WEBVTT

- $1\ 00:00:00.000.000$ --> 00:00:05.830 Goes into the patient with sleep apnea and we worried about bacteria.
- 2 00:00:05.830 --> 00:00:14.878 We worried about pollens and dust and we worried about humidity and all of to deal with all of those things.
- 3 00:00:14.878 --> 00:00:23.370 The machines have built-in filters that really filter the air going into the device.
- 4 00:00:23.370 --> 00:00:30.160 On the other hand, we have worried but way less about what leaves the patient.
- 5 00:00:30.160 --> 00:00:33.692 After all, what actually leaves the patient?
- $6\ 00:00:33.692 \longrightarrow 00:00:38.557$ What leaves the patient and goes into the environment is air,
- $7\ 00:00:38.557 \longrightarrow 00:00:42.246$ which contains carbon dioxide and water vapor,
- $8~00:00:42.246 \longrightarrow 00:00:46.820$ and that's really all we ever thought about.
- 9 00:00:46.820 \rightarrow 00:00:51.304 Well there are so. In order to deal with with the CO2,
- 10 00:00:51.304 --> 00:00:58.073 for example, there are two reasons why all conventionals C pap systems have leaks.
- $11\ 00:00:58.073 --> 00:01:09.328$ They all have built-in leaks and this has been true from Day 1 from 1985 when commercial machines became available and they have a leaks.
- $12\ 00:01:09.328 \longrightarrow 00:01:16.829$ In order to wash away exhaled carbon dioxide to reduce the risk of carbon dioxide retention.
- $13~00{:}01{:}16.829 \dashrightarrow 00{:}01{:}20.796$ And that was the real problem in the early days of of C Pap,
- 14 00:01:20.796 --> 00:01:28.540 we tried to use peep and other systems and what we did was we made the patient sick with ceiling to retention.
- $15\ 00:01:28.540$ --> 00:01:35.578 And the other reason to have a built-in leak into the system is that if the Cpac Machine fails,
- $16\ 00:01:35.578 \longrightarrow 00:01:38.659$ let's save the electrical power goes off,
- $17\ 00:01:38.659$ --> 00:01:42.984 or that gets unplugged, or the machine breaks or whatever.
- 18 00:01:42.984 --> 00:01:44.817 So if the machine fails,
- $19\ 00:01:44.817 --> 00:01:53.103$ the patient can actually breathe and we really haven't thought much about this leak for 30 five years until now.
- $20\ 00:01:53.103 \longrightarrow 00:01:55.156$ With Isco VAT 19 infection.

- 21 00:01:55.156 --> 00:01:57.650 So I started to worry about this,
- $22\ 00:01:57.650 \longrightarrow 00:02:00.239$ so I started to worry about this.
- 23 00:02:00.239 --> 00:02:07.272 A March 10th, 2020 in it and I actually remember the exact date at that time there were zero cases at Yale,
- $24~00:02:07.272 \longrightarrow 00:02:10.985$ New Haven Hospital, and I'll talk more about that later,
- $25\ 00:02:10.985 \longrightarrow 00:02:14.379$ but I was not the only one who is concerned.
- $26\ 00:02:14.379 --> 00:02:22.849$ Um, so this is now a from a website from the Kaiser Permanente.
- $27\ 00{:}02{:}22.849 \dashrightarrow 00{:}02{:}26.919$ When used for pressure support or as a ventilator path,
- $28\ 00:02:26.919 \longrightarrow 00:02:29.753$ they were writing about this official.
- 29 00:02:29.753 --> 00:02:34.913 Since scientists have known for years that when used with a face mask.
- 30 00:02:34.913 --> 00:02:42.616 such alternative devices can possibly increase the spread of infectious disease that are by error sizing.
- $31\ 00:02:42.616$ --> 00:02:47.610 The virus weather used in the hospital or at home.
- $32\ 00:02:47.610$ --> 00:02:52.444 First responders called to the life care center of Kirkland.
- $33\ 00:02:52.444$ --> 00:02:57.122 This is in the state of Washington starting February 24th.
- $34\ 00:02:57.122 --> 00:03:05.763$ Initially used C pap machines to treat residents before it was known that they were infected with the virus.
- 35 00:03:05.763 --> 00:03:17.969 In other words, the first responders had been using C Pap to support patients and they were really infecting themselves and this is at the very beginning.
- $36\ 00:03:17.969 \longrightarrow 00:03:21.659$ Of the epidemic in United States.
- $37\ 00{:}03{:}21.659 \dashrightarrow 00{:}03{:}26.405$ So, so here we're looking at Cove it 19 at my hospital.
- $38\ 00:03:26.405 \longrightarrow 00:03:29.116$ What happened to the data here?
- $39\ 00:03:29.116 \longrightarrow 00:03:32.460$ It sort of has vanished.
- $40\ 00:03:32.460 \longrightarrow 00:03:40.384$ So basically, uh, in the last month there have been 0 cases at the beginning of the month,
- $41\ 00:03:40.384$ --> 00:03:45.784 and as of yesterday I don't know why this is not moving here.

- $42\ 00:03:45.784$ --> 00:03:51.689 Let me just. So that's what you should be looking at right now.
- 43 00:03:51.689 --> 00:03:54.240 Can you see that?
- $44\ 00:03:54.240 --> 00:03:58.080$ Yes, OK. For some reason the there we go,
- $45\ 00:03:58.080 \longrightarrow 00:04:00.459$ the graph just showed up.
- 46 00:04:00.459 --> 00:04:11.981 So about a month ago they were like 0 cases and there was not not a real issue and this is what has happened until yesterday.
- 47 00:04:11.981 --> 00:04:15.823 So by yesterday we went from zero to 328,
- $48\ 00:04:15.823$ --> 00:04:25.060 admitted patients in our hospital and 58 patients were on ventilators yesterday and so this has been.
- 49~00:04:25.060 --> 00:04:29.466 Dramatic change and all of a sudden you know Cove.
- 50 00:04:29.466 --> 00:04:32.490 It has really overtaken all of us,
- 51 00:04:32.490 --> 00:04:38.797 so when we think about patients with an infection or any patient at all,
- $52\ 00:04:38.797 --> 00:04:43.029$ patients produce two types of potential airborne.
- $53\ 00:04:43.029$ --> 00:04:49.762 Um carriers virus carriers. One are droplets and the droplets are produced by coughing.
- $54\ 00:04:49.762 --> 00:05:02.918$ Sneezing droplets are relatively large and they really dropped quickly and I'll give you some data on that later and they also produce what are called bio aerosols and the
- $55\ 00:05:02.918 \longrightarrow 00:05:06.132$ these aerosols are produced by breathing,
- $56\ 00:05:06.132 \longrightarrow 00:05:09.110$ for example, when you go out.
- $57\ 00:05:09.110 \longrightarrow 00:05:14.607$ An an in very cold weather and you see steam emanating from your body.
- 58 00:05:14.607 --> 00:05:17.702 Those are really aerosols and speaking,
- $59\ 00:05:17.702 --> 00:05:26.259$ and these bio aerosols are much smaller and they can remain suspended for much longer periods of time.
- 60 00:05:26.259 --> 00:05:29.394 So looking at particle size is OK,
- $61\ 00:05:29.394 \longrightarrow 00:05:38.980$ so these are the kinds of particle size is that have to do with the respire Tori system in our discussion.
- $62\ 00:05:38.980 --> 00:05:45.341$ So viruses that are really on the bottom left of this are quite small.

63 00:05:45.341 --> 00:05:56.269 Their extremely small and this slide here shows how long it takes for a particle of different sizes to settle to drop and.

 $64\ 00:05:56.269 \longrightarrow 00:06:03.901$ This is a study that looks at how quickly they will settled by 5 feet,

 $65~00:06:03.901 \dashrightarrow 00:06:10.350$ so an extremely small particle of a hot half a micro meter.

 $66\ 00:06:10.350 \longrightarrow 00:06:14.221$ It can stay suspended for 41 hours.

67~00:06:14.221 --> 00:06:27.120 You know that's a long time and one micro Micron up to 12 hours to drop by 5 feet and this is data that comes from OSHA.

68 00:06:27.120 --> 00:06:35.298 And So what we're talking about are particles that can potentially hang around for a long period of time.

69 00:06:35.298 --> 00:06:36.762 So if you look at,

 $70\ 00:06:36.762 \longrightarrow 00:06:41.005$ for example, the droplets, which would be much bigger,

71~00:06:41.005 --> 00:06:46.483 they actually will hang around for somewhere between 5 and 10 seconds.

72 00:06:46.483 --> 00:06:49.954 So basically things coming from the patient,

73~00:06:49.954 --> 00:06:55.278 things coming out of the see pap machine are going to be in the air.

 $74\ 00:06:55.278 \longrightarrow 00:07:02.137$ Depending on their size. So here's what we're going to talk about in the next hour.

 $75\ 00:07:02.137 \longrightarrow 00:07:04.853$ I'm going to present a case of,

76~00:07:04.853 --> 00:07:18.771 uh, of a sleep apnea patients who was infected with COVID-19 and then Robert Thomas is going to present the problems of treating these patients and then at the end

 $77\ 00:07:18.771 \longrightarrow 00:07:25.901$ of this, I hope to have a wide open discussion and you'll be able to ask questions.

 $78\ 00:07:25.901 --> 00:07:28.641$ Bye bye. At the bottom of your screen,

 $79\ 00:07:28.641$ --> 00:07:38.403 it should be able. It should say chat and if you have a question the the chat will allow you to ask a question or if there aren't the Zillion

 $80\ 00{:}07{:}38.403 \dashrightarrow 00{:}07{:}42.184$ people we can have, you actually speak your questions.

 $81\ 00:07:42.184 --> 00:07:46.170$ So here are going to be the rules of engagement for this.

- $82\ 00:07:46.170 --> 00:07:49.538$ Uh, no recording or photographing the interview.
- 83 00:07:49.538 --> 00:07:57.649 You will be shown I'm going to show you an interview of a patient and he has given both written and verbal permission.
- $84\ 00:07:57.649 \longrightarrow 00:07:59.958$ For us to be used in this session,
- 85 00:07:59.958 --> 00:08:01.737 and while we're, you know,
- 86 00:08:01.737 --> 00:08:09.980 during the session itself, I'd like you to mute your microphone and then identify yourself when you are speaking.
- $87\ 00:08:09.980 \longrightarrow 00:08:12.014$ So I bought a month ago.
- $88\ 00:08:12.014$ --> 00:08:18.199 Um, I. I received notification from Yale that I was to work at home.
- $89\ 00:08:18.199 --> 00:08:28.879$ And this is my new office for a variety of reasons I had to set up in the dining room because Yale wanted the background of my what the patient
- $90\ 00:08:28.879 \longrightarrow 00:08:30.956$ saw to look sort of normal.
- 91 00:08:30.956 --> 00:08:38.076 Where's my own office? Upstairs is a total disaster with books all over the place and so forth.
- 92 $00:08:38.076 \longrightarrow 00:08:39.706$ So this is my office.
- $93\ 00:08:39.706 \dashrightarrow 00:08:43.933$ So in order to have this office on my dining room table,
- 94 00:08:43.933 --> 00:08:47.197 I actually resurrected an 11 year old iMac,
- 95 00:08:47.197 --> 00:08:49.200 which to my great surprise.
- $96~00:08:49.200 \dashrightarrow 00:08:53.649$ Actually still work, although I couldn't update a damn thing on it.
- 97 00:08:53.649 --> 00:08:57.091 And I also had an iPad running Kanton.
- 98 00:08:57.091 --> 00:09:10.419 Ocanto is the program that connects to epic in our system and this is where I see the patient and the patient sees me because all of our visitors have
- 99 00:09:10.419 --> 00:09:17.480 becomes telemedicine visits, and I'm guessing that's true for many of you here.
- $100\ 00:09:17.480 --> 00:09:23.659$ So, so I've been doing telemedicine visits for several weeks and then.
- 101 00:09:23.659 --> 00:09:32.618 This patient shows up on my schedule and how did it come about so the patient was set up for a face to face visit?
- $102\ 00:09:32.618$ --> 00:09:36.746 Because because he had not been compliant with Cpac.

103 00:09:36.746 --> 00:09:48.354 Now, for those of you who are not familiar with with insurance companies and see Ms if a patient does not compliant sometime between 31 and 90 days,

 $104\ 00:09:48.354 \longrightarrow 00:09:51.703$ there's a threat to take away the machine.

 $105\ 00:09:51.703 \longrightarrow 00:09:54.539$ But there's much more to the story.

 $106\ 00:09:54.539 \longrightarrow 00:09:57.279$ So this is our patient.

 $107\ 00:09:57.279 \longrightarrow 00:09:59.813$ He's a 40 year old that I saw.

108 00:09:59.813 --> 00:10:03.493 I saw him literally a bottle week ago today.

 $109\ 00:10:03.493 \longrightarrow 00:10:09.870$ Actually 6 days ago, a 40 year old male patient web designer who in November,

110 00:10:09.870 --> 00:10:12.976 November 20th presented with snoring,

 $111\ 00:10:12.976 \longrightarrow 00:10:16.409$ sleepiness and obesity. January the 13th.

112 00:10:16.409 --> 00:10:26.440 He had a home sleep test which showed he had moderate obstructive apnea with the respire Tori event index of 16.9.

 $113\ 00:10:26.440 \longrightarrow 00:10:31.254$ With an 8 year auction saturation of 81%

 $114\ 00:10:31.254 \longrightarrow 00:10:39.860$ and he was prescribed C Pap of between 5 and 15 on auto pap 5 to 50.

 $115\ 00:10:39.860 --> 00:10:50.472$ So January the 30th, he phones up and leaves a message saying that he had been using the machine for six days and it feels like he's suffocating and just

 $116\ 00:10:50.472 \longrightarrow 00:10:52.816$ that he's not getting enough air.

 $117\ 00:10:52.816 \longrightarrow 00:10:56.260$ So we changed the pressure to 10 to 20 auto path,

 $118\ 00:10:56.260 \longrightarrow 00:11:00.947\ 10$ to 20 and then he had on March the second he had an acclimation,

 $119\ 00:11:00.947 --> 00:11:09.423$ visited our clinic and finally they were able to get a pressure that he was comfortable with and the mask was comfortable.

 $120\ 00:11:09.423 --> 00:11:11.559$ And here exactly a month later.

 $121\ 00{:}11{:}11.559 \dashrightarrow 00{:}11{:}18.389$ He's on my video visit schedule because he has not been compliant.

 $122\ 00:11:18.389 --> 00:11:26.977$ So here's the interview and I just wanted to let you know that I received permission from the patient to do this interview.

123 00:11:26.977 --> 00:11:28.293 How did I do this?

124 00:11:28.293 --> 00:11:30.580 So as I mentioned, I had my iPad.

 $125\ 00:11:30.580 \longrightarrow 00:11:34.063$ Can't on my iPad I could see the patient.

126~00:11:34.063 --> 00:11:46.177~I could speak to the patient and I just used my cell phone to actually take a picture of the patient while I was chatting with him and let's just

127~00:11:46.177 --> 00:11:57.432 see if this works. Afternoon Mr Hobart This is Doctor Krieger from the sleep disorder center and I just want to make sure that I have permission to use this

128 00:11:57.432 --> 00:12:08.682 interview for teaching purposes 'cause I think you have a story to tell that people would find very helpful in this crisis so I'm just going to begin to front

 $129\ 00:12:08.682$ --> 00:12:12.856 end here. You were diagnosed with sleep apnea in December.

130 00:12:12.856 --> 00:12:15.403 We stop breathing 16 times an hour.

131 00:12:15.403 --> 00:12:17.879 We started you on C Pap and by the.

 $132\ 00:12:17.879 --> 00:12:21.868$ And we end by the time you got a Mass that work.

 $133\ 00:12:21.868 --> 00:12:26.587$ Shortly thereafter, you developed a pretty bad situation.

 $134\ 00:12:26.587 \longrightarrow 00:12:28.865$ Can you tell us about that?

135 00:12:28.865 --> 00:12:31.878 What happened November not November,

 $136\ 00:12:31.878 \longrightarrow 00:12:34.460\ March\ 12.$

137~00:12:34.460 --> 00:12:40.769 Yeah, absolutely. March the 12th I believe was the day I contracted the Chrome virus.

138 00:12:40.769 --> 00:12:45.666 Um? I I don't know if that was the exact day,

139 00:12:45.666 --> 00:12:53.628 but I believe it was my friend who I had on my safe list basically of friends that I was at that time.

 $140\ 00:12:53.628$ --> 00:13:04.062 They were telling us we could say for being groups of 10 I think it was as long as we were keeping group small and I was with a friend

 $141\ 00{:}13{:}04.062 \dashrightarrow 00{:}13{:}07.899$ that was on my safe list who was later diagnosed.

142 00:13:07.899 --> 00:13:11.970 A few days after that with the virus.

 $143\ 00:13:11.970 --> 00:13:16.381$ The day that he had called me with his results,

144 00:13:16.381 --> 00:13:19.047 I started feeling the first,

 $145\ 00:13:19.047 \longrightarrow 00:13:22.355$ the first symptoms of the provirus,

146 00:13:22.355 --> 00:13:25.240 and that was on that Sunday.

 $147\ 00:13:25.240 \longrightarrow 00:13:27.743$ Let me get that exact page for you here.

148 00:13:27.743 --> 00:13:33.440 That was Sunday. Uh the 15th.

 $149\ 00:13:33.440 \longrightarrow 00:13:37.423$ Send the first symptom was the shortest threat,

 $150\ 00:13:37.423 --> 00:13:45.679$ so you became short of breath and did you continue to use the see pap at that time?

151 00:13:45.679 --> 00:13:49.820 I did not and why was that?

 $152\ 00:13:49.820 --> 00:14:00.260$ Just just because I was scared and I just didn't know what to expect and I in that night on the 15th actually didn't sleep at all.

153 00:14:00.260 --> 00:14:02.572 Not even, not even a minute,

 $154\ 00:14:02.572 \longrightarrow 00:14:06.557$ because I I couldn't bring myself to fall asleep.

 $155\ 00:14:06.557 --> 00:14:09.985$ So I felt as if I wasn't getting up there.

 $156~00{:}14{:}09.985 \dashrightarrow 00{:}14{:}14.019$ So I just sat up and basically watch TV all night.

 $157\ 00{:}14{:}14.019 \dashrightarrow 00{:}14{:}18.639$ And then what happened in with your symptoms?

 $158\ 00:14:18.639 \longrightarrow 00:14:20.807$ Well then they got worse.

 $159\ 00:14:20.807 \longrightarrow 00:14:27.975$ The cost started to develop the next day and receiver started develop the next night.

 $160\ 00:14:27.975 --> 00:14:32.059$ I remember taking my temperature was already 2.7.

161 00:14:32.059 --> 00:14:35.894 And I didn't sleep that next night,

 $162\ 00:14:35.894 --> 00:14:40.120$ but not with the see Pap Machine.

 $163\ 00:14:40.120 --> 00:14:42.850$ And sleep is terrible at night too.

164 00:14:42.850 --> 00:14:44.293 But I did wake up,

165 00:14:44.293 --> 00:14:46.796 uh, probably two or three times.

 $166\ 00{:}14{:}46.796$ --> $00{:}14{:}54.200$ Very dehydrated. And uh, and the Fever remained for the next.

167 00:14:54.200 --> 00:14:58.090 Next, slide five or six days.

 $168\ 00{:}14{:}58.090 \dashrightarrow 00{:}15{:}05.100$ He's very complicated. Did anybody else in your home develop?

 $169\ 00:15:05.100$ --> 00:15:13.360 Um coronavirus infection. Yes, I believe everyone in the in my home.

 $170\ 00:15:13.360 \longrightarrow 00:15:15.316$ Just been through it now.

 $171\ 00:15:15.316 --> 00:15:19.980$ The only other one, only one that has the actual test results.

172 00:15:19.980 --> 00:15:24.409 My wife. Uh, and push she was positive.

 $173\ 00:15:24.409 \longrightarrow 00:15:27.985$ Uh, but it took a long time to get the test.

 $174\ 00:15:27.985 \longrightarrow 00:15:34.980$ I think it was almost Seven days before she heard back from her doctor with the results.

175 00:15:34.980 --> 00:15:43.525 It actually told me as long as I was OK recovering at home to just remain at home and not to get tested.

 $176\ 00{:}15{:}43.525 \dashrightarrow 00{:}15{:}48.769$ Actually you can. And why was your wife tested?

177 00:15:48.769 --> 00:15:51.384 She's just I guess you know,

 $178\ 00:15:51.384 \longrightarrow 00:15:55.623$ neurotic in a way, and in some ways with that.

 $179\ 00:15:55.623 --> 00:15:57.787$ But she really had. No,

 $180\ 00:15:57.787 --> 00:16:04.340$ she she called. Uh, I remember spending the better part of the day on the phone.

 $181\ 00:16:04.340 --> 00:16:07.519$ Different doctors to try to.

 $182\ 00:16:07.519 \longrightarrow 00:16:15.039$ Try to get that text and she finally was able to get the test edit drive thru locations.

 $183\ 00:16:15.039 --> 00:16:17.996$ I think in in Westport or go walk.

 $184\ 00:16:17.996 --> 00:16:26.470$ Maybe it works and you have two kids and you think they have the infection as well.

 $185\ 00:16:26.470 \longrightarrow 00:16:28.918$ I'm leaving having as well yeah,

186 00:16:28.918 --> 00:16:31.145 they like I mentioned before,

 $187\ 00:16:31.145 \longrightarrow 00:16:38.289$ they they were both. Don't seem to recover quicker than immediate they had.

188 00:16:38.289 --> 00:16:42.440 Fever, cough, shortness of breath.

 $189\ 00:16:42.440 --> 00:16:50.980$ Symptoms were not not as intense with them and only lasted for two or three days.

 $190\ 00:16:50.980 \longrightarrow 00:16:55.570$ And they have not been tested.

191 00:16:55.570 --> 00:17:07.690 There are no no. The situation now is that you are getting better and can you tell us how you know that you're getting better?

192 00:17:07.690 --> 00:17:15.530 Well. Here I mean. Like I said yesterday,

193 00:17:15.530 --> 00:17:23.051 there was there was a moment that it was almost a clearly defined moment when I felt the virus just gonna leave.

 $194\ 00:17:23.051 \longrightarrow 00:17:25.119$ My body was almost a.

195 00:17:25.119 --> 00:17:28.295 Spiritual experience, but if you will it was.

 $196\ 00:17:28.295 \longrightarrow 00:17:34.730$ It was really weird. It just left my body and I knew it was over a new at that moment.

197 00:17:34.730 --> 00:17:38.285 Then I was better and then like I said before,

 $198\ 00:17:38.285 \longrightarrow 00:17:40.478$ it was emotional too for me.

 $199\ 00:17:40.478 \longrightarrow 00:17:45.990$ But it was. I didn't need a test that you need any doctor,

 $200\ 00:17:45.990 \longrightarrow 00:17:47.765$ tell me I was better.

201 00:17:47.765 --> 00:17:51.473 I I knew I had that warm feeling back inside.

202 00:17:51.473 --> 00:17:53.732 I got hollow, empty, heavy,

 $203\ 00:17:53.732 --> 00:17:55.910$ just sick feeling was gone.

204 00:17:55.910 --> 00:17:58.828 So in terms of of your sleep apnea,

 $205\ 00{:}17{:}58.828 \rightarrow 00{:}18{:}03.140$ what I'm gonna recommend is for the time being.

206 00:18:03.140 --> 00:18:11.655 For you not to go back onto your cpac machine and the reason is we don't know whether your children actually,

 $207~00{:}18{:}11.655 \dashrightarrow 00{:}18{:}16.300$ whether they had a cold or whether they had something else.

 $208\ 00:18:16.300 \longrightarrow 00:18:24.730$ And the problem with C Pap is that with the circuits it might actually spread the virus in your home.

209 00:18:24.730 --> 00:18:26.843 So for the time being,

 $210\ 00:18:26.843 \longrightarrow 00:18:29.599$ because you're asking is mile.

 $211\ 00:18:29.599 \longrightarrow 00:18:37.644$ Stay off of the see Pap Machine and hopefully everybody is going to recover a example here.

 $212\ 00:18:37.644 \longrightarrow 00:18:40.180$ Well on the road to recovery.

 $213\ 00:18:40.180 \dashrightarrow 00:18:45.385$ So that's what we're going to recommend at this time,

214 00:18:45.385 --> 00:18:48.086 and if anything gets worse,

215 00:18:48.086 --> 00:18:52.520 make sure you instantly contact your doctors,

 $216\ 00:18:52.520 \longrightarrow 00:18:55.373$ OK? Alright, Yeah so so.

 $217\ 00:18:55.373 --> 00:19:01.794$ Anyways, thank you for letting me a video tape this and your story.

 $218\ 00:19:01.794 \dashrightarrow 00:19:07.339$ I think people will find very educational.

- $219\ 00:19:07.339 \longrightarrow 00:19:11.488$ So thanks. Thank you very much Mr.
- 220 00:19:11.488 --> 00:19:13.730 Hobart bye bye.
- 221 00:19:13.730 --> 00:19:18.151 Thank you so so I hope you can hear me now.
- 222 00:19:18.151 --> 00:19:21.467 So I spoke to the patient today.
- $223\ 00:19:21.467 --> 00:19:25.989$ He's better. His wife isn't quite cured yet.
- 224 00:19:25.989 --> 00:19:32.319 The children are 100% back to normal and his wife is maybe 80%
- $225\ 00:19:32.319 \longrightarrow 00:19:35.736$ normal so that was the interview.
- 226 00:19:35.736 --> 00:19:38.449 Now. Now on April the 1st.
- $227\ 00:19:38.449 --> 00:19:44.880$ So we're talking about roughly the date that I saw this patient.
- $228\ 00:19:44.880 \longrightarrow 00:19:47.864$ This came out from the National Academies of Sciences,
- 229 00:19:47.864 --> 00:19:59.707 engineering, and Madison. And this this national resort resource was asked to talk about whether or not patients are infectious.
- 230 00:19:59.707 --> 00:20:03.901 And so I've highlighted parts of the report.
- $231\ 00:20:03.901 \longrightarrow 00:20:08.279$ So this is a letter that went to the president.
- $232\ 00:20:08.279$ --> 00:20:22:369 The task force currently available research suggests the possibility that the virus could be spread by bio aerosols generated directly by patients exhalation.
- $233\ 00:20:22.369 \longrightarrow 00:20:26.289$ And further on it goes and it gives some data.
- 234 00:20:26.289 --> 00:20:42.079 A recent study of the of the Kovid Air socialization at University of Nebraska Medical Center showed widespread presence of viral RNA in isolation rooms where patients with SARS.
- 235 00:20:42.079 --> 00:20:51.112 Over two were receiving care of note air collectors positioned more than six feet from each of the two patients,
- $236\ 00:20:51.112 --> 00:20:54.480$ yielded samples positive for RNA.
- $237\ 00{:}20{:}54.480 --> 00{:}20{:}57.980$ And it's also worth mentioning that they were positive,
- 238 00:20:57.980 --> 00:21:01.190 even though the patients were not coughing.
- 239 00:21:01.190 --> 00:21:09.282 So anecdotally, the highest airborne RNA concentrations were recorded by personal samplers,
- $240\ 00:21:09.282 \longrightarrow 00:21:14.738$ while a patient was receiving oxygen through a nasal cannula.

 $241\ 00{:}21{:}14.738$ --> $00{:}21{:}21.510$ In other words, the nasal cannulas seemed to be spreading the virus as well.

242 00:21:21.510 --> 00:21:31.539 So here's a chronology of how we got to finally talk about this and that takes us to the rest of the presentation.

243 00:21:31.539 --> 00:21:41.972 So on March the 11th I started to think about and inquire about pack circuits that could reduce shedding a virus,

244 00:21:41.972 --> 00:21:45.634 an amazingly it couldn't find anything.

 $245\ 00{:}21{:}45.634 \dashrightarrow 00{:}21{:}50.210$ I contacted a bunch of Artie's representatives.

 $246\ 00:21:50.210 \longrightarrow 00:21:57.810$ Several manufacturers I see all of a path company and this is something that everybody was concerned about.

 $247\ 00{:}21{:}57.810 \longrightarrow 00{:}22{:}02.079$ What they really weren't a whole bunch of answers.

248 00:22:02.079 --> 00:22:04.010 By March 24th eye contact,

 $249\ 00:22:04.010 \longrightarrow 00:22:15.460$ I contacted the doctor Robert Thomas and we discussed the issue and we decided to work on a document highlighting the issue and and a proposed solution.

 $250\ 00:22:15.460 \longrightarrow 00:22:20.722$ So this is a terrific picture of Doctor Thomas and and he's,

251 00:22:20.722 --> 00:22:22.621 uh, and I'm going to.

252 00:22:22.621 --> 00:22:29.092 I'm going to stop my share and hopefully doctor Thomas is gonna take over,

 $253\ 00:22:29.092$ --> 00:22:34.009 and Doctor Thomas is an associate professor of Medicine,

 $254\ 00:22:34.009$ --> 00:22:45.726 Harvard Medical School and. I'm going to pass the baton to him and I'm going to stop the share if I can get my mouse to go into that whole

255 00:22:45.726 --> 00:22:49.105 thing there, OK? So Robert,

256 00:22:49.105 --> 00:22:50.900 it's all yours.

257 00:22:50.900 --> 00:22:58.349

258 00:22:58.349 --> 00:23:01.539 OK, you might have to unmute yourself.

259 00:23:01.539 --> 00:23:08.930 Robert, can you unmute yourself?

 $260\ 00:23:08.930 \dashrightarrow 00:23:18.930$

 $261\ 00:23:18.930 \longrightarrow 00:23:22.140$ Can you hear me now?

 $262\ 00:23:22.140 --> 00:23:28.789$ Perfectly now yeah. OK. So you go ahead.

- $263\ 00:23:28.789 \longrightarrow 00:23:37.986$ OK. So. Oh I made the.
- 264 00:23:37.986 --> 00:23:41.147 I'm not sure I would call a mistake,
- $265\ 00:23:41.147 \longrightarrow 00:23:43.980$ but I took a chance and.
- 266 00:23:43.980 --> 00:23:46.218 Sent out a message on patient site,
- 267 00:23:46.218 --> 00:23:49.250 which is our patient gateway to about.
- 268 00:23:49.250 --> 00:23:52.549 2000 patients of mine.
- $269\ 00:23:52.549 \longrightarrow 00:23:55.309$ Trying to give them some.
- $270\ 00:23:55.309 --> 00:24:01.028\ I$ was only getting some emails about what to do if I get kernel iris and such.
- 271 00:24:01.028 --> 00:24:09.759 So I sent out an email with my thoughts of that time which roughly similar to what I will share with you now.
- $272\ 00{:}24{:}09.759 \dashrightarrow 00{:}24{:}14.380$ And of course, I gotta avalanche of return emails.
- 273 00:24:14.380 --> 00:24:17.449 Um? Made me regret transiently,
- $274\ 00{:}24{:}17.449 \dashrightarrow 00{:}24{:}21.349$ anyway, why did that, but ultimately it was useful in.
- 275 00:24:21.349 --> 00:24:25.090 Um, preventing further anxieties in the group,
- $276\ 00{:}24{:}25.090 \dashrightarrow 00{:}24{:}29.859$ as well as giving some ideas as to what folks where.
- 277 00:24:29.859 --> 00:24:36.950 Concerned about and what what possibilities can be offered for such a patience?
- $278~00{:}24{:}36.950 \dashrightarrow 00{:}24{:}43.569$ If I can do my slide right so the challenges I see are.
- 279 00:24:43.569 --> 00:24:51.248 Common symptom overlap. So we've been doing telemedicine setting up new patients,
- $280\ 00:24:51.248 \longrightarrow 00:24:55.611$ and of course they're going to have operated with symptoms,
- 281 00:24:55.611 --> 00:24:57.720 so no later mouth breathing,
- $282\ 00{:}24{:}57.720 {\:{\mbox{--}}\!>}\ 00{:}25{:}02.309$ dry mouth, stuffy nose, it's allergy season.
- $283\ 00:25:02.309 \longrightarrow 00:25:05.059$ Behind why this is around.
- $284\ 00:25:05.059 --> 00:25:11.736$ So and not everybody can just walk to some spot and get the rabbit test done.
- $285\ 00:25:11.736 --> 00:25:15.690$ Not yet anyway. So we're going to have.
- 286 00:25:15.690 --> 00:25:19.296 C pap related or populated direct effects,

 $287\ 00:25:19.296 \longrightarrow 00:25:23.650$ which can overlap with kernel error symptoms.

 $288\ 00{:}25{:}23.650 \dashrightarrow 00{:}25{:}27.710$ And the usual suspects of allergy and been on viruses.

 $289\ 00:25:27.710 \longrightarrow 00:25:31.194$ Yes, of course. Uh, the issue of dispersion of viral particles,

 $290\ 00:25:31.194 \longrightarrow 00:25:34.170$ which was only touched upon.

 $291\ 00:25:34.170 --> 00:25:40.160$ Uh, I gave some thought about risk stratification because not all apnea patients are the same.

 $292\ 00:25:40.160 \longrightarrow 00:25:43.369$ And what are the optimal alternative therapies?

 $293\ 00:25:43.369 \longrightarrow 00:25:50.509$ And all the messages I got from my patients forced me to spend a bit of time thinking about it and then.

294 00:25:50.509 --> 00:25:53.461 A look in the one of my fellows,

295 00:25:53.461 --> 00:25:56.029 uh? Uh.

 $296\ 00:25:56.029 --> 00:26:02.863$ You know, Austin? Possible idea of inserting a filter into the circuit an literally.

297 00:26:02.863 --> 00:26:05.435 When I was answering his email,

 $298\ 00:26:05.435 --> 00:26:09.230\ I$ got a call from Doctor Krieger and.

 $299\ 00:26:09.230 \longrightarrow 00:26:12.430$ We kind of follow that down a bit.

 $300\ 00:26:12.430 \longrightarrow 00:26:16.039$ Settings for risk stratification I.

301 00:26:16.039 --> 00:26:19.559 Uh, suggest a four risk categories,

 $302\ 00:26:19.559 \longrightarrow 00:26:24.680$ low, intermediate, high and extreme.

 $303\ 00:26:24.680 \longrightarrow 00:26:27.056$ So extreme moriscos somewhat easier.

 $304\ 00:26:27.056 \longrightarrow 00:26:32.660$ Anyone on went later, or who is being treated for respiratory failure.

305 00:26:32.660 --> 00:26:34.405 And many of the you know,

 $306~00{:}26{:}34.405 \dashrightarrow 00{:}26{:}38.031$ several of those who responded to my broadcast email,

 $307\ 00{:}26{:}38.031 \longrightarrow 00{:}26{:}42.150$ actually wear on trilogy's and that type of thing.

 $308\ 00:26:42.150 --> 00:26:47.549$ And they clearly are it really high risk and there's not much room for error there.

 $309\ 00:26:47.549 \longrightarrow 00:26:49.176\ I$ would come to the low risk.

- $310\ 00{:}26{:}49.176 --> 00{:}26{:}54.130$ A younger individuals you can decide for yourself what you would call young.
- $311\ 00:26:54.130 \longrightarrow 00:26:58.230$ But perhaps less than 40.
- $312\ 00{:}26{:}58.230 \dashrightarrow 00{:}27{:}01.580$ And biologically milder summer pure sleep apnea,
- 313 00:27:01.580 --> 00:27:04.730 obstructive apnea ram. Dominant apnea.
- $314\ 00:27:04.730 \longrightarrow 00:27:09.577$ And not severe desaturations I would call it biologically miner.
- $315\ 00:27:09.577 \dashrightarrow 00:27:16.160$ Well, Mila because they may have lots of symptoms for sleep quality and such.
- 316~00:27:16.160 --> 00:27:19.795 But would they be at risk off as long as they don't dry?
- $317\ 00:27:19.795 \longrightarrow 00:27:21.650$ Will they be at any?
- 318 00:27:21.650 --> 00:27:26.299 Terrible risk by not using path as an example.
- $319\ 00{:}27{:}26.299 \dashrightarrow 00{:}27{:}31.103$ Intermediate risk as patients who have substantial apnea,
- $320\ 00:27:31.103 \longrightarrow 00:27:33.970$ those you don't want to.
- $321\ 00:27:33.970 --> 00:27:38.127$ Without without any form of treatment and also have high low gain apia,
- $322\ 00:27:38.127 \dashrightarrow 00:27:41.015$ various types, periodic breathing, complex apnea,
- $323\ 00:27:41.015$ --> 00:27:45.664 central sleep apnea. Uh, but otherwise in decent medical shape,
- $324\ 00:27:45.664 --> 00:27:47.953$ high risk would be heart failure.
- 325 00:27:47.953 --> 00:27:50.511 CEO, PD and oxygen. Maybe Theo paean.
- $326\ 00:27:50.511 --> 00:27:53.869$ Oxygen could be an extreme risk situation.
- $327\ 00:27:53.869 \longrightarrow 00:27:57.140$ So we're asthma by history.
- $328\ 00:27:57.140 \longrightarrow 00:27:59.567$ So now is it really bad sleep apnea?
- $329\ 00:27:59.567 \longrightarrow 00:28:03.170\ I$ have triggered acatic a red meals from apnea.
- $330\ 00:28:03.170$ --> 00:28:14.190 Pregnancy epilepsy. So those are going to really high risk individuals and I was thinking how can I charge my treatment options for such individuals?
- $331\ 00:28:14.190 --> 00:28:18.460$ So it turns out that many of my patients home oximeters.
- 332 00:28:18.460 --> 00:28:21.219 I generally don't ask about that in clinic,

- 333 00:28:21.219 --> 00:28:25.200 but you know what time they have got home oximeters.
- 334 00:28:25.200 --> 00:28:28.279 So some of them will give you a whole night.
- $335\ 00{:}28{:}28.279 \dashrightarrow 00{:}28{:}31.680$ Uh, information. Some of them I just spot checks.
- 336 00:28:31.680 --> 00:28:36.219 But that's a useful thing in this day and age,
- $337\ 00:28:36.219 --> 00:28:40.565$ and I'll show you some examples from Amazon,
- 338 00:28:40.565 --> 00:28:45.240 which I snapped. Snapshots of today,
- $339\ 00:28:45.240$ --> 00:28:52.357 so low risk. I would stop by non supine sleep if their problematic insomnia.
- $340\ 00:28:52.357 --> 00:28:57.720$ Short-term consideration for. A sedative.
- $341\ 00{:}28{:}57.720 \dashrightarrow 00{:}29{:}00.459$ No, it's all paid him or something of that kind.
- $342\ 00:29:00.459 \longrightarrow 00:29:04.930$ It's really just to help them over the period of infection and they get better.
- 343 00:29:04.930 --> 00:29:07.444 And then you know things are fine of course,
- $344\ 00{:}29{:}07.444 \dashrightarrow 00{:}29{:}10.742$ and everyone gets worse and get short of breath and so on.
- $345\ 00:29:10.742 \longrightarrow 00:29:12.923$ And then they deserve to go to the ER.
- $346\ 00:29:12.923 \longrightarrow 00:29:15.640$ They would need to do so.
- $347\ 00:29:15.640 --> 00:29:22.400$ The intermediate risk, and that's the majority of the patience I have.
- 348~00:29:22.400 --> 00:29:27.221 Uhm, you know I would probably ask him to stop the fat.
- 349 00:29:27.221 --> 00:29:34.255 Get them oxygen. No considers all of mine if they're high Lookin apnea and home oximetry,
- $350~00:29:34.255 \longrightarrow 00:29:37.460$ I would consider ideal if they had that option.
- $351~00{:}29{:}37.460 \dashrightarrow 00{:}29{:}40.263$ They will also sleep in a different room.
- 352 00:29:40.263 --> 00:29:42.267 Ideally room with the window.
- $353\ 00:29:42.267 --> 00:29:47.209$ Good aeration. Stay away from their families if they don't have families,
- $354\ 00:29:47.209 \longrightarrow 00:29:49.400$ even better.
- 355~00:29:49.400 --> 00:29:55.079 Uh, extreme risk would be a pretty low threshold for hospitalization.

- 356 00:29:55.079 --> 00:29:56.580 Yeah, and uh, you know,
- $357\ 00:29:56.580 \longrightarrow 00:30:00.708$ data tracking can be done online for at least the trilogy device.
- $358\ 00:30:00.708 \longrightarrow 00:30:03.085\ I$ think. Astral also you can do that.
- $359\ 00{:}30{:}03.085 \dashrightarrow 00{:}30{:}08.329$ And of course. Buy Pepsi and such for the high risk.
- $360\ 00:30:08.329 --> 00:30:13.073$ You know? If there was not such a hospital crunch,
- $361\ 00:30:13.073 --> 00:30:19.490$ you could even make a case of having them admitted their substantial coronal virus related symptoms.
- $362\ 00:30:19.490 \longrightarrow 00:30:23.067$ Otherwise, the state or my would like them to continue past,
- 363 00:30:23.067 --> 00:30:26.204 probably given supplemental oxygen. Uh,
- $364\ 00:30:26.204 \longrightarrow 00:30:29.022$ probably convert to a non vented filter configuration,
- $365\ 00:30:29.022 \longrightarrow 00:30:31.380$ which I will show in a moment.
- $366\ 00:30:31.380 \longrightarrow 00:30:35.351$ At home off symmetry can't get it to the home care companies,
- $367\ 00:30:35.351 \longrightarrow 00:30:38.233$ at least not regional home care or reliable.
- $368\ 00:30:38.233 \longrightarrow 00:30:42.012$ Perhaps there is a home care company or two who may do so,
- $369\ 00{:}30{:}42.012 \dashrightarrow 00{:}30{:}45.599$ but there's too much concern about how to disinfect the.
- 370 00:30:45.599 --> 00:30:50.970 Oximeter the you know. The packaging,
- $371\ 00:30:50.970 --> 00:30:57.029$ you name it. And it'll be certain nice to track the respiratory rate.
- $372\ 00:30:57.029 --> 00:31:00.740$ So this is a kind of configuration which.
- $373\ 00:31:00.740 --> 00:31:04.009\ I$ got a cracker and I came up with.
- 374 00:31:04.009 --> 00:31:13.559 And it's based around the non vented mass configuration which will be using for well 15 plus years of the Beth Israel.
- 375 00:31:13.559 --> 00:31:15.724 For patients with high Logan apnea,
- 376 00:31:15.724 --> 00:31:21.137 which helps to stabilize CO2 by allowing a little bit every breathing so you have a well,
- 377 00:31:21.137 --> 00:31:23.182 this is a native non vented mass,

 $378\ 00:31:23.182 \longrightarrow 00:31:27.299$ but we will learn how to make a lot of mass non vented.

379 00:31:27.299 --> 00:31:36.539 Uh, then you have a little bit of connection to just for ergonomics and you have a safety valve anniversary well and then the see Pap Circuit.

 $380\ 00:31:36.539 --> 00:31:41.720$ Uh, some configurations are less clunky because you have the integrated safety valve.

 $381\ 00:31:41.720 \longrightarrow 00:31:45.200$ Uh, in the mask itself.

 $382\ 00:31:45.200 \longrightarrow 00:31:48.690$ And it turns out there are a large number of.

 $383\ 00:31:48.690 \longrightarrow 00:31:52.040$ Filters are there. And all of them,

 $384\ 00:31:52.040 --> 00:31:57.443$ almost of them. It's not all of them will actually fit quite nicely into the standard tubing.

 $385\ 00:31:57.443 --> 00:31:59.799$ You may or may not either connector.

 $386\ 00:31:59.799 --> 00:32:05.900$ But these kinds of tubings filters are available and.

387 00:32:05.900 --> 00:32:14.592 They are, uh, uh, if you cleared with fairly stringent requirements and demonstration of filtering,

 $388\ 00:32:14.592$ --> 00:32:18.406 and. How do I look at some of the FDA approval letters?

389 00:32:18.406 --> 00:32:20.421 It goes into the site and K pathway,

 $390\ 00:32:20.421 \longrightarrow 00:32:22.670$ but if they approved, let us.

 $391\ 00:32:22.670 \longrightarrow 00:32:27.509$ They have a show that it blocks 99.999%

392 00:32:27.509 --> 00:32:32.589 dusty 9th of bacteria and virus.

393 00:32:32.589 --> 00:32:38.789 Uh, I couldn't, uh, find exactly how they determine that.

394~00:32:38.789 --> $00:32:43.752~\mathrm{But}$ you know, I saw the FBI letters allowing them to make that claim,

 $395\ 00:32:43.752 \longrightarrow 00:32:46.210$ so I'm hoping that.

 $396\ 00:32:46.210 \longrightarrow 00:32:48.599$ You know there was actual data.

 $397\ 00:32:48.599 --> 00:32:53.817$ And there are specifications of desirability specifications,

 $398\ 00:32:53.817 \longrightarrow 00:32:58.436$ so these filters for using ventilators as an example.

 $399\ 00{:}32{:}58.436$ --> $00{:}33{:}03.228$ What flow rate, what resistance to flow is permissible?

- $400\ 00:33:03.228 --> 00:33:08.104$ As an example, if you have a leak of 60 meters a minute,
- 401 00:33:08.104 --> 00:33:10.509 it will bump up your.
- $402\ 00:33:10.509 --> 00:33:14.359$ A pressure drop. The pressure drop is less than actually a centimeter,
- 403 00:33:14.359 --> 00:33:16.907 so it's not like when you apply such a filter,
- $404\ 00:33:16.907 \longrightarrow 00:33:18.535$ you will have 10 centimeters.
- $405\ 00:33:18.535 \longrightarrow 00:33:20.540$ People had dropped to 5 centimeters.
- $406\ 00:33:20.540 \longrightarrow 00:33:22.384$ See that it's not quite that way.
- $407\ 00:33:22.384 \longrightarrow 00:33:23.903$ There will be a small drop,
- $408\ 00:33:23.903 \longrightarrow 00:33:26.140$ but not quite that way.
- 409 00:33:26.140 --> 00:33:29.420 And, Uh, I don't have a patient who.
- 410 00:33:29.420 --> 00:33:35.799 I've done this too because amazingly now my patient so far have tested.
- $411\ 00:33:35.799 \longrightarrow 00:33:38.150$ False do were needed to be tested.
- $412\ 00:33:38.150 \longrightarrow 00:33:39.961$ The cause of the symptoms.
- 413 00:33:39.961 --> 00:33:43.910 I guess it'll it may just be a matter of time.
- $414\ 00:33:43.910 --> 00:33:48.304$ But this configuration potentially useful for not just criminalize,
- $415\ 00:33:48.304 \longrightarrow 00:33:53.103$ but you know influenza. Now the infections of the upper airway.
- $416\ 00{:}33{:}53.103 \dashrightarrow 00{:}33{:}58.109$ We generate elevation you don't keep using C Pap as best you can.
- $417\ 00:33:58.109 \longrightarrow 00:34:00.430$ Well, this is a simple way to.
- $418\ 00:34:00.430 \longrightarrow 00:34:03.730$ Uh, keep the system safer.
- $419\ 00:34:03.730 \longrightarrow 00:34:05.388$ The filters can quite cheap,
- $420~00:34:05.388 \longrightarrow 00:34:08.690$ is less than a Buck or not more than a dollar.
- 421 00:34:08.690 --> 00:34:13.920 Yeah, and uh, you know they can be changed more than once a day if it gets so goofy.
- $422\ 00:34:13.920 \longrightarrow 00:34:18.413$ It is true that when you inhale you will be inhaling through the filter,
- $423\ 00{:}34{:}18.413 \dashrightarrow 00{:}34{:}22.230$ so you probably inhale some of your own particles.
- 424 00:34:22.230 --> 00:34:26.949 But there's probably no way to escape that.

- $425\ 00:34:26.949 \longrightarrow 00:34:30.349$ There's a non rebreathing well.
- $426\ 00:34:30.349 \longrightarrow 00:34:32.550$ Uh, which could be considered?
- $427\ 00:34:32.550 \longrightarrow 00:34:36.697$ Uh, where, uh, it's. It'll be in the same position,
- $428\ 00:34:36.697 \longrightarrow 00:34:38.914$ but there will be a large leak port,
- 429 00:34:38.914 --> 00:34:44.547 meaning the expiration because of the increased pressure inside the circuit will be constant.
- $430\ 00:34:44.547 --> 00:34:50.610$ Expert Tori flow and you'll need to throttle that expert expert Tori flow in some way too.
- $431\ 00:34:50.610$ --> 00:34:58.387 Uh, prevent. Too much liq say this is the configuration in terms of oximeters available.
- $432\ 00:34:58.387 \longrightarrow 00:35:03.599$ I just went this morning and took some snapshots all from.
- $433\ 00:35:03.599 --> 00:35:07.532\ Amazon.$ A Lucky Health Ring Tracker.
- 434 00:35:07.532 --> 00:35:17.867 Bellevue oxygen ring. Tracker all night wrist oxygen monitor via Tom Variable you can see that these are not cheap.
- 435 00:35:17.867 --> 00:35:20.175 199 two 1921 nine, 159 uh,
- 436 00:35:20.175 --> 00:35:24.840 they're pretty. They're kind of serious devices.
- $437\ 00:35:24.840 \longrightarrow 00:35:30.072$ But they will give you a full oximeter.
- $438\ 00:35:30.072 \longrightarrow 00:35:32.949$ Well report in an app.
- $439\ 00:35:32.949 --> 00:35:36.880$ Some of them animated buzz if it drops below a certain level.
- 440 00:35:36.880 --> 00:35:44.030 So it looks like the home oximetry situation may be getting more sophisticated than we actually think.
- $441\ 00:35:44.030 \longrightarrow 00:35:47.670$ No, no, so as examples of those.
- $442\ 00:35:47.670 --> 00:35:52.900$ Download discuss 3 cases which icon for the last couple of weeks.
- $443\ 00{:}35{:}52.900 \to 00{:}35{:}57.809$ So the first one is 50 audio gentleman with quite severe OSA.
- 444 00:35:57.809 --> 00:36:00.918 And Lo and behold, he develops fever,
- 445 00:36:00.918 --> 00:36:04.581 sore throat. And to make matters interesting,
- $446\ 00:36:04.581 --> 00:36:08.400$ he also developed acute diverticulitis.
- $447\ 00:36:08.400 --> 00:36:12.070$ But there's no lower respiratory symptoms at all.

- 448 00:36:12.070 --> 00:36:14.500 Are you starting on uh?
- $449\ 00{:}36{:}14.500 \dashrightarrow 00{:}36{:}20.019$ Uh, augment in by his PCP for the diverticulitis.
- 450 00:36:20.019 --> 00:36:21.855 And, uh, here, so home oximeter.
- $451\ 00:36:21.855 --> 00:36:24.469$ So we track that he moved to an isolated room.
- 452 00:36:24.469 --> 00:36:29.094 Continue tracking. And, uh. You know it.
- 453 00:36:29.094 --> 00:36:31.347 He settled down fairly quickly,
- $454\ 00:36:31.347 \longrightarrow 00:36:34.655$ the fever, maybe? It was acute diverticulitis.
- $455~00:36:34.655 \dashrightarrow 00:36:38.300$ Maybe it was coronavirus will never know.
- 456 00:36:38.300 --> 00:36:41.778 Uh, but uh, if not for the acute diverticulitis,
- $457\ 00:36:41.778 --> 00:36:45.710$ I guess the case of carnivalist stronger.
- $458\ 00:36:45.710 \longrightarrow 00:36:49.130$ But we just don't know.
- 459 00:36:49.130 --> 00:36:52.340 Asking to keep using his see pap.
- $460\ 00:36:52.340 --> 00:36:57.550$ The second patient has. And the more moderate sleep apnea.
- $461\ 00:36:57.550 --> 00:37:00.010$ But get good clinical benefit from it.
- $462\ 00:37:00.010 \longrightarrow 00:37:09.150$ Anne has severe asthma. Every year hospitalization on Indian or late modulation therapy.
- 463 00:37:09.150 --> 00:37:11.456 And he was now starting to have,
- $464\ 00:37:11.456 --> 00:37:13.692$ as usual, summer spring asthma.
- $465\ 00:37:13.692 --> 00:37:16.130$ Flare was coming up.
- 466 00:37:16.130 --> 00:37:26.730 And he was. Really worried because his flair often there will be some fever and upper respiratory tract symptoms and.
- $467\ 00:37:26.730 \longrightarrow 00:37:31.219$ You know there was no simple way to know whether his.
- $468\ 00:37:31.219 \longrightarrow 00:37:36.210$ Lower etc sentence where he asked know whether it was the current virus.
- $469\ 00:37:36.210 \longrightarrow 00:37:38.501$ So I decided we decided that we will,
- 470 00:37:38.501 --> 00:37:46.409 of course, in all these instances I communicate with the primary care physician and we make a kind of conjoined decision.
- $471\ 00:37:46.409 \longrightarrow 00:37:48.800$ He also had an oximeter.
- 472 00:37:48.800 --> 00:37:51.460 Not surprising because of his asthma.

- $473\ 00:37:51.460 --> 00:37:56.266$ So we settled on tracking and I nearly ended up adding oxygen.
- 474 00:37:56.266 --> 00:37:58.554 But then it's flair subsided,
- $475\ 00:37:58.554 \longrightarrow 00:38:02.059$ but he would be a person I would early.
- 476 00:38:02.059 --> 00:38:05.039 Not wanting to stop. Fat,
- $477\ 00:38:05.039 \longrightarrow 00:38:06.960$ but I would add oxygen.
- 478 00:38:06.960 --> 00:38:09.449 Uh, and uh?
- $479\ 00:38:09.449 \longrightarrow 00:38:16.590$ No, no, maybe I would use a non vented option transiently for filtering.
- $480\ 00:38:16.590$ --> 00:38:20.889 And then I will patiently with a physician pediatrician.
- $481\ 00:38:20.889 \longrightarrow 00:38:24.929$ Uh, interesting story here. That MA.
- $482\ 00{:}38{:}24.929 \dashrightarrow 00{:}38{:}31.590$ About 20 years ago, but he had substantial vegetables and lap near.
- $483\ 00{:}38{:}31.590 \dashrightarrow 00{:}38{:}36.581$ Um? Non vented mass configuration actually work quite well,
- $484\ 00:38:36.581 \longrightarrow 00:38:39.210$ but it made him feel little odd.
- $485\ 00:38:39.210 \longrightarrow 00:38:42.905$ Uh, so he just using a rented mask at the low pressure side,
- $486\ 00:38:42.905 --> 00:38:46.380$ sleeping. Here's some degree of residual apnea.
- $487\ 00:38:46.380 \longrightarrow 00:38:49.264$ We tried using low dose episode made in the past.
- $488\ 00:38:49.264 --> 00:38:53.369$ He developed vasculitic computer skin vasculitis.
- 489 00:38:53.369 --> 00:38:55.045 But he but he, you know,
- $490\ 00:38:55.045 \longrightarrow 00:38:57.255$ specially called me up and said,
- 491 00:38:57.255 --> 00:39:00.380 what should I do if I get symptoms?
- $492\ 00:39:00.380$ --> 00:39:05.099 Uh I said, well I would probably just use oxygen.
- 493 00:39:05.099 --> 00:39:07.034 Uh, with the filter configuration,
- $494\ 00:39:07.034 \longrightarrow 00:39:08.750$ and if he can't tolerate that,
- $495\ 00:39:08.750 \longrightarrow 00:39:11.619$ stop the path and just use oxygen.
- $496\ 00:39:11.619 \longrightarrow 00:39:15.065$ Now the patient with all appliance who said what should I do?

497~00:39:15.065 --> 00:39:19.409 I said well just use soap and water on your plants everyday.

 $498\ 00:39:19.409 --> 00:39:22.385$ He also has some upper every sentence,

 $499\ 00{:}39{:}22.385 --> 00{:}39{:}27.300$ but. Has not been tested and doesn't look like.

500 00:39:27.300 --> 00:39:29.663 Uh, once testing is more freely available,

 $501\ 00:39:29.663 \longrightarrow 00:39:32.960$ will probably have patience with my symptoms calling us up,

 $502\ 00:39:32.960 \longrightarrow 00:39:35.659$ but whether we will get to that?

 $503\ 00:39:35.659 --> 00:39:38.210$ Quickly I just don't know.

 $504\ 00:39:38.210 --> 00:39:46.829$ So these are my 3 cases and hopefully none of the patients on ventilator.

 $505\ 00:39:46.829 --> 00:39:53.940$ Melanie has a bunch of patients on ventilator and hopefully none of them will develop compatible symptoms.

 $506\ 00:39:53.940 \longrightarrow 00:39:56.760$ And that was all I had to say.

507 00:39:56.760 --> 00:40:01.849

508 00:40:01.849 --> 00:40:06.179 Myself here, can you hear me now?

509 00:40:06.179 --> 00:40:09.335 OK so I can you guys if you can hear me,

 $510\ 00:40:09.335$ --> 00:40:19.956 so I'm so there's a bunch of questions in the chat and what will do is will go through the questions and those of you who want to pipe in

 $511\ 00:40:19.956$ --> 00:40:26.949 pipe in but just identify yourself and so we will go through the questions.

512 00:40:26.949 --> 00:40:29.110 I have one question here.

 $513\ 00:40:29.110 --> 00:40:35.338$ Should we move to a oral appliances more at this time the answer is maybe,

 $514\ 00:40:35.338$ --> 00:40:45.306 but not really. And the reason is most dental offices are not going to be doing dental appliances during this pandemic.

 $515\ 00{:}40{:}45.306 \dashrightarrow 00{:}40{:}49.460$ I've spoken to some dentists about this question.

516 00:40:49.460 --> 00:40:57.599 Might be what if a patient develops kovid and is already on an appliance an the appliances breaks?

 $517\ 00:40:57.599 \longrightarrow 00:41:03.150$ Of the dentist is not gonna bring him in because believe it or not,

 $518\ 00:41:03.150$ --> 00:41:10.090 some of the dentist that I know can't get protection and so they would be in trouble.

519 00:41:10.090 --> 00:41:11.760 So what they did say,

520 00:41:11.760 --> 00:41:24.260 however, is that the mold the information may be at the fabricator and they may be able to make another appliance based on the model that they already have.

 $521\ 00:41:24.260 \longrightarrow 00:41:27.583$ Next question was, how old were the patients Sheldon?

 $522\ 00:41:27.583 \longrightarrow 00:41:30.030$ I think there were five and 10.

 $523\ 00:41:30.030 \longrightarrow 00:41:32.543$ Uh, and they are much better now.

524 00:41:32.543 --> 00:41:34.465 Uh, next question, is it?

525 00:41:34.465 --> 00:41:43.114 Uhm, can you just ask a patient to use C Pap and his or her own room and not allow family members into that bedroom?

 $526~00{:}41{:}43.114 \dashrightarrow 00{:}41{:}46.735~\mathrm{I}$ don't think that would make a huge difference.

 $527~00:41:46.735 \longrightarrow 00:41:50.063$ I think it would be dangerous no matter Wat.

528 00:41:50.063 --> 00:41:53.094 Um, just because being in your own room,

529 00:41:53.094 --> 00:42:00.559 I know that some of the celebrities they've sort of put themselves into a hibernation type situation.

 $530\ 00:42:00.559 \longrightarrow 00:42:04.615$ At home, thinking that that's going to separate them,

531 00:42:04.615 --> 00:42:07.695 but in fact with common heating systems,

 $532\ 00{:}42{:}07.695 --> 00{:}42{:}12.425$ God knows what we don't know what happens to to these viruses.

533 00:42:12.425 --> 00:42:15.280 So let's move down to more questions.

 $534\ 00:42:15.280 \longrightarrow 00:42:18.659$ No one question. This is a terrific one from.

535 00:42:18.659 --> 00:42:22.090 From one of the attendings Here at Yale,

 $536\ 00:42:22.090 --> 00:42:31.043$ do you think C pap spread the influenza virus is badly in the past and the answer is probably that's true.

 $537\ 00:42:31.043 \longrightarrow 00:42:34.699$ We just didn't really think about it.

 $538\ 00:42:34.699 \longrightarrow 00:42:40.989$ Next question with the risk be the same for all interfaces.

539 00:42:40.989 --> 00:42:43.829 Robert, what do you think about that?

540 00:42:43.829 --> 00:42:50.820 So it probably varies by the amount of leak.

 $541\ 00:42:50.820 \longrightarrow 00:42:56.389$ So for the. The full face mask clearly have a higher leak,

 $542\ 00:42:56.389 \longrightarrow 00:42:59.179$ and the higher the pressure.

 $543\ 00:42:59.179 \longrightarrow 00:43:02.840$ The higher the you know.

544 00:43:02.840 --> 00:43:04.139 What do you call it?

 $545\ 00:43:04.139 \longrightarrow 00:43:08.659$ The? What League do they call it for getting the term right now?

546 00:43:08.659 --> 00:43:11.806 Uh, they see when a chart from Phillips,

 $547\ 00:43:11.806 --> 00:43:14.568$ an rationally Robert. That's right,

548~00:43:14.568 --> 00:43:25.110 they their charts from Phillips and rest Med way to tell you how much leak is OK based on the mask and based on the pressure so.

 $549\ 00{:}43{:}25.110 \dashrightarrow 00{:}43{:}31.809$ If you have, you know 30 versus 40 liters per minute across.

 $550\ 00:43:31.809 \longrightarrow 00:43:34.179$ A night that's a lot of leak.

 $551\ 00:43:34.179 --> 00:43:37.101$ The difference would be quite a bit,

 $552\ 00:43:37.101 --> 00:43:41.199$ so you probably will have a difference in.

 $553\ 00:43:41.199 --> 00:43:46.900$ In what mask used the cuter nasal pillows have the least leak?

 $554\ 00:43:46.900 \longrightarrow 00:43:51.889$ And the classic full face mask has the biggest boots right now.

 $555\ 00:43:51.889 \longrightarrow 00:43:54.047$ OK, so let's see the next question.

 $556~00{:}43{:}54.047 \dashrightarrow 00{:}43{:}58.364$ Could I just follow up on a question I asked earlier that you answered?

 $557\ 00:43:58.364 \longrightarrow 00:44:01.721$ Dentists offices are closed. You're correct about that,

558~00:44:01.721 --> 00:44:05.556 but 36% of dentists who practice dental sleep medison are open.

 $559\ 00:44:05.556 \longrightarrow 00:44:08.193$ Where is the average dentist who just does?

560 00:44:08.193 --> 00:44:14.668 Dentistry is closed, but there's only about maybe 4 or 5000 dental Sleep Medicine providers in the country,

561~00:44:14.668 --> 00:44:23.000~so~36% of them are open and companies like persona sleep technologies have a CAD Cam process do store the digital information of the files.

562 00:44:23.000 --> 00:44:25.063 And so they could, as you suggested,

 $563\ 00:44:25.063 --> 00:44:27.853$ make another one. Just want to get that in there,

564 00:44:27.853 --> 00:44:30.197 for, you know, thank thank you very much.

 $565~00{:}44{:}30.197 \dashrightarrow 00{:}44{:}34.340$ So uh, let's see, could I just go along the same line?

566 00:44:34.340 --> 00:44:36.295 I'm not, I'm not in our boil.

 $567\ 00:44:36.295 \longrightarrow 00:44:39.753$ There are boiling by temporary appliances.

568 00:44:39.753 --> 00:44:49.077 It can also be utilized that are made by a number of different companies so they can actually be shipped to the patients home and the patient.

 $569\ 00:44:49.077 --> 00:44:53.150$ There's instructions and with the assistance remotely.

570~00:44:53.150 --> 00:45:00.679 And this they can walk through the process of making the appliance the mic app,

571 00:45:00.679 --> 00:45:04.820 or zip, uh, there's store free their energy.

 $572\ 00:45:04.820 \longrightarrow 00:45:11.789$ Provide some level of intervention while waiting till all this passes.

 $573\ 00:45:11.789 \longrightarrow 00:45:23.079$ Yeah, OK, so now there was a question having to do with family members and this question came up a couple of times.

574~00:45:23.079 --> 00:45:31.981 So one of the things that I think would be helpful to add a notation's room if they can get it is a really good HEPA filtering system and

 $575\ 00:45:31.981 \longrightarrow 00:45:35.516$ their portable ones that are out there that aren't bad,

 $576\ 00:45:35.516 \longrightarrow 00:45:37.347$ and I think that would help.

577 00:45:37.347 --> 00:45:39.304 It wouldn't solve the problem,

578 00:45:39.304 --> 00:45:42.139 but it would help.

 $579\ 00:45:42.139 --> 00:45:44.702$ Uh, let's see what we have here.

 $580~00{:}45{:}44.702 \dashrightarrow 00{:}45{:}47.731$ Let's you underestimate or his friend,

581 00:45:47.731 --> 00:45:50.371 you have to change your settings.

 $582\ 00:45:50.371 \longrightarrow 00:45:52.467$ Yeah, so um, that is true.

583~00:45:52.467 --> 00:45:56.815 So a doctor pelayo mentioned that on a rest Med system,

584 00:45:56.815 --> 00:46:09.163 there's actually a setting in the machine itself where you can tell the see Pap machine that I'm adding a filter to your machine and it compensates for it and

 $585\ 00:46:09.163 --> 00:46:13.110$ related to that I actually spoke to a couple of.

586 00:46:13.110 --> 00:46:26.380 Of Res Med Engineers in Australia last night and they have been testing this kind of a configuration similar to what we have been using.

587 00:46:26.380 --> 00:46:28.931 That that doctor Thomas showed,

 $588\ 00:46:28.931 \longrightarrow 00:46:37.938$ and they and basically the they were testing pressures at different pressures and with different configurations.

589 00:46:37.938 --> 00:46:48.380 And the there was very little degradation of the either a see pap or a Bipap machine with added filters and it worked fairly well.

590~00:46:48.380 --> 00:46:56.909 The other thing I want to mention is that you can add oxygen into the system as as Doctor Thomas mentioned.

 $591~00:46:56.909 \dashrightarrow 00:47:01.585$ And there are different kinds of ways you can add oxygen.

 $592\ 00:47:01.585 --> 00:47:09.728$ You can also also add a an adapter that allows you to connect a metered dose inhaler if the patient,

 $593\ 00:47:09.728$ --> 00:47:15.128 for example, ends up on a BI level in an intensive care like unit.

594 00:47:15.128 --> 00:47:17.949 you can actually add, for example,

595 00:47:17.949 --> 00:47:20.932 albuterol from metered dose inhaler,

 $596~00{:}47{:}20.932 \to 00{:}47{:}27.139$ or you can actually possibly even be able to add a nebuliser into the system.

597 00:47:27.139 --> 00:47:37.900 So one of the things that that the engineers from rest man told me it was in Wukan very often and this is not for sleep apnea patients.

 $598\ 00:47:37.900 --> 00:47:43.438$ This was with patients just in general when they ran out of ICU beds,

599 00:47:43.438 --> 00:47:47.420 they would do noninvasive ventilation using.

600 00:47:47.420 --> 00:47:49.666 C pap machines, Bipap Machines,

601 00:47:49.666 --> 00:47:59.985 whatever machines they kind of had and just added viral filters if they could find them wherever an and whether or not that worked or didn't work.

 $602~00{:}47{:}59.985 \dashrightarrow 00{:}48{:}05.650$ We don't really know, but this is something that actually did happen.

 $603\ 00:48:05.650 \longrightarrow 00:48:10.172$ So then we have another question of a patient lives alone,

604 00:48:10.172 --> 00:48:13.161 so I think if the patient lived alone,

 $605\ 00:48:13.161 \longrightarrow 00:48:16.458$ it's probably OK for them to use the pack.

 $606~00{:}48{:}16.458 \dots > 00{:}48{:}21.440$ My experience with this one patient and other people that I know.

607 00:48:21.440 --> 00:48:36.902 Uh. Personally, who have chronic virus infection take off like crazy and when you're coughing like crazy trying to stay on a see Pap Machine is really really difficult so

 $608\ 00:48:36.902 --> 00:48:42.019$ let's see. So that was another question.

609 00:48:42.019 --> 00:48:42.820 All right?

610 00:48:42.820 --> 00:48:44.860

611 00:48:44.860 --> 00:48:50.414 So another question, can this be used in an ICU?

 $612\ 00:48:50.414 \longrightarrow 00:48:54.780$ The answer is probably yes and No.

 $613~00{:}48{:}54.780 \dashrightarrow 00{:}48{:}57.849$ Which isn't a direct answer to the question.

 $614\ 00:48:57.849 --> 00:49:02.487$ I think if you're gonna be using non invasive ventilation using uh,

615 00:49:02.487 --> 00:49:04.806 uh for example a bilevel machine,

 $616~00{:}49{:}04.806 \dashrightarrow 00{:}49{:}08.626$ you actually have to know what you're doing in the use,

 $617\ 00:49:08.626 \longrightarrow 00:49:10.878$ and you need to have a response.

 $618\ 00:49:10.878 \longrightarrow 00:49:15.175$ Tory therapist that understands what's going into the patient,

619 00:49:15.175 --> 00:49:17.494 what's coming out of the patient,

 $620\ 00:49:17.494 \longrightarrow 00:49:19.677$ the hospital by level machines,

 $621\ 00:49:19.677 --> 00:49:22.338$ you know. They usually have two limbs,

622 00:49:22.338 --> 00:49:24.929 they have an in, and they have an out.

 $623\ 00:49:24.929$ --> 00:49:30.637 So there you can add filters an and you'll increase safety for the staff.

 $624\ 00{:}49{:}30.637 \dashrightarrow 00{:}49{:}35.418$ With a regular BI level machine that's normally used at home,

- $625\ 00:49:35.418 --> 00:49:41.123$ you would actually need to make sure that everything is working properly.
- 626 00:49:41.123 --> 00:49:43.978 You have filters in the right place,
- $627\ 00:49:43.978 --> 00:49:50.760$ otherwise you're going to leave the the nurses and the staff in trouble.
- $628~00:49:50.760 \longrightarrow 00:49:56.510$ So do you wanna answer some of the next few questions?
- 629 00:49:56.510 --> 00:49:59.219 Um, Robert.
- $630\ 00:49:59.219 \longrightarrow 00:50:01.833$ So let's talk about the interface.
- 631 00:50:01.833 --> 00:50:05.041 Oh yeah, so there's one question about uh,
- 632~00:50:05.041 --> 00:50:09.998 HM ES. Um, so it says there are some studies and I see you,
- $633\ 00{:}50{:}09{.}998 \dashrightarrow 00{:}50{:}14.329$ but H me. So what are your thoughts about the HM S?
- 634 00:50:14.329 --> 00:50:16.110 So that the Hitcher Maine,
- $635\ 00:50:16.110 --> 00:50:19.539$ as long as it has been rated for a filter function,
- $636\ 00:50:19.539 \longrightarrow 00:50:23.563$ is fine. So there hicham ease which have a filtering rating.
- $637\ 00:50:23.563 \longrightarrow 00:50:27.322$ And the histamines which do not have a filtering rating.
- $638\ 00:50:27.322 --> 00:50:31.809$ So if it's rated to be a filter also it should be fine.
- $639\ 00:50:31.809 \longrightarrow 00:50:36.219$ OK. So let's see here.
- $640\ 00:50:36.219 --> 00:50:37.943$ Let's see what are your thoughts.
- 641 00:50:37.943 --> 00:50:39.615 I'm using a filtered H me three.
- $642\ 00:50:39.615 \longrightarrow 00:50:41.980\ OK$, so that question we've answered.
- $643\ 00:50:41.980 \longrightarrow 00:50:48.309$ Then we have. From UK.
- $644\ 00:50:48.309 \longrightarrow 00:50:53.000$ How does how does humidification effect?
- $645\ 00:50:53.000 -> 00:51:00.389$ The filters life, these are all these filters really gotta change them once a day at least if not.
- $646\ 00:51:00.389 --> 00:51:02.539$ More frequently if it looks.
- 647 00:51:02.539 --> 00:51:05.579 Gunky, it would have to be changed.
- $648~00{:}51{:}05.579 \dashrightarrow 00{:}51{:}14.657$ Uh, that space, uh in the specifications examples I saw I saw things like 20 eight 3335ML.

649~00:51:14.657 --> 00:51:22.519 So it's a pretty small amounts of added Dead Space within the filter.

650 00:51:22.519 --> 00:51:24.309 Hum.

651 00:51:24.309 --> 00:51:27.152 Yep, there's a leak around the mass,

 $652\ 00:51:27.152 \longrightarrow 00:51:30.380$ so these are definitely not a full proof.

653 00:51:30.380 --> 00:51:34.222 You can't. Having zero leak is almost impossible.

 $654\ 00:51:34.222 --> 00:51:40.751$ This is more a mitigation strategy if I may use the term used frequently these days,

655 00:51:40.751 --> 00:51:42.981 it's not a perfect strategy,

 $656\ 00:51:42.981 --> 00:51:53.583$ and I'd like to say something about that that the hospital grade masks are not as good as the masks that are used for for patients homes.

 $657\ 00:51:53.583 \longrightarrow 00:51:56.579$ So the hospital masks are much cheaper.

 $658\ 00:51:56.579 \longrightarrow 00:52:03.074$ Uh, and they simply do not work as well and and so even in the hospital setting,

 $659\ 00:52:03.074 --> 00:52:14.460$ if you can get one of them asks that works one of the non vented masks for example of a quadrel air or something like that that's non vented.

 $660\ 00:52:14.460 --> 00:52:19.349$ You're better off than the traditional hospital mask.

 $661\ 00:52:19.349 --> 00:52:24.206$ Go ahead, Robert. Ideally, of course we should use a order nasal mask.

662 00:52:24.206 --> 00:52:25.918 If you use a nasal mask,

 $663\ 00:52:25.918 --> 00:52:30.228$ anytime the patient opens amount talks out it's going to come,

 $664\ 00:52:30.228 \longrightarrow 00:52:32.976$ so that's definitely so. Uh,

 $665\ 00{:}52{:}32.976 \dashrightarrow 00{:}52{:}38.960$ so go says that data suggests that UV light kills covered.

 $666\ 00:52:38.960 \longrightarrow 00:52:45.260$ Although FDA warning on so clean which comes ozone?

 $667\ 00:52:45.260 \longrightarrow 00:52:50.849$ So it turns out that the UV you need to.

 $668\ 00:52:50.849 --> 00:52:56.797$ Truly kill viruses and sterilizes pretty a pretty powerful stuff like you can have it.

 $669\ 00:52:56.797 \longrightarrow 00:52:59.570$ You know bounds on to humans.

670 00:52:59.570 --> 00:53:02.170 And it is very effective.

 $671\ 00:53:02.170 \longrightarrow 00:53:07.420$ Um? Whether they would be a UV system good enough to kill viruses,

 $672\ 00{:}53{:}07.420$ --> $00{:}53{:}11.550\ \mathrm{I}$ know there is a so clean accommodative which uses UV.

 $673\ 00:53:11.550 \longrightarrow 00:53:14.655$ But there is not good data available on,

674 00:53:14.655 --> 00:53:17.456 uh, you know what controls are used.

 $675~00{:}53{:}17.456 \dashrightarrow 00{:}53{:}22.239$ They really check whether it killed viruses or not.

 $676\ 00:53:22.239 --> 00:53:26.039$ Uh, it would be certainly theoretically possible to.

 $677\ 00:53:26.039 --> 00:53:32.692$ Uh. For like some kind of UV light mechanism to even the filter area,

 $678\ 00:53:32.692 --> 00:53:43.286$ but will just make the whole thing so complex in any League of UV light at that intensity you know will cause skin burns as an example,

 $679\ 00:53:43.286 \longrightarrow 00:53:46.780$ so. Oh, you mean like uh?

 $680\ 00:53:46.780 --> 00:53:50.530$ You know? Would be needed to handle with care,

 $681\ 00:53:50.530 \longrightarrow 00:53:54.239$ and of course the cleaning up after its use is nice,

 $682\ 00:53:54.239 \longrightarrow 00:53:56.409$ but soap and water would work.

683 00:53:56.409 --> 00:53:59.699 Definitely an while. You're actually using it.

 $684\ 00:53:59.699 \longrightarrow 00:54:02.239$ It was still spew out.

 $685\ 00:54:02.239 --> 00:54:07.119$ Hey so I just wanna answer rithwik.

 $686\ 00:54:07.119 \longrightarrow 00:54:15.981$ Question in Connecticut there so far behind in testing that it's it's less than academic.

 $687\ 00:54:15.981$ --> 00:54:28.780 Unfortunately, the patients who the only people that seem to be getting quick test results around here are our medical personnel.

 $688\ 00:54:28.780 \longrightarrow 00:54:35.771$ Patience sometimes have to wait for like a week or two to get results.

 $689\ 00:54:35.771$ --> 00:54:50.057 Rafael Esquer. Uh, please follow up about the mask in can I please go ahead and rock go ahead like Oh my God read background you got there and your

 $690\ 00:54:50.057$ --> 00:54:57.494 honor. Factor cricket doctor Thomas to quick thing I understand intentional leak issue with the nasal pillows is less than with the full face.

691 00:54:57.494 --> 00:55:04.559 However, patients in practice, if you open your mouth wouldn't full face mask serve some form of barrier and switch as a mitigation strategy.

692 00:55:04.559 --> 00:55:10.639 Switchmode full face because at least they want to have their mouth dropping open during the night periodically.

693 00:55:10.639 --> 00:55:19.360 I mean definitely voting full face mask is best absolutely because yeah well fitting full face mask.

 $694\ 00:55:19.360 --> 00:55:25.072$ Automation mask is definitely better than the nasal because with a nasal across the whole night,

 $695\ 00:55:25.072$ --> 00:55:28.949 I'm absolutely sure people open the mouse intermittently.

 $696\ 00:55:28.949 \longrightarrow 00:55:30.442$ Uh, and uh, they will be,

697 00:55:30.442 --> 00:55:36.007 you know you want a few minutes of that will be enough to God knows billions of viral particles,

698 00:55:36.007 --> 00:55:38.920 I mean. And in those little inline photos,

 $699\ 00:55:38.920$ --> 00:55:42.255 Hudson in line filters, I've noticed it prices jacked up on the Internet.

 $700\ 00:55:42.255 --> 00:55:44.650$ You think we should be changed every day?

 $701\ 00:55:44.650 \dashrightarrow 00:55:48.460$ Not once a week. That's the formula recommended.

 $702\ 00:55:48.460$ --> 00:55:53.750 Well, that's a written recommendation without any reference or data.

703 00:55:53.750 --> 00:56:02.590 Unfortunately, uh, anything in half demand is going to go up today I I bought.

704 00:56:02.590 --> 00:56:04.673 About a week and a half,

 $705~00{:}56{:}04.673 \dashrightarrow 00{:}56{:}09.592$ but almost two weeks ago I I purchased some of these mass.

 $706~00:56:09.592 \dashrightarrow 00:56:14.927$ Sorry these filters of them and they were still at basic price.

707 00:56:14.927 --> 00:56:17.012 They hadn't gone up yet,

708 00:56:17.012 --> 00:56:19.539 but now I suppose it's up.

 $709\ 00:56:19.539 \longrightarrow 00:56:21.710$ I'd go ahead.

710 00:56:21.710 --> 00:56:26.001 Our antiviral filters helpful at all with standard vented mass.

711 00:56:26.001 --> 00:56:31.969 Probably not, because the pixelation would go out through the pores into the atmosphere.

 $712\ 00:56:31.969 \longrightarrow 00:56:34.309$ There won't be enough of a.

 $713\ 00:56:34.309 --> 00:56:37.780$ Uh, back slow to make much of a difference.

 $714\ 00:56:37.780 \longrightarrow 00:56:41.907$ Coughing will make a oral appliance therapy impossible.

715 00:56:41.907 --> 00:56:45.559 Difficult, but not impossible, I suppose.

716 00:56:45.559 --> 00:56:48.434 Hum. The old appliances today,

717 00:56:48.434 --> 00:56:51.860 uh, you know, they do allow you to open him out.

718 00:56:51.860 --> 00:56:55.110 It's not like you're. You know?

 $719\ 00:56:55.110 --> 00:57:05.188$ Trap shut. Would be good to open the nasal airway with a nasal dilator in conjunction with all appliance of a mild sleep apnea.

720 00:57:05.188 --> 00:57:15.800 I think so. Reasonable mitigation strategy by putting a fan near window to make a somewhat negative pressure room.

721 00:57:15.800 --> 00:57:22.206 Play. It's keep the window open is probably good enough.

 $722\ 00:57:22.206$ --> 00:57:28.159 I'm guessing no. He put a sign near the window creating almost an exhaust like situation.

 $723\ 00:57:28.159 \longrightarrow 00:57:31.239$ In theory, that could be beneficial.

724 00:57:31.239 --> 00:57:32.681 But a good open window,

 $725\ 00:57:32.681 \longrightarrow 00:57:35.806$ and today at this temperature you can keep it open,

 $726\ 00:57:35.806 \longrightarrow 00:57:38.099$ at least in much of the US.

 $727\ 00:57:38.099 --> 00:57:44.150$ Although it will get hot down South and you might in fact your entire neighborhood.

728 00:57:44.150 --> 00:57:48.050 That's possible, I suppose. A good idea too,

729~00:57:48.050 --> 00:57:57.630 sorry, increase risk of pneumonia with C Pap and cover patients with only mild upper area symptoms.

 $730\ 00:57:57.630 \longrightarrow 00:58:04.152$ We, I'm sure all of us get asked that by patients who have sinusitis or any upper airway.

731 00:58:04.152 --> 00:58:08.199 Do we force bugs down into the lungs with C pap?

 $732\ 00:58:08.199 --> 00:58:10.545$ I'm sure we actually do force bugs down,

 $733\ 00:58:10.545 \longrightarrow 00:58:13.179$ but the lungs normally.

 $734\ 00:58:13.179 --> 00:58:19.619$ You know cleric. Um, there isn't like an epidemic of.

735 00:58:19.619 --> 00:58:25.739 Bacterial pneumonia is infections in patients using C Pap at least.

 $736\ 00:58:25.739 \longrightarrow 00:58:27.478$ Nothing published as far as I know.

 $737\ 00:58:27.478 --> 00:58:31.420$ If it's occurring, it certainly occurring in a more subtle way.

 $738\ 00:58:31.420 \longrightarrow 00:58:36.518$ But it, but almost certainly there will be some sitting in the airway.

 $739\ 00:58:36.518 \longrightarrow 00:58:40.612$ If you have free floating particles in the upper airway,

 $740\ 00:58:40.612 --> 00:58:45.099$ and you of course have this air coming in.

 $741\ 00:58:45.099 \longrightarrow 00:58:49.659$ So I think their plan.

 $742\ 00:58:49.659 \longrightarrow 00:58:58.679$ Is there a plan to obtain an objective analysis of air solution mitigation by the mask filter configuration you showed us today?

 $743\ 00:58:58.679 \longrightarrow 00:59:02.800$ It would be nice if we can do that.

744 00:59:02.800 --> 00:59:04.782 A corner versus, Uh, I mean,

 $745\ 00:59:04.782 --> 00:59:10.219$ you have to do something like that in a bio-hazard for facility.

 $746\ 00:59:10.219 \longrightarrow 00:59:12.550\ Yeah.$

747 00:59:12.550 --> 00:59:16.780 Because you can't just do it in A.

 $748\ 00:59:16.780 \longrightarrow 00:59:19.050$ In a lab, you would need to.

749 00:59:19.050 --> 00:59:25.630 Have a model respiratory model and then actually have corner virus.

 $750\ 00:59:25.630 \longrightarrow 00:59:31.199$ A real Colonel iris. And then have.

 $751\ 00:59:31.199 --> 00:59:34.864$ You know, capture the air coming out and run it through while media.

 $752\ 00:59:34.864 --> 00:59:39.769$ If you're talking about some pretty heavy duty stuff to do it safely.

 $753\ 00:59:39.769 \longrightarrow 00:59:45.469$ Hum. It would need a high level bio safety environment to do so.

754 00:59:45.469 --> 00:59:48.786 So so, um, Robert, I actually spoke to,

755~00:59:48.786 --> 00:59:52.766 UM, one of our faculty members here at the ale.

 $756\ 00:59:52.766 \longrightarrow 00:59:59.030$ And what he stressed it is to put in a second viral filter.

757 00:59:59.030 --> 01:00:08.818 In the in a strategic place in the circuit and measure the viruses on the second filter and he said he's he can probably do that.

758 01:00:08.818 --> 01:00:15.894 He does that kind of stuff and and the only problem is we would need IRB and stuff like that,

 $759\ 01:00:15.894 \longrightarrow 01:00:17.900$ and so we kind of.

 $760\ 01:00:17.900 --> 01:00:23.510$ You know, I don't even know if RIRB is functioning these days.

761 01:00:23.510 --> 01:00:24.873 So there's a better Israel,

762 01:00:24.873 --> 01:00:27.699 their functioning essentially for covered.

763 01:00:27.699 --> 01:00:30.945 Related stuff only. Yeah yeah.

 $764\ 01:00:30.945 \longrightarrow 01:00:35.099$ Anyway. So we did think about it.

 $765\ 01:00:35.099 \dashrightarrow 01:00:39.329$ Alright, so uh, let's see any other questions here.

766 01:00:39.329 --> 01:00:42.000

 $767\ 01:00:42.000 \longrightarrow 01:00:46.938$ Any chance of a fact sheet summarizing these options?

 $768\ 01:00:46.938 \longrightarrow 01:00:49.226$ Maybe through a TSO ASM?

 $769\ 01:00:49.226 \longrightarrow 01:00:53.260$ So we have sent a letter to the JCSM.

770 01:00:53.260 --> 01:00:57.539 Uh, and hopefully it will be published quickly.

771 01:00:57.539 --> 01:01:00.476 Uh, with the basic issues involved,

772 01:01:00.476 --> 01:01:05.041 yeah, the the letter has been accepted and it shows it.

773 01:01:05.041 --> 01:01:10.449 It's really describes much of what we talked about today.

774 01:01:10.449 --> 01:01:13.556 And it should be available on their website.

775 $01:01:13.556 \longrightarrow 01:01:16.000$ I think in a matter of days.

776 01:01:16.000 --> 01:01:17.699 Stop, but to me also,

777 01:01:17.699 --> 01:01:21.409 a larger question is you know away from Kuwait,

778 01:01:21.409 --> 01:01:24.610 no influenza and such, should we?

779 01:01:24.610 --> 01:01:34.739 You know constantly change the configuration while a person has a substantial library or lower airway infection.

780 01:01:34.739 --> 01:01:38.329 You know, I was only perfectly aware of.

781 01:01:38.329 --> 01:01:41.577 The droplet. Uh, issues it really.

782 01:01:41.577 --> 01:01:46.110 Medical school information based learning a bootable closest.

783 01:01:46.110 --> 01:01:49.280 No, I didn't, uh, give it too much thought.

 $784\ 01:01:49.280 \longrightarrow 01:01:55.039$ Since then. But now it's tempting to want to do that.

 $785\ 01:01:55.039 \longrightarrow 01:01:56.710\ Uh.$

 $786\ 01:01:56.710 \longrightarrow 01:02:01.210$ Hopefully you can convince the home care companies or demanded from them.

 $787\ 01:02:01.210 --> 01:02:04.030$ If someone has a diagnose influencer.

788 01:02:04.030 --> 01:02:06.601 To just use for every call will be a bit much,

789 01:02:06.601 \rightarrow 01:02:12.159 but someone who is diagnosed influence I think will be a reasonable thing.

790 01:02:12.159 --> 01:02:14.545 Alright, any other questions? Uh,

791 01:02:14.545 --> 01:02:16.369 we're a few minutes over.

 $792\ 01:02:16.369 --> 01:02:21.710$ Will be happy to take a couple more questions if anybody has them.

 $793\ 01:02:21.710 --> 01:02:24.952\ OK$, so there's another one here from the UK.

794 01:02:24.952 --> 01:02:26.824 Oh essays or risk factor?

795 01:02:26.824 --> 01:02:30.282 Random insurance. We just response team's eyes.

796 01:02:30.282 --> 01:02:39.648 Asian conoce a be a risk factor for a new Monia the there's some data that suggests that they haven't looked at OSA specifically,

797 01:02:39.648 --> 01:02:41.739 that I know of. But obesity,

 $798\ 01:02:41.739 \longrightarrow 01:02:46.637\ I$ believe has been shown to be a risk factor for Cove it infection,

799 01:02:46.637 --> 01:02:53.409 and certainly if a patient has diabeet us alot of our patients have metabolic issues diabeet us. $800\ 01:02:53.409 \longrightarrow 01:03:05.664$ Obesity, so my guess is it probably is a risk factor for the patients that they get it and probably then go on to be to really have a severe

 $801\ 01:03:05.664 \longrightarrow 01:03:11.123$ problem. Alright, so if there are no other questions here,

802 01:03:11.123 --> 01:03:17.914 I think, uh, I think we can call it an afternoon and an I hope all of you are safe,

 $803\ 01:03:17.914 \longrightarrow 01:03:23.170$ uh, and I'm really happy that we have got to talk to each other,

 $804\ 01{:}03{:}23.170 \dashrightarrow 01{:}03{:}27.456$ at least for a few minutes an and one more question.

 $805\ 01:03:27.456 --> 01:03:38.050$ Possibly it has to do with an elect assists and the issue of the pap therapy actually help decrease the development of atelectasis.

 $806\ 01:03:38.050 \longrightarrow 01:03:42.032$ And so if you've got to sleep apnea patients through your,

807 01:03:42.032 --> 01:03:50.539 if the recommendation is to not use C Pap that maybe we're enhancing the likelihood of them developing a worsening new monia.

808 01:03:50.539 --> 01:03:58.641 whereas if they were to use a see pap that actually may prevent preventive role in the worsening of the code 19 itself,

 $809\ 01:03:58.641 \longrightarrow 01:04:02.679$ yeah? Yeah, so that's that's sort of a controversial thing.

 $810\ 01:04:02.679 --> 01:04:09.664$ In other words, the patient is sick enough that they require opening up of lungs that might collapse.

811 01:04:09.664 --> 01:04:12.199 They should really be in a hospital.

812 01:04:12.199 --> 01:04:15.967 Ann, not you know, not on a on a home see Pap Machine.

813 01:04:15.967 --> 01:04:17.817 They need to be monitored,

814 01:04:17.817 --> 01:04:20.282 in my opinion, much more carefully.

815 01:04:20.282 --> 01:04:21.721 As long as you know,

 $816\ 01:04:21.721 \longrightarrow 01:04:24.050$ as long as facilities allow that.

 $817\ 01:04:24.050 \longrightarrow 01:04:25.967$ But what would we decrease?

818 01:04:25.967 --> 01:04:29.050 The likelihood of them getting to that point?

 $819\ 01:04:29.050 \longrightarrow 01:04:31.800$ By helping to you know the peep.

820 01:04:31.800 --> 01:04:35.552 The positive airway pressure you're getting,

821 01:04:35.552 --> 01:04:39.719 but actually will help prevent the atelectasis so

822 01:04:39.719 --> 01:04:41.380 Such a double edged sword?

823 01:04:41.380 --> 01:04:43.349 Yeah, it's a double edge sword.

 $824\ 01:04:43.349 --> 01:04:51.411$ It it is. It's a double edge sword in one of the things we have to always bear in mind is we need to do whatever we can to predict

 $825\ 01:04:51.411 --> 01:05:01.099$ the nurses they respond. Tory therapist and the doctors you know the medical students were walking and taking care of these patients now.

 $826\ 01:05:01.099 \longrightarrow 01:05:06.548$ Alright, so there's boy these questions keep on coming here.

827 01:05:06.548 --> 01:05:08.960 Uh, uh, let's see alright,

 $828\ 01:05:08.960 \longrightarrow 01:05:11.552$ lot of thank you's here and,

 $829\ 01:05:11.552 \longrightarrow 01:05:14.766$ uh. Yeah, so um, this is good.

 $830\ 01:05:14.766 --> 01:05:19.280$ I think we need to do another session in a few weeks.

831 01:05:19.280 \rightarrow 01:05:26.219 Once we have a little bit more experience which Wich St Nyack who used to be here.

832 01:05:26.219 \rightarrow 01:05:34.829 And she was, uh, you know she was in in Boston for awhile so let's see an I think that's a great idea.

833 01:05:34.829 --> 01:05:39.929 Sry an everybody keep healthy and I'm going to sign off now.

834 01:05:39.929 --> 01:05:42.519 Thank you very much. Thank you.

 $835\ 01:05:42.519 \longrightarrow 01:05:44.090$ Bye bye.

836 01:05:44.090 --> 01:05:48.739