightarrow 00:26:09.119$ sleep apnea or standalone insomnia.

NOTE Confidence: 0.79638267

 $00{:}26{:}09{.}120 \dashrightarrow 00{:}26{:}13.075$ So let's talk about diagnosis and treatment.

NOTE Confidence: 0.79638267

 $00{:}26{:}13.080 \dashrightarrow 00{:}26{:}16.440$ What are the clinical challenges and that

NOTE Confidence: 0.79638267

 $00:26:16.440 \rightarrow 00:26:19.940$ we face taking care of those patients?

NOTE Confidence: 0.79638267

 $00:26:19.940 \longrightarrow 00:26:23.293$ So my finger here illustrates what the

NOTE Confidence: 0.79638267

 $00{:}26{:}23.293 \dashrightarrow 00{:}26{:}26.288$ conventional approach is and to the

NOTE Confidence: 0.79638267

00:26:26.288 --> 00:26:28.758 clinical management of commissa patients.

NOTE Confidence: 0.79638267

 $00:26:28.760 \rightarrow 00:26:32.029$ Usually they come to us without presenting

NOTE Confidence: 0.79638267

 $00{:}26{:}32.029 \dashrightarrow 00{:}26{:}35.128$ complaints or a reason for referral,

NOTE Confidence: 0.79638267

 $00{:}26{:}35{.}130 \dashrightarrow 00{:}26{:}38{.}070$ and that serves as a basis

NOTE Confidence: 0.79638267

00:26:38.070 --> 00:26:40.030 for a provisional diagnosis,

NOTE Confidence: 0.79638267

 $00{:}26{:}40{.}030 \dashrightarrow 00{:}26{:}43{.}537$ which then leads us to two parallel.

NOTE Confidence: 0.79638267

00:26:43.540 --> 00:26:45.508 Clinical pathways if we're

NOTE Confidence: 0.79638267

 $00{:}26{:}45.508 \dashrightarrow 00{:}26{:}47.476$ thinking more towards in somnia,

NOTE Confidence: 0.79638267

 $00:26:47.480 \longrightarrow 00:26:50.438$ would probably get a sleep diary,

 $00:26:50.440 \longrightarrow 00:26:52.180$ actigraphy some question yes,

NOTE Confidence: 0.79638267

 $00{:}26{:}52{.}180 \dashrightarrow 00{:}26{:}54{.}790$ and go down the Lane of

NOTE Confidence: 0.79638267

 $00:26:54.878 \longrightarrow 00:26:56.849$ treating their insomnia.

NOTE Confidence: 0.79638267

00:26:56.850 --> 00:26:59.808 With CBT, I or sometimes hypnotics,

NOTE Confidence: 0.79638267

 $00:26:59.810 \longrightarrow 00:27:02.270$ and on the other hand,

NOTE Confidence: 0.79638267

 $00{:}27{:}02{.}270 \dashrightarrow 00{:}27{:}04{.}735$ if we're thinking of more

NOTE Confidence: 0.79638267

 $00{:}27{:}04.735 \dashrightarrow 00{:}27{:}06.707$ of obstructive sleep apnea,

NOTE Confidence: 0.79638267

 $00:27:06.710 \longrightarrow 00:27:10.182$ we go down that route, assess them,

NOTE Confidence: 0.79638267

 $00{:}27{:}10.182 \dashrightarrow 00{:}27{:}13.689$ sat them on either CPAP the rapy oral.

NOTE Confidence: 0.79638267

00:27:13.690 --> 00:27:15.710 Appliance or power airway

NOTE Confidence: 0.79638267

 $00{:}27{:}15{.}710 \dashrightarrow 00{:}27{:}18{.}240$ stimulation and less likely surgery.

NOTE Confidence: 0.79638267

 $00:27:18.240 \longrightarrow 00:27:20.516$ That's usually the conventional

NOTE Confidence: 0.79638267

 $00{:}27{:}20.516 \dashrightarrow 00{:}27{:}23.930$ approach and the problem with

NOTE Confidence: 0.79638267

 $00{:}27{:}24.018 \dashrightarrow 00{:}27{:}26.818$ this approach is a lot of times,

NOTE Confidence: 0.79638267

 $00{:}27{:}26.820 \dashrightarrow 00{:}27{:}29.850$ like I alluded to earlier on,

NOTE Confidence: 0.79638267

 $00:27:29.850 \longrightarrow 00:27:31.758$ you know, commissa patients.

- NOTE Confidence: 0.79638267
- $00:27:31.758 \rightarrow 00:27:35.410$ They come combined with with the symptoms,

 $00{:}27{:}35{.}410 \dashrightarrow 00{:}27{:}40{.}460$ and if we focus on one more than the order,

NOTE Confidence: 0.79638267

 $00:27:40.460 \longrightarrow 00:27:44.596$ we may lose diagnosis of the order parameter.

NOTE Confidence: 0.79638267

 $00:27:44.600 \longrightarrow 00:27:46.304$ I'm while I'm going,

NOTE Confidence: 0.79638267

 $00:27:46.304 \longrightarrow 00:27:48.702$ you know, through the process.

NOTE Confidence: 0.79638267

 $00:27:48.702 \longrightarrow 00:27:50.758$ But having said that,

NOTE Confidence: 0.79638267

 $00:27:50.760 \longrightarrow 00:27:54.048$ I think you know one of the more

NOTE Confidence: 0.79638267

 $00{:}27{:}54.048 \dashrightarrow 00{:}27{:}56.432$ interesting things to us today is

NOTE Confidence: 0.79638267

 $00:27:56.432 \longrightarrow 00:27:58.652$ how do we manage this patients?

NOTE Confidence: 0.79638267

 $00:27:58.660 \rightarrow 00:28:01.030$ Is there an advantage of CBT?

NOTE Confidence: 0.79638267

00:28:01.030 --> 00:28:03.494 I I'm in addition to see Pap

NOTE Confidence: 0.79638267

 $00{:}28{:}03{.}494 \dashrightarrow 00{:}28{:}05{.}968$ in in commissa patients and if

NOTE Confidence: 0.79638267

 $00{:}28{:}05{.}968 \dashrightarrow 00{:}28{:}07{.}744$ there is an advantage,

NOTE Confidence: 0.79638267

 $00{:}28{:}07{.}750 \dashrightarrow 00{:}28{:}10{.}156$ what would be the best signing

NOTE Confidence: 0.79638267

 $00:28:10.156 \rightarrow 00:28:12.880$ for CDT I should we have CBT?

00:28:12.880 --> 00:28:15.855 I proud to see Pap or concurrently

NOTE Confidence: 0.79638267

 $00:28:15.855 \rightarrow 00:28:19.206$ with CPAP or is there any role for.

NOTE Confidence: 0.79638267

 $00:28:19.210 \longrightarrow 00:28:21.880$ Hypnotics we see perhaps in the

NOTE Confidence: 0.79638267

 $00:28:21.880 \rightarrow 00:28:23.660$ treatment of commissa patients.

NOTE Confidence: 0.79638267

 $00:28:23.660 \longrightarrow 00:28:25.890$ So to answer those questions,

NOTE Confidence: 0.79638267

 $00:28:25.890 \longrightarrow 00:28:29.886$ I would go back as far back as 2004.

NOTE Confidence: 0.79638267

00:28:29.890 --> 00:28:32.200 Crack how Anne and colleagues

NOTE Confidence: 0.79638267

 $00:28:32.200 \rightarrow 00:28:35.680$ and he was the first to look at.

NOTE Confidence: 0.79638267

 $00{:}28{:}35{.}680 \dashrightarrow 00{:}28{:}36{.}123$ It.

NOTE Confidence: 0.79638267

 $00:28:36.123 \rightarrow 00:28:38.781$ Looked at 17 patients with chronic

NOTE Confidence: 0.79638267

 $00:28:38.781 \longrightarrow 00:28:41.020$ insomnia and he placed it.

NOTE Confidence: 0.79638267

00:28:41.020 --> 00:28:43.196 Did a prospective observational

NOTE Confidence: 0.79638267

 $00{:}28{:}43.196 \dashrightarrow 00{:}28{:}46.875$ study place this patients on CBT I

NOTE Confidence: 0.79638267

 $00{:}28{:}46.875 \dashrightarrow 00{:}28{:}49.515$ and after four weeks of CBT I he.

NOTE Confidence: 0.79638267

 $00:28:49.520 \longrightarrow 00:28:51.970$ Dan sent them for a sleep study

NOTE Confidence: 0.79638267

 $00:28:51.970 \longrightarrow 00:28:54.383$ and have them evaluated for

- NOTE Confidence: 0.79638267
- 00:28:54.383 --> 00:28:56.300 sleep disordered breathing,

 $00{:}28{:}56{.}300 \dashrightarrow 00{:}28{:}59{.}222$ and patients who had sleep disordered

NOTE Confidence: 0.79638267

 $00{:}28{:}59{.}222 \dashrightarrow 00{:}29{:}01{.}617$ breathing were then placed on

NOTE Confidence: 0.79638267

00:29:01.617 --> 00:29:03.982 some form of therapy, either CPAP,

NOTE Confidence: 0.79638267

 $00:29:03.982 \longrightarrow 00:29:06.237$ an oral appliance or surgery.

NOTE Confidence: 0.79638267

 $00{:}29{:}06{.}240 \dashrightarrow 00{:}29{:}08{.}670$ H is outcome measures where changes

NOTE Confidence: 0.79638267

 $00{:}29{:}08.670 \dashrightarrow 00{:}29{:}11.976$ in the severity of insomnia and the

NOTE Confidence: 0.79638267

00:29:11.976 --> 00:29:14.769 quality of sleep as measured by the

NOTE Confidence: 0.79638267

 $00{:}29{:}14.769$ --> $00{:}29{:}17.524$ highest I and the functional outcome NOTE Confidence: 0.79638267

 $00:29:17.524 \rightarrow 00:29:20.290$ of sleep questionnaire or the PSQI.

NOTE Confidence: 0.79638267

 $00{:}29{:}20{.}290 \dashrightarrow 00{:}29{:}23{.}720$ And you wanted to also know how

NOTE Confidence: 0.79638267

 $00{:}29{:}23.720 \dashrightarrow 00{:}29{:}27.478$ they did with regards to CPAP use.

NOTE Confidence: 0.79638267

 $00{:}29{:}27{.}480 \dashrightarrow 00{:}29{:}30{.}837$ And as we can see in this graph of

NOTE Confidence: 0.79638267

00:29:30.837 --> 00:29:33.885 amine insomnia severity index against

NOTE Confidence: 0.79638267

 $00{:}29{:}33.885 \dashrightarrow 00{:}29{:}38.220$ time when this patients initially got CBT,

00:29:38.220 - > 00:29:41.148 I there was a pretty significant

NOTE Confidence: 0.79638267

00:29:41.148 --> 00:29:43.100 drop in their insomnia

NOTE Confidence: 0.76736057

00:29:43.195 --> 00:29:46.190 and severity. And then when they NOTE Confidence: 0.76736057

00:29:46.190 --> 00:29:48.490 were followed with treatment for

NOTE Confidence: 0.76736057

 $00:29:48.490 \rightarrow 00:29:51.219$ their sleep disordered breathing.

NOTE Confidence: 0.76736057

 $00{:}29{:}51{.}220$ --> $00{:}29{:}54{.}937$ There was a further decrease in their NOTE Confidence: 0.76736057

00:29:54.937 -> 00:29:57.934 insomnia symptom just to give the

NOTE Confidence: 0.76736057

 $00:29:57.934 \rightarrow 00:30:01.190$ specific numbers for the 7% of the

NOTE Confidence: 0.76736057

 $00:30:01.190 \dashrightarrow 00:30:04.370$ patients did show a clinical improvement

NOTE Confidence: 0.76736057

 $00{:}30{:}04{.}370 \dashrightarrow 00{:}30{:}08{.}476$ in the first phase after CBT I but

NOTE Confidence: 0.76736057

 $00{:}30{:}08{.}476 \dashrightarrow 00{:}30{:}11{.}519$ after the second phase we had 88%

NOTE Confidence: 0.76736057

 $00{:}30{:}11{.}520 \dashrightarrow 00{:}30{:}13{.}990$ improvement in their insomnia symptom.

NOTE Confidence: 0.76736057

 $00{:}30{:}13.990 \dashrightarrow 00{:}30{:}18.445$ I mean we can argue that it's a small.

NOTE Confidence: 0.76736057

 $00:30:18.450 \longrightarrow 00:30:20.794$ It's a small study.

NOTE Confidence: 0.76736057

 $00:30:20.794 \dashrightarrow 00:30:25.140$ You know there were no control group.

NOTE Confidence: 0.76736057

 $00:30:25.140 \longrightarrow 00:30:28.074$ But then Sweetman and colleagues Butte

- NOTE Confidence: 0.76736057
- 00:30:28.074 --> 00:30:31.100 Appan there and crack house study,

 $00:30:31.100 \dashrightarrow 00:30:34.082$ and indeed more of a randomized

NOTE Confidence: 0.76736057

 $00:30:34.082 \longrightarrow 00:30:35.076$ controlled trial.

NOTE Confidence: 0.76736057

00:30:35.080 --> 00:30:38.433 Looking at CBT I prior to CPAP

NOTE Confidence: 0.76736057

 $00:30:38.433 \longrightarrow 00:30:40.550$ versus treatment as usual,

NOTE Confidence: 0.76736057

 $00{:}30{:}40{.}550 \dashrightarrow 00{:}30{:}44{.}518$ which is which was just tap the rapy.

NOTE Confidence: 0.76736057

 $00:30:44.520 \longrightarrow 00:30:47.649$ And he looked at 145 patients with

NOTE Confidence: 0.76736057

 $00:30:47.649 \rightarrow 00:30:50.978$ Camisa is primary outcome was objective,

NOTE Confidence: 0.76736057

 $00{:}30{:}50{.}980 \dashrightarrow 00{:}30{:}53{.}510$ average CPAP adherence as well

NOTE Confidence: 0.76736057

 $00:30:53.510 \longrightarrow 00:30:55.534$ as changes in sleep.

NOTE Confidence: 0.76736057

 $00:30:55.540 \longrightarrow 00:30:57.248$ Efficiency at six months.

NOTE Confidence: 0.76736057

 $00{:}30{:}57{.}248 \dashrightarrow 00{:}30{:}59{.}810$ Secondary outcomes were rates of him

NOTE Confidence: 0.76736057

 $00:30:59.886 \rightarrow 00:31:02.370$ idiotsitter acceptance or rejection.

NOTE Confidence: 0.76736057

 $00:31:02.370 \longrightarrow 00:31:04.322$ Changes in sleep parameters,

NOTE Confidence: 0.76736057

00:31:04.322 --> 00:31:07.250 insomnia and severity and daytime impairment.

 $00:31:07.250 \longrightarrow 00:31:10.978$ And this was what is flow chart looks

NOTE Confidence: 0.76736057

00:31:10.978 --> 00:31:15.059 like two groups CBT I with 72 patients.

NOTE Confidence: 0.76736057

 $00{:}31{:}15{.}060 \dashrightarrow 00{:}31{:}17{.}616$ Treatment as usual with 73 patients

NOTE Confidence: 0.76736057

 $00{:}31{:}17.616 \dashrightarrow 00{:}31{:}20.555$ and then six weeks post randomization

NOTE Confidence: 0.76736057

 $00:31:20.555 \longrightarrow 00:31:22.867$ and they were tightening.

NOTE Confidence: 0.76736057

00:31:22.870 --> 00:31:25.870 They got C pap titration and

NOTE Confidence: 0.76736057

 $00:31:25.870 \longrightarrow 00:31:28.320$ they were set up on.

NOTE Confidence: 0.76736057

 $00{:}31{:}28{.}320 \dashrightarrow 00{:}31{:}31{.}144$ On C PAP and then followed up three

NOTE Confidence: 0.76736057

 $00{:}31{:}31{.}144 \dashrightarrow 00{:}31{:}34{.}356$ months and then six months and with

NOTE Confidence: 0.76736057

00:31:34.356 --> 00:31:36.300 basic questionnaire sleep diary,

NOTE Confidence: 0.76736057

 $00{:}31{:}36{.}300 \dashrightarrow 00{:}31{:}39{.}480$ home polysomnogram as well as assessments

NOTE Confidence: 0.76736057

 $00:31:39.480 \longrightarrow 00:31:43.069$ of their see PAP at the parents.

NOTE Confidence: 0.76736057

 $00:31:43.070 \longrightarrow 00:31:46.556$ This is a result of the study.

NOTE Confidence: 0.76736057

 $00:31:46.560 \longrightarrow 00:31:49.717$ This is a graph of diary measured

NOTE Confidence: 0.76736057

 $00:31:49.717 \rightarrow 00:31:52.030$ sleep efficiency during treatments.

NOTE Confidence: 0.76736057

 $00:31:52.030 \dashrightarrow 00:31:54.520$ I'm sleep efficiency against time.

- NOTE Confidence: 0.76736057
- $00:31:54.520 \rightarrow 00:31:58.504$ The blue line represents and the CBT group,

 $00:31:58.510 \longrightarrow 00:32:01.000$ and the orange dashed line

NOTE Confidence: 0.76736057

 $00:32:01.000 \rightarrow 00:32:03.490$ represents treatment as usual group.

NOTE Confidence: 0.76736057

 $00{:}32{:}03{.}490 \dashrightarrow 00{:}32{:}07{.}466$ And as we can see there was this

NOTE Confidence: 0.76736057

00:32:07.466 --> 00:32:09.560 initial improvement in sleep

NOTE Confidence: 0.76736057

 $00{:}32{:}09{.}560 \dashrightarrow 00{:}32{:}13.053$ efficiency going all the way from 60s.

NOTE Confidence: 0.76736057

 $00:32:13.060 \longrightarrow 00:32:16.380$ Up to about 84% and they kind of

NOTE Confidence: 0.76736057

 $00{:}32{:}16{.}380 \dashrightarrow 00{:}32{:}19{.}040$ coasted and maintain that over

NOTE Confidence: 0.76736057

 $00{:}32{:}19{.}040 \dashrightarrow 00{:}32{:}21{.}930$ the course of their treatment.

NOTE Confidence: 0.76736057

 $00:32:21.930 \longrightarrow 00:32:25.388$ Also with regards to Insomnia severity index.

NOTE Confidence: 0.76736057

00:32:25.390 --> 00:32:25.921 Again,

NOTE Confidence: 0.76736057

 $00{:}32{:}25{.}921 \dashrightarrow 00{:}32{:}28{.}045$ the insomnia severity against

NOTE Confidence: 0.76736057

00:32:28.045 - 00:32:32.579 time we can see in the CBT I group

NOTE Confidence: 0.76736057

 $00{:}32{:}32{.}579 \dashrightarrow 00{:}32{:}35{.}243$ and that there was a decrease.

NOTE Confidence: 0.76736057

 $00{:}32{:}35{.}250 \dashrightarrow 00{:}32{:}38{.}196$ You know in, in, in insomnia.

 $00:32:38.200 \longrightarrow 00:32:40.984$ And they also maintain that over

NOTE Confidence: 0.76736057

 $00{:}32{:}40{.}984 \dashrightarrow 00{:}32{:}44{.}180$ time as compared to the treatment.

NOTE Confidence: 0.76736057

00:32:44.180 --> 00:32:47.588 As usual group and it was.

NOTE Confidence: 0.76736057

 $00{:}32{:}47{.}590 \dashrightarrow 00{:}32{:}49{.}858$ It was clinically significant

NOTE Confidence: 0.76736057

 $00:32:49.858 \dashrightarrow 00:32:52.693$ which regards to CPAP adherence.

NOTE Confidence: 0.76736057

 $00{:}32{:}52{.}700 \dashrightarrow 00{:}32{:}55{.}385$ There was improved average nightly

NOTE Confidence: 0.76736057

 $00:32:55.385 \longrightarrow 00:32:58.950$ at the parents by 61 minutes.

NOTE Confidence: 0.76736057

00:32:58.950 --> 00:33:00.086 Pretty significant.

NOTE Confidence: 0.76736057

 $00{:}33{:}00{.}086 \dashrightarrow 00{:}33{:}02{.}926$ There was also lower initial

NOTE Confidence: 0.76736057

 $00:33:02.926 \longrightarrow 00:33:04.630$ PAP and rejection.

NOTE Confidence: 0.76736057

 $00{:}33{:}04{.}630 \dashrightarrow 00{:}33{:}08{.}709$ In fact there was an 87% reduction

NOTE Confidence: 0.76736057

00:33:08.709 --> 00:33:12.054 in immediate CPAP rejection among

NOTE Confidence: 0.76736057

00:33:12.054 --> 00:33:15.629 participants in the CBT I group.

NOTE Confidence: 0.76736057

00:33:15.630 - > 00:33:17.930 He followed the initial study

NOTE Confidence: 0.76736057

 $00{:}33{:}17{.}930 \dashrightarrow 00{:}33{:}20{.}802$ with a second report looking at

NOTE Confidence: 0.76736057

 $00:33:20.802 \rightarrow 00:33:23.247$ sleepiness the week following CBT.

- NOTE Confidence: 0.76736057
- $00:33:23.250 \longrightarrow 00:33:26.834$ I mean that the city I component

 $00:33:26.834 \rightarrow 00:33:29.852$ of sleep restriction and there was

NOTE Confidence: 0.76736057

 $00:33:29.852 \rightarrow 00:33:33.008$ a 15% increase in in sleepiness.

NOTE Confidence: 0.76736057

 $00{:}33{:}33{.}008 \dashrightarrow 00{:}33{:}37{.}389$ But then that went back down to the

NOTE Confidence: 0.76736057

 $00:33:37.389 \dashrightarrow 00:33:40.039$ pre treatment levels over time.

NOTE Confidence: 0.76736057

 $00:33:40.040 \dashrightarrow 00:33:44.328$ Now he followed that by a third report,

NOTE Confidence: 0.76736057

 $00:33:44.330 \longrightarrow 00:33:46.282$ which was quite interesting,

NOTE Confidence: 0.76736057

 $00:33:46.282 \longrightarrow 00:33:49.210$ and I thought I should share

NOTE Confidence: 0.76736057

 $00:33:49.303 \longrightarrow 00:33:50.759$ that information.

NOTE Confidence: 0.76736057

00:33:50.760 --> 00:33:51.230 Yes,

NOTE Confidence: 0.76736057

 $00:33:51.230 \longrightarrow 00:33:54.520$ this this is a graph of change

NOTE Confidence: 0.76736057

 $00{:}33{:}54{.}520$ --> $00{:}33{:}58{.}257$ in AHI against control and CBT.

NOTE Confidence: 0.8501122

 $00:33:58.260 \rightarrow 00:34:00.965$ I looking at different parameters

NOTE Confidence: 0.8501122

 $00{:}34{:}00{.}965 \dashrightarrow 00{:}34{:}03{.}670$ in different stages of sleep

NOTE Confidence: 0.8501122

 $00:34:03.766 \longrightarrow 00:34:06.296$ and basically the green bars.

 $00:34:06.300 \rightarrow 00:34:10.276$ Yeah, the darker green bars and that's.

NOTE Confidence: 0.8501122

00:34:10.280 --> 00:34:12.465 In the summer time position

NOTE Confidence: 0.8501122

 $00:34:12.465 \longrightarrow 00:34:15.160$ and the lights are green bars.

NOTE Confidence: 0.8501122

 $00{:}34{:}15{.}160 \dashrightarrow 00{:}34{:}18{.}238$ That's in the non supine position

NOTE Confidence: 0.8501122

00:34:18.238 --> 00:34:21.262 and basically just told report was

NOTE Confidence: 0.8501122

00:34:21.262 --> 00:34:23.908 evaluating the effects of CBT I

NOTE Confidence: 0.8501122

 $00:34:23.908 \longrightarrow 00:34:27.040$ on tap on the hi they were looking

NOTE Confidence: 0.8501122

 $00{:}34{:}27{.}040 \dashrightarrow 00{:}34{:}30{.}056$ at the hi to see if there was

NOTE Confidence: 0.8501122

00:34:30.056 --> 00:34:33.946 any effect on on the hi and as we

NOTE Confidence: 0.8501122

 $00:34:33.946 \longrightarrow 00:34:36.784$ can see there was a significant

NOTE Confidence: 0.8501122

 $00{:}34{:}36{.}784 \dashrightarrow 00{:}34{:}40{.}029$ effect on the Ahi in this patient.

NOTE Confidence: 0.8501122

 $00{:}34{:}40{.}030 \dashrightarrow 00{:}34{:}40{.}904$ There was.

NOTE Confidence: 0.8501122

 $00{:}34{:}40{.}904 \dashrightarrow 00{:}34{:}45{.}370$ Is 7 and a half events an hour greater?

NOTE Confidence: 0.8501122

 $00{:}34{:}45{.}370 \dashrightarrow 00{:}34{:}48{.}292$ Hi difference across all sleep stages

NOTE Confidence: 0.8501122

 $00{:}34{:}48{.}292 \dashrightarrow 00{:}34{:}51{.}372$ and postures so when we controlled

NOTE Confidence: 0.8501122

 $00:34:51.372 \rightarrow 00:34:54.498$ for sleep stage and controlled for

- NOTE Confidence: 0.8501122
- $00:34:54.498 \rightarrow 00:34:57.307$ body position and when compared to

 $00{:}34{:}57{.}307 \dashrightarrow 00{:}35{:}00{.}268$ control there was a 7.5 event per

NOTE Confidence: 0.8501122

 $00{:}35{:}00{.}268 \dashrightarrow 00{:}35{:}03{.}334$ hour reduction in HI which I thought

NOTE Confidence: 0.8501122

 $00:35:03.334 \rightarrow 00:35:05.903$ was pretty significant that that

NOTE Confidence: 0.8501122

 $00:35:05.903 \rightarrow 00:35:09.101$ was the first study that actually

NOTE Confidence: 0.8501122

 $00:35:09.101 \dashrightarrow 00:35:12.220$ showed that now hung and colleagues.

NOTE Confidence: 0.8501122

 $00{:}35{:}12.220 \dashrightarrow 00{:}35{:}16.450$ Did follow up an with a study of their

NOTE Confidence: 0.8501122

 $00{:}35{:}16{.}450 \dashrightarrow 00{:}35{:}20{.}590$ own after the Sweet Man study and

NOTE Confidence: 0.8501122

 $00:35:20.590 \rightarrow 00:35:25.198$ basically what they did was to compare CBT.

NOTE Confidence: 0.8501122

00:35:25.200 --> 00:35:29.528 I prior to Peter ARTPOP therapy versus CBT.

NOTE Confidence: 0.8501122

 $00{:}35{:}29{.}530 \dashrightarrow 00{:}35{:}33.016$ I concurrent with pap the rapy versus

NOTE Confidence: 0.8501122

 $00{:}35{:}33.016 \dashrightarrow 00{:}35{:}36.770$ just pop the rapy only and so they

NOTE Confidence: 0.8501122

 $00{:}35{:}36{.}770 \dashrightarrow 00{:}35{:}39{.}857$ had three hands of the study and

NOTE Confidence: 0.8501122

 $00:35:39.961 \longrightarrow 00:35:43.166$ basically followed them over 90.

NOTE Confidence: 0.8501122

 $00{:}35{:}43.170 \dashrightarrow 00{:}35{:}47.034$ Days and the outcome measure was pretty

 $00:35:47.034 \rightarrow 00:35:51.407$ much the same with the Sweet Man study.

NOTE Confidence: 0.8501122

00:35:51.410 --> 00:35:53.054 Primary outcome sipopa

NOTE Confidence: 0.8501122

 $00:35:53.054 \dashrightarrow 00:35:54.698$ Darren secondary outcome.

NOTE Confidence: 0.8501122

 $00{:}35{:}54{.}700 \dashrightarrow 00{:}35{:}57{.}988$ Influence on insomnia and sleep symptoms.

NOTE Confidence: 0.8501122

 $00{:}35{:}57{.}990 \dashrightarrow 00{:}36{:}02{.}760$ And as you can see there was a reduction

NOTE Confidence: 0.8501122

 $00{:}36{:}02.760 \dashrightarrow 00{:}36{:}06.869$ in the Insomnia Severity Index.

NOTE Confidence: 0.8501122

 $00:36:06.870 \dashrightarrow 00:36:11.510$ In this draft, the blue line here is the CBT.

NOTE Confidence: 0.8501122

00:36:11.510 --> 00:36:15.686 I prior to CPAP, the red line is CBT,

NOTE Confidence: 0.8501122

00:36:15.690 --> 00:36:18.854 I concurrent with C pap and the

NOTE Confidence: 0.8501122

 $00:36:18.854 \rightarrow 00:36:21.720$ green line is part as usual.

NOTE Confidence: 0.8501122

 $00{:}36{:}21.720 \dashrightarrow 00{:}36{:}25.424$ So yes, there was a reduction in insomnia.

NOTE Confidence: 0.8501122

 $00:36:25.430 \longrightarrow 00:36:27.750$ He was clinically significant between

NOTE Confidence: 0.8501122

 $00{:}36{:}27.750 \dashrightarrow 00{:}36{:}30.999$ the CBT groups and the pub groups.

NOTE Confidence: 0.8501122

00:36:31.000 --> 00:36:31.487 However,

NOTE Confidence: 0.8501122

 $00{:}36{:}31{.}487 \dashrightarrow 00{:}36{:}33{.}922$ when you measure the difference

NOTE Confidence: 0.8501122

00:36:33.922 --> 00:36:36.388 between CBT before Pap versus

00:36:36.388 --> 00:36:38.578 City I concurrent with pop.

NOTE Confidence: 0.8501122

 $00:36:38.580 \longrightarrow 00:36:41.646$ There was no difference at the 90

NOTE Confidence: 0.8501122

00:36:41.646 - 00:36:45.059 day and time points or end points.

NOTE Confidence: 0.79616076

00:36:47.670 --> 00:36:51.510 Yeah, they also looked at specific

NOTE Confidence: 0.79616076

 $00{:}36{:}51{.}510 \dashrightarrow 00{:}36{:}55{.}370$ clinical endpoints which they define as

NOTE Confidence: 0.79616076

 $00{:}36{:}55{.}370 \dashrightarrow 00{:}36{:}58{.}577$ good sleepers, remission or response.

NOTE Confidence: 0.79616076

 $00:36:58.577 \dashrightarrow 00:37:02.591$ So basically a good sleeper was

NOTE Confidence: 0.79616076

 $00{:}37{:}02.591 \dashrightarrow 00{:}37{:}07.220$ defined as someone who had a large AA

NOTE Confidence: 0.79616076

 $00{:}37{:}07{.}220 \dashrightarrow 00{:}37{:}11{.}005$ five point difference less than five

NOTE Confidence: 0.79616076

 $00:37:11.005 \dashrightarrow 00:37:14.375$ difference in their PSQI remission.

NOTE Confidence: 0.79616076

 $00:37:14.380 \rightarrow 00:37:18.930$ Clinically, was defined as an ISI score.

NOTE Confidence: 0.79616076

 $00:37{:}18.930 \dashrightarrow 00{:}37{:}21.946$ Of less than eight at study end points NOTE Confidence: 0.79616076

 $00:37{:}21.946$ --> $00{:}37{:}24.619$ and the response was basically defined NOTE Confidence: 0.79616076

 $00:37:24.619 \rightarrow 00:37:28.330$ as a reduction in the ISI score by

NOTE Confidence: 0.79616076

 $00:37:28.330 \longrightarrow 00:37:31.403$ more than seven points, so you know.

00:37:31.403 --> 00:37:35.230 Again, Green is CBT before pop Blue is CBT.

NOTE Confidence: 0.79616076

 $00{:}37{:}35{.}230 \dashrightarrow 00{:}37{:}38{.}654$ I whip up an Gray is pop only,

NOTE Confidence: 0.79616076

 $00{:}37{:}38.660 \dashrightarrow 00{:}37{:}41.240$ so there was a significant difference.

NOTE Confidence: 0.79616076

 $00:37:41.240 \rightarrow 00:37:45.530$ When we look at CBT with pop versus pop only.

NOTE Confidence: 0.79616076

 $00:37:45.530 \longrightarrow 00:37:48.197$ But when we look at the timing

NOTE Confidence: 0.79616076

 $00{:}37{:}48.197 \dashrightarrow 00{:}37{:}51.198$ of CBT I before pop versus.

NOTE Confidence: 0.79616076

 $00{:}37{:}51{.}200 \dashrightarrow 00{:}37{:}54{.}452$ We pop, there was no clinically

NOTE Confidence: 0.79616076

 $00:37:54.452 \longrightarrow 00:37:56.078$ significant and difference,

NOTE Confidence: 0.79616076

 $00{:}37{:}56.080 \dashrightarrow 00{:}37{:}59.326$ and that was quite interesting that,

NOTE Confidence: 0.79616076

 $00:37:59.330 \longrightarrow 00:38:02.576$ you know, we have two randomized,

NOTE Confidence: 0.79616076

 $00{:}38{:}02{.}580 \dashrightarrow 00{:}38{:}05{.}826$ well done and randomized control trials,

NOTE Confidence: 0.79616076

 $00:38:05.830 \rightarrow 00:38:09.316$ but giving us different results with

NOTE Confidence: 0.79616076

00:38:09.316 --> 00:38:12.880 regards to economics and and see Pap,

NOTE Confidence: 0.79616076

 $00:38:12.880 \longrightarrow 00:38:15.990$ we already know that benzodiazapines

NOTE Confidence: 0.79616076

 $00:38:15.990 \longrightarrow 00:38:19.100$ don't help and they increase

NOTE Confidence: 0.79616076

00:38:19.205 - 00:38:22.080 at Nick episodes and increase.

 $00:38:22.080 \rightarrow 00:38:25.446$ The Noddy oxygen disseration during sleep.

NOTE Confidence: 0.79616076

 $00{:}38{:}25{.}450 \dashrightarrow 00{:}38{:}28{.}865$ However non benzodia zepine's might you

NOTE Confidence: 0.79616076

 $00:38:28.865 \rightarrow 00:38:32.907$ know show some efficacy year literary

NOTE Confidence: 0.79616076

 $00:38:32.907 \dashrightarrow 00:38:37.067$ and colleagues and did look at a couple NOTE Confidence: 0.79616076

 $00:38:37.067 \rightarrow 00:38:41.160$ of patients and they showed that.

NOTE Confidence: 0.79616076

 $00{:}38{:}41{.}160 \dashrightarrow 00{:}38{:}43{.}900$ And on benzo diazapines pasquali eggs

NOTE Confidence: 0.79616076

 $00{:}38{:}43{.}900 \dashrightarrow 00{:}38{:}47{.}832$ or peak lawn and can improve tolerance

NOTE Confidence: 0.79616076

 $00{:}38{:}47{.}832 \dashrightarrow 00{:}38{:}52{.}216$ of C pap titration and can also improve

NOTE Confidence: 0.79616076

 $00{:}38{:}52{.}313 \dashrightarrow 00{:}38{:}55{.}673$ adherence to CPAP when used in in

NOTE Confidence: 0.79616076

 $00:38:55.673 \dashrightarrow 00:39:01.190$ the initial days of a C pap therapy.

NOTE Confidence: 0.79616076

 $00:39:01.190 \dashrightarrow 00:39:04.634$ So in summary with regards to the rapy,

NOTE Confidence: 0.79616076

 $00{:}39{:}04.640 \dashrightarrow 00{:}39{:}08.584$ CBT plus pop is better than pop alone.

NOTE Confidence: 0.79616076

 $00:39:08.590 \rightarrow 00:39:11.050$ For insomnia symptoms the effects

NOTE Confidence: 0.79616076

 $00{:}39{:}11.050 \dashrightarrow 00{:}39{:}12.526$ on pop adherence,

NOTE Confidence: 0.79616076

 $00:39:12.530 \longrightarrow 00:39:12.959$ well,

 $00:39:12.959 \rightarrow 00:39:15.962$ we have two very well done studies

NOTE Confidence: 0.79616076

 $00:39:15.962 \longrightarrow 00:39:18.450$ that show different results,

NOTE Confidence: 0.79616076

 $00{:}39{:}18{.}450 \dashrightarrow 00{:}39{:}21{.}222$ so that's still unclear the with

NOTE Confidence: 0.79616076

 $00:39:21.222 \rightarrow 00:39:23.070$ regards to sequential versus

NOTE Confidence: 0.79616076

00:39:23.152 --> 00:39:25.727 concurrent CTI wypad again two

NOTE Confidence: 0.79616076

00:39:25.727 --> 00:39:28.302 different results that still unclear.

NOTE Confidence: 0.79616076

 $00{:}39{:}28{.}310 \dashrightarrow 00{:}39{:}31{.}316$ We need for the studies too.

NOTE Confidence: 0.79616076

 $00:39:31.320 \longrightarrow 00:39:33.966$ Before the clarify what should be

NOTE Confidence: 0.79616076

00:39:33.966 --> 00:39:37.115 done we are seeing from the Sweet

NOTE Confidence: 0.79616076

00:39:37.115 --> 00:39:40.139 Man study that CBT I can potentially

NOTE Confidence: 0.79616076

00:39:40.233 --> 00:39:43.243 decrease the severity of obstructive

NOTE Confidence: 0.79616076

00:39:43.243 --> 00:39:46.253 sleep apnea and zopiclone improves

NOTE Confidence: 0.79616076

 $00{:}39{:}46.260 \dashrightarrow 00{:}39{:}48.252$ CPAP titration and adherence.

NOTE Confidence: 0.79616076

 $00:39:48.252 \longrightarrow 00:39:51.240$ So having said all of that,

NOTE Confidence: 0.79616076

 $00:39:51.240 \longrightarrow 00:39:55.040$ I think you know one of the most

NOTE Confidence: 0.79616076

 $00{:}39{:}55{.}040 \dashrightarrow 00{:}39{:}58{.}515$ important things I'm in taking care of

- NOTE Confidence: 0.79616076
- $00:39:58.515 \rightarrow 00:40:01.910$ Camisa patients is a patient centered.

00:40:01.910 --> 00:40:02.508 Yeah,

NOTE Confidence: 0.79616076

 $00{:}40{:}02{.}508 \dashrightarrow 00{:}40{:}04{.}900$ and that's you know,

NOTE Confidence: 0.79616076

 $00:40:04.900 \longrightarrow 00:40:09.076$ developing a treatment plan that puts.

NOTE Confidence: 0.79616076

 $00{:}40{:}09{.}080 \dashrightarrow 00{:}40{:}10{.}511$ In the forefront,

NOTE Confidence: 0.79616076

 $00:40:10.511 \longrightarrow 00:40:12.896$ what is personally relevant to

NOTE Confidence: 0.79616076

 $00:40:12.896 \longrightarrow 00:40:15.583$ the patient as our previously

NOTE Confidence: 0.79616076

 $00{:}40{:}15.583 \dashrightarrow 00{:}40{:}17.779$ presented different patients do

NOTE Confidence: 0.79616076

 $00{:}40{:}17.779 \dashrightarrow 00{:}40{:}20.530$ have different risk factors and

NOTE Confidence: 0.79616076

 $00{:}40{:}20.530 \dashrightarrow 00{:}40{:}23.085$ today presents in different ways.

NOTE Confidence: 0.79616076

 $00{:}40{:}23.090 \dashrightarrow 00{:}40{:}25.600$ And understanding of this risk

NOTE Confidence: 0.79616076

 $00:40:25.600 \longrightarrow 00:40:28.736$ factors would help us to better

NOTE Confidence: 0.79616076

 $00{:}40{:}28.736 \dashrightarrow 00{:}40{:}31.396$ take care of these patients.

NOTE Confidence: 0.79616076

 $00{:}40{:}31{.}400 \dashrightarrow 00{:}40{:}34{.}809$ I think one thing is important and

NOTE Confidence: 0.79616076

 $00{:}40{:}34.809 \dashrightarrow 00{:}40{:}38.150$ essential that taking care of commissa

 $00:40:38.150 \rightarrow 00:40:40.534$ patients is multi disciplinary.

NOTE Confidence: 0.79616076

00:40:40.540 --> 00:40:43.150 It involves a sleep specialist

NOTE Confidence: 0.79616076

 $00:40:43.150 \longrightarrow 00:40:44.716$ on the primary.

NOTE Confidence: 0.79616076

 $00:40:44.720 \longrightarrow 00:40:47.340$ Care specialists are behavioral specialists.

NOTE Confidence: 0.79616076

 $00:40:47.340 \longrightarrow 00:40:51.120$ We you know we have to have all of

NOTE Confidence: 0.79616076

 $00{:}40{:}51{.}120 \dashrightarrow 00{:}40{:}55{.}344$ of this on board and also frequent

NOTE Confidence: 0.79616076

 $00:40:55.344 \longrightarrow 00:40:58.936$ followups is a senchal to keep

NOTE Confidence: 0.79616076

 $00{:}40{:}58{.}936 \dashrightarrow 00{:}41{:}02{.}002$ tabs with the patient and see

NOTE Confidence: 0.79616076

 $00{:}41{:}02.002 \dashrightarrow 00{:}41{:}05.122$ if what we're actually doing is

NOTE Confidence: 0.79616076

 $00{:}41{:}05{.}122 \dashrightarrow 00{:}41{:}08{.}260$ making a difference in their lives.

NOTE Confidence: 0.79616076

 $00:41:08.260 \longrightarrow 00:41:09.334$ Future directions.

NOTE Confidence: 0.79616076

 $00{:}41{:}09{.}334 \dashrightarrow 00{:}41{:}12{.}019$ I think we need implementation.

NOTE Confidence: 0.79616076

 $00{:}41{:}12.020 \dashrightarrow 00{:}41{:}15.016$ So these are in camisa to provide

NOTE Confidence: 0.79616076

 $00:41:15.016 \rightarrow 00:41:16.300$ guidance for what

NOTE Confidence: 0.7714207

 $00:41:16.384 \longrightarrow 00:41:19.552$ the optimal therapy as well as

NOTE Confidence: 0.7714207

 $00:41:19.552 \rightarrow 00:41:21.664$ combinations and sequence should

- NOTE Confidence: 0.7714207
- 00:41:21.756 --> 00:41:25.396 be we do need guidance for other

00:41:25.396 --> 00:41:27.367 treatment combinations beyond just

NOTE Confidence: 0.7714207

 $00{:}41{:}27.367 \dashrightarrow 00{:}41{:}30.623$ see DTI and tap terapy and I think

NOTE Confidence: 0.7714207

 $00:41:30.623 \rightarrow 00:41:33.995$ it's interesting to study what the

NOTE Confidence: 0.7714207

 $00{:}41{:}33.995 \dashrightarrow 00{:}41{:}37.420$ interplay would be between sleep debt,

NOTE Confidence: 0.7714207

00:41:37.420 --> 00:41:38.416 objective wakefulness,

NOTE Confidence: 0.7714207

00:41:38.416 --> 00:41:39.910 obstructive sleep apnea.

NOTE Confidence: 0.7714207

00:41:39.910 --> 00:41:43.000 During CBT I and C pap.

NOTE Confidence: 0.7714207

00:41:43.000 --> 00:41:45.535 Impatience with Camisa just to

NOTE Confidence: 0.7714207

 $00{:}41{:}45{.}535 \dashrightarrow 00{:}41{:}48{.}070$ further elucidate what the potential

NOTE Confidence: 0.7714207

 $00{:}41{:}48{.}147 \dashrightarrow 00{:}41{:}50{.}187$ mechanisms and like I said,

NOTE Confidence: 0.7714207

00:41:50.190 --> 00:41:53.207 there's still a lot of variance and

NOTE Confidence: 0.7714207

 $00{:}41{:}53.207 \dashrightarrow 00{:}41{:}56.165$ that is unexplained with regards to

NOTE Confidence: 0.7714207

 $00{:}41{:}56.165 \dashrightarrow 00{:}41{:}58.810$ excessive wakefulness in this patient.

NOTE Confidence: 0.7714207

 $00:41:58.810 \rightarrow 00:42:00.235$ So in conclusion,

 $00{:}42{:}00{.}235 \dashrightarrow 00{:}42{:}02{.}135$ comorbid insomnia in obstructive

NOTE Confidence: 0.7714207

00:42:02.135 --> 00:42:05.029 sleep apnea is a highly prevalent,

NOTE Confidence: 0.7714207

 $00{:}42{:}05{.}030 \dashrightarrow 00{:}42{:}06{.}950$ but under recognized and

NOTE Confidence: 0.7714207

 $00{:}42{:}06{.}950 \dashrightarrow 00{:}42{:}08{.}870$ condition commits to patients.

NOTE Confidence: 0.7714207

 $00:42:08.870 \longrightarrow 00:42:11.260$ They do have higher psychiatric,

NOTE Confidence: 0.7714207

 $00:42:11.260 \longrightarrow 00:42:11.751$ cardiovascular,

NOTE Confidence: 0.7714207

 $00:42:11.751 \rightarrow 00:42:14.206$ and cerebral cerebral vascular comorbidities.

NOTE Confidence: 0.7714207

 $00:42:14.210 \longrightarrow 00:42:16.515$ When compared to patients with

NOTE Confidence: 0.7714207

00:42:16.515 --> 00:42:18.820 some obstructive sleep apnea alone,

NOTE Confidence: 0.7714207

 $00{:}42{:}18.820 \dashrightarrow 00{:}42{:}20.768$ the Insomnia severity Index,

NOTE Confidence: 0.7714207

 $00{:}42{:}20.768 \dashrightarrow 00{:}42{:}23.690$ sleep diary and other measures of

NOTE Confidence: 0.7714207

 $00{:}42{:}23.771 \dashrightarrow 00{:}42{:}25.939$ day time impairment there paramounts

NOTE Confidence: 0.7714207

00:42:25.939 --> 00:42:29.608 in evaluating this patients CBT I +

NOTE Confidence: 0.7714207

 $00{:}42{:}29.608 \dashrightarrow 00{:}42{:}32.304$ C PAP is better than CPAP alone and

NOTE Confidence: 0.7714207

 $00{:}42{:}32{.}304 \dashrightarrow 00{:}42{:}34{.}494$ multi disciplinary approach is key.

NOTE Confidence: 0.7714207

00:42:34.494 --> 00:42:36.338 So having said that,

- NOTE Confidence: 0.7714207
- 00:42:36.340 --> 00:42:39.720 I want to say a big thank you to my

00:42:39.824 --> 00:42:44.178 program director and Doctor King for support.

NOTE Confidence: 0.7714207

 $00:42:44.180 \longrightarrow 00:42:47.000$ Doctor crager. Four is a we some.

NOTE Confidence: 0.7714207

 $00:42:47.000 \longrightarrow 00:42:48.620$ Support doctors in troop.

NOTE Confidence: 0.7714207

00:42:48.620 --> 00:42:50.738 Thank you. You're always there.

NOTE Confidence: 0.7714207

 $00{:}42{:}50{.}738 \dashrightarrow 00{:}42{:}53{.}354$ Always there to give a helping

NOTE Confidence: 0.7714207

 $00:42:53.354 \rightarrow 00:42:55.117$ hand and to you know,

NOTE Confidence: 0.7714207

 $00:42:55.120 \longrightarrow 00:42:58.368$ direct me in in the right direction.

NOTE Confidence: 0.7714207

 $00:42:58.370 \longrightarrow 00:43:01.002$ So thank you so much for being

NOTE Confidence: 0.7714207

 $00:43:01.002 \longrightarrow 00:43:02.830$ such a great mentor.

NOTE Confidence: 0.7714207

00:43:02.830 --> 00:43:04.860 And of course Dr Schneeberg,

NOTE Confidence: 0.7714207

 $00{:}43{:}04{.}860 \dashrightarrow 00{:}43{:}08{.}514$ we send you a ton of patients with insomnia.

NOTE Confidence: 0.7714207

 $00{:}43{:}08{.}520 \dashrightarrow 00{:}43{:}11{.}776$ I want to say thank you for you

NOTE Confidence: 0.7714207

 $00{:}43{:}11.776 \dashrightarrow 00{:}43{:}14.533$ know keeping tabs on this patient

NOTE Confidence: 0.7714207

 $00{:}43{:}14{.}533 \dashrightarrow 00{:}43{:}16{.}843$ and taking care of them.

- 00:43:16.850 --> 00:43:17.813 Having said that,
- NOTE Confidence: 0.7714207
- 00:43:17.813 --> 00:43:20.850 I am going to close my talk for today.
- NOTE Confidence: 0.8218679
- $00:43:28.990 \longrightarrow 00:43:30.638$ Thank you second call.
- NOTE Confidence: 0.8218679
- $00{:}43{:}30{.}638 \dashrightarrow 00{:}43{:}33{.}110$ That was really a great overview.
- NOTE Confidence: 0.8218679
- $00{:}43{:}33{.}110 \dashrightarrow 00{:}43{:}36{.}406$ I want to open it up for questions.
- NOTE Confidence: 0.8218679
- $00{:}43{:}36{.}410 \dashrightarrow 00{:}43{:}38{.}058$ I will start off.
- NOTE Confidence: 0.8218679
- 00:43:38.058 --> 00:43:41.062 I, you know, having read all of
- NOTE Confidence: 0.8218679
- $00:43:41.062 \rightarrow 00:43:43.238$ this literature and seeing what
- NOTE Confidence: 0.8218679
- 00:43:43.238 --> 00:43:45.452 the data is for using concurrent
- NOTE Confidence: 0.8218679
- 00:43:45.452 --> 00:43:47.896 CBT and C PAP initiation or
- NOTE Confidence: 0.8218679
- $00{:}43{:}47.896 \dashrightarrow 00{:}43{:}50.410$ CBT prior to C PAP initiation,
- NOTE Confidence: 0.8218679
- $00:43:50.410 \rightarrow 00:43:52.888$ how will this change your practice?
- NOTE Confidence: 0.8218679
- 00:43:52.890 --> 00:43:54.123 Everything you've learned
- NOTE Confidence: 0.8218679
- $00:43:54.123 \longrightarrow 00:43:55.767$ in preparing for this?
- NOTE Confidence: 0.8883347
- 00:43:58.100 --> 00:44:00.279 So I I think.
- NOTE Confidence: 0.8186888
- 00:44:02.310 --> 00:44:04.638 You know, going through sleep fellowship,

- NOTE Confidence: 0.8186888
- $00{:}44{:}04{.}640 \dashrightarrow 00{:}44{:}07{.}416$ you know at the beginning there's a there

 $00{:}44{:}07{.}416 \dashrightarrow 00{:}44{:}10{.}320$ was a lot of partial knowledge and you

NOTE Confidence: 0.8186888

 $00:44:10.320 \rightarrow 00:44:13.588$ know we put all that knowledge together.

NOTE Confidence: 0.8186888

00:44:13.590 --> 00:44:15.704 But as I come to the end

NOTE Confidence: 0.8186888

00:44:15.704 --> 00:44:18.259 of my my sleep fellowship,

NOTE Confidence: 0.8186888

00:44:18.260 --> 00:44:21.340 you know a lot of the knowledge has

NOTE Confidence: 0.8186888

 $00:44:21.340 \rightarrow 00:44:23.708$ been consolidated and with my practice,

NOTE Confidence: 0.8186888

 $00:44:23.710 \rightarrow 00:44:26.426$ absolutely this patients say they need CBT.

NOTE Confidence: 0.8186888

 $00{:}44{:}26{.}430 \dashrightarrow 00{:}44{:}29{.}951$ I we have to, you know, put them on.

NOTE Confidence: 0.8186888

00:44:29.951 --> 00:44:32.333 CBT I you know we know.

NOTE Confidence: 0.8186888

00:44:32.340 --> 00:44:34.500 It's going to improve your CPAP,

NOTE Confidence: 0.8186888

 $00:44:34.500 \rightarrow 00:44:37.380$ had errands is gonna help them cope better.

NOTE Confidence: 0.8186888

 $00{:}44{:}37{.}380 \dashrightarrow 00{:}44{:}40{.}308$ So CBT I proud to see Pap would

NOTE Confidence: 0.8186888

 $00:44:40.308 \longrightarrow 00:44:42.776$ be the way to go for me.

NOTE Confidence: 0.8186888

 $00{:}44{:}42.780 \dashrightarrow 00{:}44{:}45.594$ I know you would have further been

- $00{:}44{:}45{.}594 \dashrightarrow 00{:}44{:}48{.}437$ research into this to see what you know
- NOTE Confidence: 0.8186888
- $00{:}44{:}48{.}437 \dashrightarrow 00{:}44{:}51{.}059$ should be done but I would do CBT.
- NOTE Confidence: 0.8186888
- 00:44:51.060 00:44:52.860 I proud to see Bob.
- NOTE Confidence: 0.84635043
- $00{:}44{:}57{.}030 \dashrightarrow 00{:}44{:}57{.}742$ Great thanks.
- NOTE Confidence: 0.84635043
- 00:44:57.742 --> 00:44:59.878 Yeah, I think you know logistically.
- NOTE Confidence: 0.84635043
- $00{:}44{:}59{.}880 \dashrightarrow 00{:}45{:}01{.}655$ Sometimes we run into challenges
- NOTE Confidence: 0.84635043
- $00:45:01.655 \longrightarrow 00:45:03.075$ of making that happen,
- NOTE Confidence: 0.84635043
- $00:45:03.080 \rightarrow 00:45:04.037$ and it's interesting.
- NOTE Confidence: 0.84635043
- $00{:}45{:}04.037 \dashrightarrow 00{:}45{:}05.951$ The questions that that sort of
- NOTE Confidence: 0.84635043
- $00{:}45{:}05{.}951 \dashrightarrow 00{:}45{:}07{.}709$ that your presentation raises.
- NOTE Confidence: 0.84635043
- $00{:}45{:}07{.}710 \dashrightarrow 00{:}45{:}10{.}230$ I think about some of the current
- NOTE Confidence: 0.84635043
- $00:45:10.230 \rightarrow 00:45:12.687$ insurance rules about when we see someone,
- NOTE Confidence: 0.84635043
- $00:45:12.690 \rightarrow 00:45:14.916$ and then when their sleep study
- NOTE Confidence: 0.84635043
- $00:45:14.916 \longrightarrow 00:45:17.132$ has to be completed and when
- NOTE Confidence: 0.84635043
- $00:45:17.132 \longrightarrow 00:45:19.094$ they have to receive C pap.
- NOTE Confidence: 0.84635043
- 00:45:19.100 --> 00:45:21.881 And if in fact one of the routes for

- NOTE Confidence: 0.84635043
- $00:45:21.881 \rightarrow 00:45:24.081$ care is that they should actually

00:45:24.081 --> 00:45:27.251 get CBT 1st and get plugged in with

NOTE Confidence: 0.84635043

 $00{:}45{:}27{.}251 \dashrightarrow 00{:}45{:}29{.}813$ that before they get their machine.

NOTE Confidence: 0.84635043

 $00{:}45{:}29{.}820 \dashrightarrow 00{:}45{:}32{.}417$ That kind of changes our thinking about

NOTE Confidence: 0.84635043

 $00{:}45{:}32{.}417 \dashrightarrow 00{:}45{:}35{.}139$ how we should arrange this workflow,

NOTE Confidence: 0.84635043

 $00:45:35.140 \longrightarrow 00:45:36.187$ but thank you.

NOTE Confidence: 0.84635043

 $00{:}45{:}36{.}187 \dashrightarrow 00{:}45{:}38{.}281$ It was a really excellent overview

NOTE Confidence: 0.84635043

 $00{:}45{:}38{.}281 \dashrightarrow 00{:}45{:}40{.}859$ of everything question anyone else.

NOTE Confidence: 0.86312586

 $00{:}45{:}43.450 \dashrightarrow 00{:}45{:}45.886$ Although I have a quick question,

NOTE Confidence: 0.86312586

 $00:45:45.886 \longrightarrow 00:45:47.916$ do you think that all

NOTE Confidence: 0.86312586

 $00{:}45{:}47{.}920 \dashrightarrow 00{:}45{:}51{.}015$ sleep apnea patients should receive CBT I?

NOTE Confidence: 0.86312586

 $00{:}45{:}51.015 \dashrightarrow 00{:}45{:}53.200$ Prior to being started on treatment.

NOTE Confidence: 0.7842147

00:45:55.340 --> 00:45:58.796 So I I I do not think all

NOTE Confidence: 0.7842147

00:45:58.796 --> 00:46:01.539 sleep apnea patients shoot,

NOTE Confidence: 0.7842147

 $00{:}46{:}01{.}540 \dashrightarrow 00{:}46{:}05{.}560$ you know, they all have this.

00:46:05.560 --> 00:46:07.856 Multiple clinical phenotypes of

NOTE Confidence: 0.7842147

00:46:07.856 --> 00:46:11.300 how you know they they present.

NOTE Confidence: 0.7842147

 $00{:}46{:}11{.}300 \dashrightarrow 00{:}46{:}14{.}170$ Certainly the patients with insomnia,

NOTE Confidence: 0.7842147

00:46:14.170 --> 00:46:15.892 you know, should,

NOTE Confidence: 0.7842147

 $00{:}46{:}15.892 \dashrightarrow 00{:}46{:}19.336$ especially those who have you know,

NOTE Confidence: 0.7842147

 $00{:}46{:}19{.}340 \dashrightarrow 00{:}46{:}22{.}425$ difficulty initiating sleep and and

NOTE Confidence: 0.7842147

 $00:46:22.425 \rightarrow 00:46:26.638$ have this iPod arousal state is usually

NOTE Confidence: 0.7842147

 $00:46:26.638 \rightarrow 00:46:30.236$ very difficult for them to cope with.

NOTE Confidence: 0.7842147

00:46:30.240 --> 00:46:33.690 You know, using using C pap,

NOTE Confidence: 0.7842147

 $00:46:33.690 \rightarrow 00:46:37.218$ so definitely those patients I would.

NOTE Confidence: 0.7842147

00:46:37.220 --> 00:46:39.404 You know, put on CBC I bought,

NOTE Confidence: 0.7842147

00:46:39.410 --> 00:46:41.288 but not not everyone, not everyone.

NOTE Confidence: 0.8885628

 $00{:}46{:}46{.}550 \dashrightarrow 00{:}46{:}47{.}530$ I would love to hear.

NOTE Confidence: 0.8885628

 $00{:}46{:}47{.}530 \dashrightarrow 00{:}46{:}49{.}190$ I know there is some.

NOTE Confidence: 0.8885628

 $00:46:49.190 \longrightarrow 00:46:50.708$ Oh God, is there a question?

NOTE Confidence: 0.85586345

00:46:53.690 - 00:46:56.930 I was going to say I would love to hear

 $00{:}46{:}57.020 \dashrightarrow 00{:}47{:}00.100$ from many of the psychologist I know.

NOTE Confidence: 0.85586345

 $00{:}47{:}00{.}100 \dashrightarrow 00{:}47{:}03{.}276$ We have at least a couple I think

NOTE Confidence: 0.85586345

 $00:47:03.276 \longrightarrow 00:47:05.378$ behavioral psychologists on the call today.

NOTE Confidence: 0.85586345

 $00{:}47{:}05{.}380 \dashrightarrow 00{:}47{:}09{.}150$ If people want to chime in and sort of share,

NOTE Confidence: 0.85586345

 $00{:}47{:}09{.}150$ --> $00{:}47{:}11{.}412$ you know their experience about managing NOTE Confidence: 0.85586345

 $00{:}47{:}11{.}412 \dashrightarrow 00{:}47{:}13{.}343$ patients who are concurrently dealing

NOTE Confidence: 0.85586345

 $00{:}47{:}13{.}343 \dashrightarrow 00{:}47{:}15{.}557$ with both insomnia and CPAP acclimation.

NOTE Confidence: 0.85586345

 $00:47:15.560 \rightarrow 00:47:18.584$ I know that those can be challenging

NOTE Confidence: 0.85586345

 $00{:}47{:}18.584 \dashrightarrow 00{:}47{:}21.660$ things to deal with simultaneously.

NOTE Confidence: 0.85586345

 $00{:}47{:}21.660 \dashrightarrow 00{:}47{:}24.748$ But it's it's heartening to see that we

NOTE Confidence: 0.85586345

 $00{:}47{:}24.748$ --> $00{:}47{:}27.250$ can potentially have favorable impact on

NOTE Confidence: 0.85586345

 $00{:}47{:}27{.}250 \dashrightarrow 00{:}47{:}30{.}230$ each disease with treatment of the other.

NOTE Confidence: 0.87493503

 $00{:}47{:}42.640 \dashrightarrow 00{:}47{:}46.584$ I have a quick question to ask her.

NOTE Confidence: 0.87493503

 $00{:}47{:}46.584 \dashrightarrow 00{:}47{:}50.042$ This is the stupid man from California

NOTE Confidence: 0.87493503

 $00{:}47{:}50.042 \dashrightarrow 00{:}47{:}53.786$ in patients who have strictly sleep

 $00:47:53.790 \rightarrow 00:47:56.134$ maintenance insomnia with zero

NOTE Confidence: 0.87493503

 $00{:}47{:}56{.}134 \dashrightarrow 00{:}47{:}59{.}986$ sleep onset insomnia I have seen.

NOTE Confidence: 0.87493503

 $00:47:59.990 \longrightarrow 00:48:02.106$ Usually very good result.

NOTE Confidence: 0.87493503

 $00:48:02.106 \rightarrow 00:48:05.950$ When you can control the sleep apnea.

NOTE Confidence: 0.87493503

00:48:05.950 --> 00:48:08.658 The sleep maintenance insomnia

NOTE Confidence: 0.87493503

 $00{:}48{:}08.658 \dashrightarrow 00{:}48{:}12.720$ improves is that a special group

NOTE Confidence: 0.87493503

 $00{:}48{:}12.836 \dashrightarrow 00{:}48{:}16.708$ that would tend not to need CPI CPI?

NOTE Confidence: 0.859701

 $00:48:20.000 \rightarrow 00:48:24.090$ So yeah, so absolutely there is.

NOTE Confidence: 0.859701

 $00{:}48{:}24.090 \dashrightarrow 00{:}48{:}29.546$ You know that group of patients who have,

NOTE Confidence: 0.859701

00:48:29.550 --> 00:48:33.710 you know, just you know, sleep,

NOTE Confidence: 0.859701

 $00:48:33.710 \longrightarrow 00:48:36.710$ maintenance, insomnia that is

NOTE Confidence: 0.859701

 $00:48:36.710 \longrightarrow 00:48:39.710$ particularly majorly driven by.

NOTE Confidence: 0.859701

 $00{:}48{:}39{.}710 \dashrightarrow 00{:}48{:}42{.}832$ The Apric episodes they get so we

NOTE Confidence: 0.859701

 $00:48:42.832 \longrightarrow 00:48:45.574$ do have those group of patients

NOTE Confidence: 0.859701

 $00{:}48{:}45{.}574 \dashrightarrow 00{:}48{:}48{.}626$ that you place them on C pap

NOTE Confidence: 0.859701

 $00:48:48.727 \rightarrow 00:48:51.667$ and they will improve our ever.

- NOTE Confidence: 0.859701
- $00:48:51.670 \rightarrow 00:48:55.261$ The problem is we also have a group of
- NOTE Confidence: 0.859701
- $00:48:55.261 \rightarrow 00:48:58.302$ patients that would also present the same
- NOTE Confidence: 0.859701
- $00:48:58.302 \rightarrow 00:49:01.789$ way but would not necessarily improve.
- NOTE Confidence: 0.859701
- 00:49:01.790 --> 00:49:04.898 You know with C pap and that's
- NOTE Confidence: 0.859701
- $00{:}49{:}04{.}898 \dashrightarrow 00{:}49{:}08{.}220$ where the issue of sleep depth as
- NOTE Confidence: 0.859701
- $00{:}49{:}08{.}220 \dashrightarrow 00{:}49{:}11{.}058$ a trait comes into play 'cause.
- NOTE Confidence: 0.859701
- 00:49:11.060 --> 00:49:13.224 Different people have different
- NOTE Confidence: 0.859701
- $00{:}49{:}13.224 \dashrightarrow 00{:}49{:}15.929$ sleep debts and have different
- NOTE Confidence: 0.859701
- $00{:}49{:}15{.}929 \dashrightarrow 00{:}49{:}18{.}100$ tendencies to arouse from sleep.
- NOTE Confidence: 0.859701
- $00:49:18.100 \longrightarrow 00:49:20.200$ When there's a disturbance.
- NOTE Confidence: 0.859701
- $00{:}49{:}20.200 \dashrightarrow 00{:}49{:}25.138$ So I would say again when it comes to that,
- NOTE Confidence: 0.859701
- $00:49:25.140 \longrightarrow 00:49:28.668$ the individual patient and an you know,
- NOTE Confidence: 0.859701
- $00{:}49{:}28.670 \dashrightarrow 00{:}49{:}31.676$ like I mentioned in the presentation,
- NOTE Confidence: 0.859701
- 00:49:31.680 --> 00:49:34.620 that I would follow up this
- NOTE Confidence: 0.859701
- 00:49:34.620 --> 00:49:37.105 patients frequently 'cause you know
- NOTE Confidence: 0.859701

00:49:37.105 -> 00:49:39.739 sometimes you just have to tailor

NOTE Confidence: 0.859701

 $00{:}49{:}39{.}739 \dashrightarrow 00{:}49{:}42{.}750$ things to the individual patient.

NOTE Confidence: 0.8748629

00:49:54.500 --> 00:49:56.515 Alright, well if there's numerous

NOTE Confidence: 0.8748629

00:49:56.515 --> 00:49:59.340 questions and I think I'll let everybody

NOTE Confidence: 0.8748629

 $00:49:59.340 \longrightarrow 00:50:01.554$ know about our talk next week.

NOTE Confidence: 0.8748629

 $00{:}50{:}01{.}560 \dashrightarrow 00{:}50{:}04{.}297$ So we're going to have our another NOTE Confidence: 0.8748629

 $00{:}50{:}04.297 \dashrightarrow 00{:}50{:}06.355$ sleep fellow, Doctor Glenda Bowen,

NOTE Confidence: 0.8748629

 $00{:}50{:}06.355 \dashrightarrow 00{:}50{:}08.905$ who's going to be speaking about

NOTE Confidence: 0.8748629

 $00{:}50{:}08{.}905 \dashrightarrow 00{:}50{:}10{.}792$ narcolepsy and provide a review

NOTE Confidence: 0.8748629

 $00:50:10.792 \longrightarrow 00:50:12.527$ in an update on treatment.

NOTE Confidence: 0.8748629

 $00:50:12.530 \longrightarrow 00:50:14.074$ And in the meantime,

NOTE Confidence: 0.8748629

 $00:50:14.074 \rightarrow 00:50:16.853$ if anyone is interested in joining us

NOTE Confidence: 0.8748629

 $00:50:16.853 \rightarrow 00:50:19.199$ for the Sleep Symposium this Friday,

NOTE Confidence: 0.8748629

 $00:50:19.200 \longrightarrow 00:50:22.032$ please feel free to sign up and thank

NOTE Confidence: 0.8748629

 $00:50:22.032 \rightarrow 00:50:25.078$ you again only for a great presentation.

NOTE Confidence: 0.9051739

 $00:50:26.340 \longrightarrow 00:50:27.130$ Thank you.