## WEBVTT

NOTE duration: "00:46:20.5120000"

NOTE language:en-us

NOTE Confidence: 0.8719163

00:00:00.000 --> 00:00:02.142 1st, please take a moment to ensure

NOTE Confidence: 0.8719163

 $00:00:02.142 \longrightarrow 00:00:04.117$  that you're muted in order to

NOTE Confidence: 0.8719163

 $00:00:04.117 \longrightarrow 00:00:05.777$  receive CME credit for attendance,

NOTE Confidence: 0.8719163

 $00:00:05.780 \longrightarrow 00:00:07.908$  please see the chat room for instructions.

NOTE Confidence: 0.8719163

 $00:00:07.910 \longrightarrow 00:00:10.374$  You can text the unique ID for this

NOTE Confidence: 0.8719163

00:00:10.374 --> 00:00:12.625 conference anytime until 3:15 PM if you're

NOTE Confidence: 0.8719163

 $00{:}00{:}12.625 \to 00{:}00{:}14.599$  not already registered with the LC Me,

NOTE Confidence: 0.8719163

 $00:00:14.600 \longrightarrow 00:00:16.728$  you will need to do that first.

NOTE Confidence: 0.8719163

00:00:16.730 --> 00:00:18.245 If you have any questions

NOTE Confidence: 0.8719163

 $00:00:18.245 \longrightarrow 00:00:19.154$  during the presentation,

NOTE Confidence: 0.8719163

00:00:19.160 --> 00:00:21.080 I encourage you to make use of the

NOTE Confidence: 0.8719163

 $00{:}00{:}21.080 \dashrightarrow 00{:}00{:}23.013$  chat room throughout the hour and

NOTE Confidence: 0.8719163

 $00:00:23.013 \longrightarrow 00:00:24.758$  recorded versions of these lectures

NOTE Confidence: 0.8719163

 $00:00:24.758 \longrightarrow 00:00:26.722$  will be available online within two

 $00:00:26.722 \longrightarrow 00:00:29.096$  weeks at the link provided in the chat.

NOTE Confidence: 0.8719163

 $00:00:29.096 \longrightarrow 00:00:31.000$  Finally, please feel free to share the

NOTE Confidence: 0.8719163

 $00:00:31.053 \longrightarrow 00:00:32.678$  announcements for our weekly lecture

NOTE Confidence: 0.8719163

 $00:00:32.678 \longrightarrow 00:00:35.320$  series to anyone who you think maybe intro.

NOTE Confidence: 0.8719163

 $00:00:35.320 \longrightarrow 00:00:37.145$  Posted, or contact Debbie Lovejoy

NOTE Confidence: 0.8719163

 $00:00:37.145 \longrightarrow 00:00:39.819$  to be added to the email list.

NOTE Confidence: 0.8719163

 $00:00:39.820 \longrightarrow 00:00:42.070$  So now I'm delighted to introduce

NOTE Confidence: 0.8719163

00:00:42.070 --> 00:00:43.195 Doctor Eliana, Matt,

NOTE Confidence: 0.8719163

00:00:43.195 --> 00:00:45.445 Eva as our speaker this afternoon,

NOTE Confidence: 0.8719163

 $00{:}00{:}45.450 \dashrightarrow 00{:}00{:}47.135$  Doctor Matt Eva completed her

NOTE Confidence: 0.8719163

00:00:47.135 --> 00:00:49.318 medical training at the New York

NOTE Confidence: 0.8719163

00:00:49.318 --> 00:00:51.066 College of Osteopathic Medicine,

NOTE Confidence: 0.8719163

 $00{:}00{:}51.070 \dashrightarrow 00{:}00{:}52.570$ an residency at Nassau

NOTE Confidence: 0.8719163

 $00{:}00{:}52.570 \dashrightarrow 00{:}00{:}53.695$  University Medical Center.

NOTE Confidence: 0.8719163

 $00:00:53.700 \longrightarrow 00:00:56.171$  She was a fellow in pulmonary and

00:00:56.171 --> 00:00:58.087 critical care medicine and then

NOTE Confidence: 0.8719163

 $00{:}00{:}58.087 \dashrightarrow 00{:}01{:}00.067$  Sleep Medicine at Norwalk Hospital.

NOTE Confidence: 0.8719163

 $00:01:00.070 \longrightarrow 00:01:02.830$  In this year joined the faculty at Vassar

NOTE Confidence: 0.8719163

 $00{:}01{:}02.830 \dashrightarrow 00{:}01{:}04.949$  Brothers Medical Center in Poughkeepsie,

NOTE Confidence: 0.8719163

 $00:01:04.950 \longrightarrow 00:01:05.347$  NY.

NOTE Confidence: 0.8719163

 $00:01:05.347 \longrightarrow 00:01:07.332$  She's published several case reports

NOTE Confidence: 0.8719163

 $00:01:07.332 \longrightarrow 00:01:10.459$  and chest and is involved in research,

NOTE Confidence: 0.8719163

00:01:10.460 --> 00:01:12.660 currently examining cases of extrapulmonary

NOTE Confidence: 0.8719163

 $00{:}01{:}12.660 \dashrightarrow 00{:}01{:}14.420$  tuberculosis within our hospital

NOTE Confidence: 0.8719163

00:01:14.420 --> 00:01:16.717 at trial examining the impact of a

NOTE Confidence: 0.8719163

00:01:16.717 --> 00:01:18.870 vitamin C cocktail for treatment of

NOTE Confidence: 0.8719163

 $00:01:18.870 \longrightarrow 00:01:21.095$  septic shock and retrospective observation.

NOTE Confidence: 0.8719163

 $00:01:21.100 \longrightarrow 00:01:23.458$  ULL study looking at critical illness.

NOTE Confidence: 0.8719163

 $00:01:23.460 \longrightarrow 00:01:24.642$  Polyneuropathy Doctor Montaivo

NOTE Confidence: 0.8719163

 $00:01:24.642 \longrightarrow 00:01:27.006$  is scheduled to give this talk.

NOTE Confidence: 0.8719163

 $00:01:27.010 \longrightarrow 00:01:28.350$  Last year's asleep fellow,

 $00:01:28.350 \longrightarrow 00:01:30.360$  just as Covid was beginning to

NOTE Confidence: 0.8719163

 $00:01:30.423 \longrightarrow 00:01:32.130$  impact Connecticut hospitals.

NOTE Confidence: 0.8719163

 $00:01:32.130 \longrightarrow 00:01:34.488$  So we unfortunately had to cancel.

NOTE Confidence: 0.8719163

 $00:01:34.490 \longrightarrow 00:01:36.980$  But I'm delighted that she was.

NOTE Confidence: 0.8719163

 $00:01:36.980 \longrightarrow 00:01:39.170$  We're willing to return again today,

NOTE Confidence: 0.8719163

00:01:39.170 --> 00:01:40.995 virtually to provide this review

NOTE Confidence: 0.8719163

00:01:40.995 --> 00:01:42.090 of idiopathic hypersomnia,

NOTE Confidence: 0.8719163

 $00:01:42.090 \longrightarrow 00:01:43.310$  so please join me.

NOTE Confidence: 0.8719163

 $00:01:43.310 \longrightarrow 00:01:45.140$  Join me in giving me her

NOTE Confidence: 0.8719163

 $00{:}01{:}45.213 \dashrightarrow 00{:}01{:}47.197$  warm welcome this afternoon.

NOTE Confidence: 0.8719163

 $00:01:47.200 \longrightarrow 00:01:49.025$  And with that I'll turn

NOTE Confidence: 0.8719163

 $00:01:49.025 \longrightarrow 00:01:50.850$  it over to you Eliana.

NOTE Confidence: 0.8719163

 $00:01:50.850 \longrightarrow 00:01:51.220$  Thank

NOTE Confidence: 0.82992303

 $00:01:51.220 \longrightarrow 00:01:53.045$  God after Tobias, thank you

NOTE Confidence: 0.82992303

 $00:01:53.045 \longrightarrow 00:01:54.870$  for giving me this opportunity.

 $00:01:54.870 \longrightarrow 00:01:57.930$  I was excited to give this lecture as a

NOTE Confidence: 0.82992303

 $00:01:57.930 \longrightarrow 00:02:00.708$  fellow so this was a literature review.

NOTE Confidence: 0.82992303

 $00:02:00.710 \dashrightarrow 00:02:04.252$  Part of my fellowship Grand Rounds review

NOTE Confidence: 0.82992303

 $00:02:04.252 \longrightarrow 00:02:08.438$  of idiopathic hypersomnia and I do not

NOTE Confidence: 0.82992303

 $00:02:08.438 \longrightarrow 00:02:12.440$  have any financial disclosures to give.

NOTE Confidence: 0.82992303

00:02:12.440 --> 00:02:14.967 So just to give a presentation outline,

NOTE Confidence: 0.82992303

 $00:02:14.970 \longrightarrow 00:02:17.091$  as a fellow, I was inspired by

NOTE Confidence: 0.82992303

 $00:02:17.091 \longrightarrow 00:02:19.281$  a particular case which I will

NOTE Confidence: 0.82992303

 $00{:}02{:}19.281 \dashrightarrow 00{:}02{:}21.301$  discuss today to illustrate age

NOTE Confidence: 0.82992303

00:02:21.301 --> 00:02:22.939 opathic hypersomnia will review,

NOTE Confidence: 0.82992303

 $00:02:22.940 \longrightarrow 00:02:25.376$  but the Physiology will review the clinical

NOTE Confidence: 0.82992303

 $00:02:25.376 \longrightarrow 00:02:27.223$  evaluation of the patient contrasted

NOTE Confidence: 0.82992303

00:02:27.223 --> 00:02:29.449 with narcolepsy type one and two,

NOTE Confidence: 0.82992303

 $00:02:29.450 \longrightarrow 00:02:32.362$  and then discuss the some of the treatment

NOTE Confidence: 0.82992303

 $00:02:32.362 \longrightarrow 00:02:35.088$  updates as well as emerging treatments.

NOTE Confidence: 0.82992303

 $00:02:35.090 \longrightarrow 00:02:36.490$  For for this condition.

 $00:02:36.490 \longrightarrow 00:02:39.045$  So I picked up this patient after

NOTE Confidence: 0.82992303

00:02:39.045 --> 00:02:41.691 some time that she was already being

NOTE Confidence: 0.82992303

 $00:02:41.691 \longrightarrow 00:02:44.240$  evaluated at our Norwalk Sleep Clinic.

NOTE Confidence: 0.82992303

 $00:02:44.240 \longrightarrow 00:02:46.728$  This was a 52 year old female who

NOTE Confidence: 0.82992303

 $00{:}02{:}46.728 \mathrel{--}{>} 00{:}02{:}48.165$  initially presented for evaluation

NOTE Confidence: 0.82992303

 $00:02:48.165 \longrightarrow 00:02:50.045$  of hypersomnia and non restorative

NOTE Confidence: 0.82992303

 $00:02:50.045 \longrightarrow 00:02:51.759$  sleep for over 20 years.

NOTE Confidence: 0.82992303

 $00:02:51.760 \longrightarrow 00:02:54.077$  So it was interesting that she would

NOTE Confidence: 0.82992303

00:02:54.077 --> 00:02:57.215 go to bed at 8:00 PM fall asleep like

NOTE Confidence: 0.82992303

 $00:02:57.215 \dashrightarrow 00:02:59.970$  she would say within 5 minutes or less.

NOTE Confidence: 0.82992303

 $00:02:59.970 \longrightarrow 00:03:01.306$  There was no snoring.

NOTE Confidence: 0.82992303

 $00:03:01.306 \longrightarrow 00:03:03.310$  No witnessed Apneic episodes by her

NOTE Confidence: 0.82992303

 $00{:}03{:}03.375 \dashrightarrow 00{:}03{:}05.376$  bed partner. No gasping for air.

NOTE Confidence: 0.82992303

 $00:03:05.376 \longrightarrow 00:03:08.019$  No Brooks is no nocturia and she would

NOTE Confidence: 0.82992303

00:03:08.019 --> 00:03:10.507 wake up at 7:00 AM with alarm Clock.

 $00:03:10.510 \longrightarrow 00:03:12.519$  What was impressive was her sleep inertia,

NOTE Confidence: 0.82992303

 $00{:}03{:}12.520 \dashrightarrow 00{:}03{:}14.599$  which would last more than 30 minutes

NOTE Confidence: 0.82992303

 $00:03:14.599 \longrightarrow 00:03:17.263$  at a time to a point where her husband

NOTE Confidence: 0.82992303

00:03:17.263 --> 00:03:19.796 had to bring her two mugs of coffee to

NOTE Confidence: 0.82992303

 $00:03:19.796 \longrightarrow 00:03:22.290$  bed in order for her to kind of start

NOTE Confidence: 0.82992303

 $00:03:22.290 \longrightarrow 00:03:24.859$  moving and be able to get out of bed.

NOTE Confidence: 0.82992303

00:03:24.860 --> 00:03:27.012 She worked in a city and so she

NOTE Confidence: 0.82992303

 $00:03:27.012 \longrightarrow 00:03:29.331$  also slept on the way to work on a

NOTE Confidence: 0.82992303

 $00{:}03{:}29.331 \dashrightarrow 00{:}03{:}31.131$  train and then she napped another

NOTE Confidence: 0.82992303

00:03:31.131 --> 00:03:33.469 two to four hours during the day,

NOTE Confidence: 0.82992303

 $00{:}03{:}33.470 \dashrightarrow 00{:}03{:}35.479$  try to sneak in her naps at

NOTE Confidence: 0.82992303

 $00:03:35.479 \longrightarrow 00:03:36.340$  work strikes again.

NOTE Confidence: 0.82992303

 $00:03:36.340 \longrightarrow 00:03:37.672$  If she was home,

NOTE Confidence: 0.82992303

 $00:03:37.672 \longrightarrow 00:03:39.670$  she would sleep up to four

NOTE Confidence: 0.82992303

 $00:03:39.755 \longrightarrow 00:03:41.228$  hours in afternoon.

NOTE Confidence: 0.82992303

 $00:03:41.230 \longrightarrow 00:03:43.666$  She denied a history of cataplexy.

00:03:43.670 --> 00:03:46.112 There was no sleep paralysis or

NOTE Confidence: 0.82992303

 $00{:}03{:}46.112 \dashrightarrow 00{:}03{:}47.740$  did not hypnagogic hallucinations.

NOTE Confidence: 0.82992303

00:03:47.740 --> 00:03:50.182 She never had vivid dreams and

NOTE Confidence: 0.82992303

 $00:03:50.182 \longrightarrow 00:03:52.273$  freshly couldn't even remember any

NOTE Confidence: 0.82992303

00:03:52.273 --> 00:03:54.595 of her dreams denied having any

NOTE Confidence: 0.82992303

00:03:54.595 --> 00:03:56.699 history of Parasomnias her daughter,

NOTE Confidence: 0.82992303

 $00:03:56.700 \longrightarrow 00:03:59.549$  who was at this point a teenager,

NOTE Confidence: 0.82992303

 $00:03:59.550 \longrightarrow 00:04:01.098$  also has Hypersomnolence Ann.

NOTE Confidence: 0.82992303

00:04:01.098 --> 00:04:04.020 Mom has Parkinson's no use of alcohol.

NOTE Confidence: 0.82992303

 $00:04:04.020 \longrightarrow 00:04:06.456$  No user ballistic drugs or smoking.

NOTE Confidence: 0.82992303

 $00:04:06.460 \longrightarrow 00:04:08.780$  She's not on any medications

NOTE Confidence: 0.82992303

 $00:04:08.780 \longrightarrow 00:04:11.100$  or an an anti depressants.

NOTE Confidence: 0.82992303

 $00{:}04{:}11.100 \dashrightarrow 00{:}04{:}13.320$  Worked in administrations and you know,

NOTE Confidence: 0.82992303

 $00:04:13.320 \longrightarrow 00:04:16.458$  takes care of her family members.

NOTE Confidence: 0.82992303

 $00:04:16.460 \longrightarrow 00:04:19.322$  Her on a physical exam was

 $00:04:19.322 \longrightarrow 00:04:21.620$  significant for BMI of 30.

NOTE Confidence: 0.82992303

 $00{:}04{:}21.620 \dashrightarrow 00{:}04{:}23.965$  Mallampati was two and an

NOTE Confidence: 0.82992303

00:04:23.965 --> 00:04:26.310 extra conference was 12 inches,

NOTE Confidence: 0.82992303

 $00:04:26.310 \longrightarrow 00:04:29.010$  so PSG was done which essentially

NOTE Confidence: 0.82992303

 $00:04:29.010 \longrightarrow 00:04:30.810$  essentially showed a good

NOTE Confidence: 0.82992303

 $00:04:30.894 \longrightarrow 00:04:32.878$  sleep efficiency of 95.1%.

NOTE Confidence: 0.82992303

 $00:04:32.880 \longrightarrow 00:04:35.220$  Sleep onset was 3.5 minutes,

NOTE Confidence: 0.82992303

 $00:04:35.220 \longrightarrow 00:04:39.336$  but ram latency from sleep onset was

NOTE Confidence: 0.82992303

 $00:04:39.336 \longrightarrow 00:04:43.719$  about 141 minutes or hi was actually 3.5.

NOTE Confidence: 0.82992303

 $00:04:43.720 \longrightarrow 00:04:46.632$  So this is just to see the hypnogram

NOTE Confidence: 0.82992303

 $00:04:46.632 \longrightarrow 00:04:48.946$  to demonstrate that she rather fell

NOTE Confidence: 0.82992303

00:04:48.946 --> 00:04:51.975 asleep quite quickly and the RAM on set

NOTE Confidence: 0.82992303

 $00:04:51.975 \longrightarrow 00:04:54.711$  was over 90 minutes into her sleep onset.

NOTE Confidence: 0.82992303

00:04:54.720 --> 00:04:57.000 MSIT was done an what you see here

NOTE Confidence: 0.82992303

 $00:04:57.000 \longrightarrow 00:04:59.140$  is that her average sleep latency

NOTE Confidence: 0.82992303

 $00:04:59.140 \longrightarrow 00:05:01.384$  was one minute and 30 seconds

 $00:05:01.452 \longrightarrow 00:05:03.558$  and there were no ramsley naps.

NOTE Confidence: 0.80397564

 $00:05:05.760 \longrightarrow 00:05:09.328$  So that brings us to Asia Pathic hypersomnia,

NOTE Confidence: 0.80397564

 $00:05:09.330 \longrightarrow 00:05:12.078$  which is defined as quote, unquote,

NOTE Confidence: 0.80397564

 $00:05:12.078 \longrightarrow 00:05:14.668$  chronic neurologic disorder that manifests

NOTE Confidence: 0.80397564

 $00{:}05{:}14.668 {\:\raisebox{--}{\text{--}}}{\:\raisebox{--}{\text{--}}}{\:\raisebox{--}{\text{--}}} 00{:}05{:}16.740$  as pathologic day time sleepiness.

NOTE Confidence: 0.80397564

 $00{:}05{:}16.740 \dashrightarrow 00{:}05{:}19.211$  Just to go into histories that in

NOTE Confidence: 0.80397564

 $00:05:19.211 \longrightarrow 00:05:21.856$  general lot of things in Sleep Medicine

NOTE Confidence: 0.80397564

 $00:05:21.856 \longrightarrow 00:05:25.070$  are more or less young and kind of GNU,

NOTE Confidence: 0.80397564

00:05:25.070 --> 00:05:26.626 GNU, GNU diagnosis established,

NOTE Confidence: 0.80397564

 $00:05:26.626 \longrightarrow 00:05:29.348$  but the first time you get the

NOTE Confidence: 0.80397564

 $00:05:29.348 \longrightarrow 00:05:31.574$  Kuiper Sammy kind of gets on this,

NOTE Confidence: 0.80397564

 $00:05:31.580 \longrightarrow 00:05:33.757$  our medical map is around 1956 when

NOTE Confidence: 0.80397564

 $00{:}05{:}33.757 \dashrightarrow 00{:}05{:}36.239$  Doctor Bedrich Roth Equal was a check

NOTE Confidence: 0.80397564

 $00:05:36.239 \longrightarrow 00:05:37.731$  neurobiologists and your physiologists

NOTE Confidence: 0.80397564

 $00:05:37.731 \longrightarrow 00:05:40.097$  and sleep researcher identify that this

 $00:05:40.097 \longrightarrow 00:05:42.047$  condition as this sleep drunkenness

NOTE Confidence: 0.80397564

 $00:05:42.047 \longrightarrow 00:05:45.070$  and kind of coined this term.

NOTE Confidence: 0.80397564

 $00{:}05{:}45.070 \dashrightarrow 00{:}05{:}47.702$  And he thought of it as a symptom

NOTE Confidence: 0.80397564

00:05:47.702 --> 00:05:51.146 as well as a syndrome in 1966 that

NOTE Confidence: 0.80397564

 $00:05:51.146 \longrightarrow 00:05:53.430$  the demands accordingly wrote that,

NOTE Confidence: 0.80397564

 $00{:}05{:}53.430 \dashrightarrow 00{:}05{:}55.818$  and I think this is important

NOTE Confidence: 0.80397564

00:05:55.818 --> 00:05:58.200 because it this takes it apart,

NOTE Confidence: 0.80397564

 $00:05:58.200 \longrightarrow 00:06:00.588$  takes it as a separate entity

NOTE Confidence: 0.80397564

00:06:00.588 --> 00:06:01.384 from narcolepsy.

NOTE Confidence: 0.80397564

 $00:06:01.390 \longrightarrow 00:06:03.922$  Those patients without cataplexy or sleep

NOTE Confidence: 0.80397564

00:06:03.922 --> 00:06:06.559 paralysis holes of failed to show sleep,

NOTE Confidence: 0.80397564

00:06:06.560 --> 00:06:08.948 onset REM periods in laboratory tests,

NOTE Confidence: 0.80397564

 $00:06:08.950 \longrightarrow 00:06:10.940$  probably do not have narcolepsy,

NOTE Confidence: 0.80397564

 $00{:}06{:}10.940 \dashrightarrow 00{:}06{:}12.925$  and should be relegated to

NOTE Confidence: 0.80397564

00:06:12.925 --> 00:06:14.116 another diagnostic category.

NOTE Confidence: 0.80397564

 $00:06:14.120 \longrightarrow 00:06:15.500$  Another 10 years.

 $00:06:15.500 \longrightarrow 00:06:16.880$  Dash is by.

NOTE Confidence: 0.80397564

00:06:16.880 --> 00:06:17.272 Again,

NOTE Confidence: 0.80397564

00:06:17.272 --> 00:06:19.624 Doctor Roth reports about 642 cases

NOTE Confidence: 0.80397564

00:06:19.624 --> 00:06:21.808 of patients with narcolepsy and

NOTE Confidence: 0.80397564

 $00:06:21.808 \longrightarrow 00:06:24.604$  hypersomnia and coins this term age

NOTE Confidence: 0.80397564

 $00:06:24.604 \longrightarrow 00:06:26.801$  opathic hypersomnia is to separate

NOTE Confidence: 0.80397564

 $00:06:26.801 \longrightarrow 00:06:28.397$  this patients from narcoleptics

NOTE Confidence: 0.80397564

 $00{:}06{:}28.397 \dashrightarrow 00{:}06{:}30.384$  and there are two categories.

NOTE Confidence: 0.80397564

 $00:06:30.384 \longrightarrow 00:06:32.736$  There's defined as Paula symptomatic form

NOTE Confidence: 0.80397564

 $00:06:32.736 \longrightarrow 00:06:35.539$  where they have excessive daytime sleepiness,

NOTE Confidence: 0.80397564

00:06:35.540 --> 00:06:38.494 nocturnal sleep duration more than 12 hours,

NOTE Confidence: 0.80397564

 $00:06:38.500 \longrightarrow 00:06:39.976$  and sleep inertia,

NOTE Confidence: 0.80397564

 $00:06:39.976 \longrightarrow 00:06:42.436$  and then there's a monosymptomatic

NOTE Confidence: 0.80397564

 $00:06:42.436 \longrightarrow 00:06:44.706$  form which is basically access

NOTE Confidence: 0.80397564

 $00:06:44.706 \longrightarrow 00:06:47.112$  if there are no sleep 1979.

 $00:06:47.120 \longrightarrow 00:06:50.726$  We have a diagnosis or diagnosis

NOTE Confidence: 0.80397564

 $00{:}06{:}50.726 \dashrightarrow 00{:}06{:}52.529$  established of idiopathic.

NOTE Confidence: 0.80397564

 $00:06:52.530 \longrightarrow 00:06:54.395$  Dennis hypersomnolence and it was

NOTE Confidence: 0.80397564

 $00:06:54.395 \longrightarrow 00:06:56.795$  defined quote unquote as a disorder

NOTE Confidence: 0.80397564

 $00:06:56.795 \longrightarrow 00:06:58.663$  of excessive daytime somnolence

NOTE Confidence: 0.80397564

00:06:58.663 --> 00:07:00.531 without irresistible need to

NOTE Confidence: 0.80397564

 $00:07:00.531 \longrightarrow 00:07:02.676$  sleep as a scene and narcolepsy,

NOTE Confidence: 0.80397564

 $00:07:02.680 \longrightarrow 00:07:04.816$  and again now with saying there

NOTE Confidence: 0.80397564

00:07:04.816 --> 00:07:07.229 should be no so Rams on PSG.

NOTE Confidence: 0.27132785

00:07:09.500 --> 00:07:13.254 All. This is a huge opathic hypersomnia

NOTE Confidence: 0.27132785

 $00{:}07{:}13.254 \to 00{:}07{:}14.670$  dynamic diagnostic criteria in

NOTE Confidence: 0.27132785

 $00:07:14.728 \longrightarrow 00:07:16.552$  the Inter internal international

NOTE Confidence: 0.27132785

 $00{:}07{:}16.552 \dashrightarrow 00{:}07{:}18.376$  classification of sleep disorders.

NOTE Confidence: 0.27132785

00:07:18.380 --> 00:07:21.628 First addition to go over this very

NOTE Confidence: 0.27132785

 $00:07:21.628 \longrightarrow 00:07:24.373$  quickly is basically all the following

NOTE Confidence: 0.27132785

 $00{:}07{:}24.373 \dashrightarrow 00{:}07{:}27.327$  criteria must be met so they have

 $00{:}07{:}27.419 \to 00{:}07{:}29.989$  to be daily day time sleepiness.

NOTE Confidence: 0.27132785

 $00:07:29.990 \longrightarrow 00:07:31.790$  Which would be present for

NOTE Confidence: 0.27132785

 $00:07:31.790 \longrightarrow 00:07:33.230$  at least three months.

NOTE Confidence: 0.27132785

 $00:07:33.230 \longrightarrow 00:07:33.862$  No cataplexy,

NOTE Confidence: 0.27132785

 $00:07:33.862 \longrightarrow 00:07:36.074$  which becomes very important as to which

NOTE Confidence: 0.27132785

 $00:07:36.074 \longrightarrow 00:07:38.628$  are differentiated from narcolepsy type one.

NOTE Confidence: 0.27132785

00:07:38.630 --> 00:07:41.528 No MSL? T evidence of narcolepsy.

NOTE Confidence: 0.27132785

00:07:41.530 --> 00:07:43.238 An electrophysiology evidence of

NOTE Confidence: 0.27132785

 $00{:}07{:}43.238 \dashrightarrow 00{:}07{:}44.946$  hypersomnolence dis defined as

NOTE Confidence: 0.27132785

 $00{:}07{:}44.946 \dashrightarrow 00{:}07{:}46.630$  either mean sleep latency animus

NOTE Confidence: 0.27132785

00:07:46.630 --> 00:07:48.940 Lt of less or equal to 8 minutes,

NOTE Confidence: 0.27132785

 $00:07:48.940 \longrightarrow 00:07:52.470$  or at least 11 hours of sleep for 24 hours,

NOTE Confidence: 0.27132785

 $00{:}07{:}52.470 \dashrightarrow 00{:}07{:}55.294$  which could be documented over 24 hour PSG.

NOTE Confidence: 0.27132785

 $00{:}07{:}55.300 \dashrightarrow 00{:}07{:}57.400$  I'm not sure how many labs

NOTE Confidence: 0.27132785

00:07:57.400 --> 00:07:59.180 actually do 24 hour PSG,

 $00:07:59.180 \longrightarrow 00:08:01.520$  but another way to look at it is to

NOTE Confidence: 0.27132785

 $00{:}08{:}01.520 \dashrightarrow 00{:}08{:}03.605$  do actigraphy and calculate that

NOTE Confidence: 0.27132785

 $00:08:03.605 \longrightarrow 00:08:06.233$  amount of sleep time through that.

NOTE Confidence: 0.27132785

 $00:08:06.240 \longrightarrow 00:08:08.058$  One of the most important thing

NOTE Confidence: 0.27132785

 $00:08:08.058 \longrightarrow 00:08:10.964$  to do is to make sure we rule

NOTE Confidence: 0.27132785

00:08:10.964 --> 00:08:12.584 out insufficient sleep time,

NOTE Confidence: 0.27132785

 $00{:}08{:}12.590 \dashrightarrow 00{:}08{:}15.694$  which we can do with the Sleep Diaries.

NOTE Confidence: 0.27132785

00:08:15.700 --> 00:08:18.010 And Actigraphy here is especially important.

NOTE Confidence: 0.27132785

 $00:08:18.010 \longrightarrow 00:08:19.940$  No other disorders substance use.

NOTE Confidence: 0.27132785

 $00:08:19.940 \longrightarrow 00:08:21.480$  Better explains the symptoms.

NOTE Confidence: 0.27132785

 $00{:}08{:}21.480 --> 00{:}08{:}23.020$  So in a way,

NOTE Confidence: 0.27132785

 $00:08:23.020 \longrightarrow 00:08:25.708$  it becomes sort of diagnosis of exclusion.

NOTE Confidence: 0.808584281481481

 $00:08:28.140 \longrightarrow 00:08:31.124$  So. If we this table was published

NOTE Confidence: 0.808584281481481

00:08:31.124 --> 00:08:34.428 in Chest in 2015 and it basically kind

NOTE Confidence: 0.808584281481481

 $00:08:34.428 \longrightarrow 00:08:37.230$  of gives you diagnostic criteria in

NOTE Confidence: 0.808584281481481

 $00{:}08{:}37.230 \dashrightarrow 00{:}08{:}39.900$  comparison with narcolepsy type one.

 $00:08:39.900 \longrightarrow 00:08:42.230$  I collected tattoo and idiopathic

NOTE Confidence: 0.808584281481481

 $00:08:42.230 \longrightarrow 00:08:45.019$  hypersomnia and you see that what

NOTE Confidence: 0.808584281481481

 $00:08:45.019 \longrightarrow 00:08:47.651$  connects all of them is this daily

NOTE Confidence: 0.808584281481481

 $00:08:47.651 \longrightarrow 00:08:50.590$  periods of irrepressible need to sleep.

NOTE Confidence: 0.808584281481481

00:08:50.590 --> 00:08:52.888 But again, you have mean sleep

NOTE Confidence: 0.808584281481481

 $00:08:52.888 \longrightarrow 00:08:55.250$  latency of less than 8 minutes,

NOTE Confidence: 0.808584281481481

 $00:08:55.250 \longrightarrow 00:08:57.566$  which applies to all of them.

NOTE Confidence: 0.808584281481481

00:08:57.570 --> 00:08:59.898 And then the so ramps start

NOTE Confidence: 0.808584281481481

00:08:59.898 --> 00:09:01.062 differentiating the narcolepsy,

NOTE Confidence: 0.808584281481481

 $00:09:01.070 \longrightarrow 00:09:02.573$  from age opathic hypersomnia.

NOTE Confidence: 0.808584281481481

 $00:09:02.573 \longrightarrow 00:09:05.579$  So in idiopathic hypersomnia need to

NOTE Confidence: 0.808584281481481

 $00:09:05.579 \longrightarrow 00:09:08.237$  have fewer than two storms on SLT.

NOTE Confidence: 0.808584281481481

 $00{:}09{:}08.240 --> 00{:}09{:}10.115$  And that's also including the

NOTE Confidence: 0.808584281481481

00:09:10.115 --> 00:09:11.990 storm and not PSG itself.

NOTE Confidence: 0.73693526

 $00:09:14.400 \longrightarrow 00:09:17.214$  Another way to look is at cataplexy,

00:09:17.220 --> 00:09:18.832 but presence of cataplexy

NOTE Confidence: 0.73693526

 $00{:}09{:}18.832 \dashrightarrow 00{:}09{:}20.847$  applies to narcolepsy type one,

NOTE Confidence: 0.73693526

 $00{:}09{:}20.850 \dashrightarrow 00{:}09{:}23.979$  and there's by default should be no

NOTE Confidence: 0.73693526

 $00:09:23.979 \longrightarrow 00:09:27.069$  cataplexy for each opathic hypersomnia.

NOTE Confidence: 0.73693526

 $00:09:27.070 \longrightarrow 00:09:28.960$  Yes Sir, for hypocretin one

NOTE Confidence: 0.73693526

 $00:09:28.960 \longrightarrow 00:09:30.472$  concentration less than 110.

NOTE Confidence: 0.73693526

 $00:09:30.480 \longrightarrow 00:09:32.604$  Guess it's not a very common

NOTE Confidence: 0.73693526

 $00:09:32.604 \longrightarrow 00:09:34.913$  diagnostic tool that we use to

NOTE Confidence: 0.73693526

 $00{:}09{:}34.913 \dashrightarrow 00{:}09{:}36.549$  diagnose narcolepsy type one,

NOTE Confidence: 0.73693526

 $00:09:36.550 \longrightarrow 00:09:38.998$  but it would be that that level is

NOTE Confidence: 0.73693526

 $00{:}09{:}38.998 \dashrightarrow 00{:}09{:}42.349$  normal in neck electric Type 2 as well

NOTE Confidence: 0.73693526

 $00:09:42.349 \longrightarrow 00:09:44.129$  as idiopathic hypersomnia patients.

NOTE Confidence: 0.804784

 $00:09:46.230 \longrightarrow 00:09:48.762$  Again, Actigraphy has a role in

NOTE Confidence: 0.804784

00:09:48.762 --> 00:09:51.778 diagnosing to look at the, you know,

NOTE Confidence: 0.804784

 $00:09:51.778 \longrightarrow 00:09:54.098$  insufficient sleep time versus the

NOTE Confidence: 0.804784

 $00:09:54.098 \longrightarrow 00:09:56.857$  amount of time that patients actually

 $00:09:56.857 \longrightarrow 00:10:00.250$  sleep in a 24 hour period. Very imp.

NOTE Confidence: 0.804784

00:10:00.250 --> 00:10:01.890 Wouldn't you always calculate?

NOTE Confidence: 0.804784

 $00:10:01.890 \longrightarrow 00:10:05.082$  Make sure that we don't have insufficient

NOTE Confidence: 0.804784

00:10:05.082 --> 00:10:07.210 sleep syndrome and rule out,

NOTE Confidence: 0.804784

 $00:10:07.210 \longrightarrow 00:10:09.920$  maybe even other issues like

NOTE Confidence: 0.804784

 $00{:}10{:}09.920 \dashrightarrow 00{:}10{:}12.630$  psychiatric issue that can predispose

NOTE Confidence: 0.804784

 $00:10:12.713 \longrightarrow 00:10:15.668$  somebody to hypersomnolence as well.

NOTE Confidence: 0.804784

 $00:10:15.670 \longrightarrow 00:10:17.250$  So Epidemiology will prevalence

NOTE Confidence: 0.804784

00:10:17.250 --> 00:10:19.624 is not really well known. Why?

NOTE Confidence: 0.804784

00:10:19.624 --> 00:10:21.988 Because we don't really have the

NOTE Confidence: 0.804784

00:10:21.988 --> 00:10:24.085 robust studies, to my knowledge,

NOTE Confidence: 0.804784

 $00:10:24.085 \longrightarrow 00:10:26.260$  reports are suggestive of idiopathic

NOTE Confidence: 0.804784

 $00{:}10{:}26.260 {\:{\mbox{--}}}{\:{\mbox{-}}} 00{:}10{:}28.541$  hypersomnia being 5 to 1010 times

NOTE Confidence: 0.804784

00:10:28.541 --> 00:10:29.889 less common than narcolepsy.

NOTE Confidence: 0.804784

00:10:29.890 --> 00:10:32.396 Or is it because we kind of

00:10:32.396 --> 00:10:35.029 misdiagnosed it or don't recognize it?

NOTE Confidence: 0.804784

 $00{:}10{:}35.030 \dashrightarrow 00{:}10{:}37.000$  I'm not really sure estimated

NOTE Confidence: 0.804784

 $00{:}10{:}37.000 \dashrightarrow 00{:}10{:}40.512$  to be about 1% of patients in a

NOTE Confidence: 0.804784

 $00:10:40.512 \longrightarrow 00:10:42.444$  neurological respiratory sleep centers.

NOTE Confidence: 0.804784

00:10:42.450 --> 00:10:45.355 So going back to the Wisconsin sleep

NOTE Confidence: 0.804784

 $00:10:45.355 \longrightarrow 00:10:47.711$  Cohort basically showed that about 20

NOTE Confidence: 0.804784

00:10:47.711 --> 00:10:50.540 three point 838% of men and 22.90% of

NOTE Confidence: 0.804784

 $00:10:50.540 \longrightarrow 00:10:52.841$  women in that cohort showed Msellati

NOTE Confidence: 0.804784

00:10:52.841 --> 00:10:55.844 findings of sleep onset of less than,

NOTE Confidence: 0.804784

 $00:10:55.850 \longrightarrow 00:10:58.208$  equal or less than 8 minutes.

NOTE Confidence: 0.804784

00:10:58.210 --> 00:10:59.782 We know it's higher,

NOTE Confidence: 0.804784

 $00:10:59.782 \longrightarrow 00:11:00.568$  more prevalent,

NOTE Confidence: 0.804784

 $00:11:00.570 \longrightarrow 00:11:04.186$  and woman an age events at various and

NOTE Confidence: 0.804784

 $00{:}11{:}04.186 \dashrightarrow 00{:}11{:}08.046$  it will range between 10 to 30 years.

NOTE Confidence: 0.804784

00:11:08.050 --> 00:11:10.070 So is there genetic predisposition,

NOTE Confidence: 0.804784

 $00:11:10.070 \longrightarrow 00:11:12.610$  family history of excessive sleepiness

00:11:12.610 --> 00:11:14.642 or another central hypersomnia

NOTE Confidence: 0.804784

 $00:11:14.642 \longrightarrow 00:11:16.676$  disorder is seen in about 34 to

NOTE Confidence: 0.804784

00:11:16.676 --> 00:11:18.930 38% of patients diagnosed with IH.

NOTE Confidence: 0.804784

 $00:11:18.930 \longrightarrow 00:11:21.744$  There is a parent child transmission which

NOTE Confidence: 0.804784

 $00:11:21.744 \longrightarrow 00:11:24.569$  is observed about 12.5% of IH patients.

NOTE Confidence: 0.804784

00:11:24.569 --> 00:11:25.778 Or for example,

NOTE Confidence: 0.804784

00:11:25.780 --> 00:11:28.198 if there's if these patients don't

NOTE Confidence: 0.804784

 $00{:}11{:}28.198 \dashrightarrow 00{:}11{:}29.810$  carry the official diagnosis,

NOTE Confidence: 0.804784

00:11:29.810 --> 00:11:32.674 then you know if you do the history

NOTE Confidence: 0.804784

 $00:11:32.674 \longrightarrow 00:11:35.854$  you'd find out that maybe one of their

NOTE Confidence: 0.804784

 $00:11:35.854 \longrightarrow 00:11:38.769$  parents or first degree relatives would.

NOTE Confidence: 0.804784

00:11:38.770 --> 00:11:40.225 Would be sleeping for more

NOTE Confidence: 0.804784

 $00:11:40.225 \longrightarrow 00:11:41.680$  than 9.5 hours per night.

NOTE Confidence: 0.843064995

 $00:11:44.500 \longrightarrow 00:11:47.560$  We know that. There is Association

NOTE Confidence: 0.843064995

 $00:11:47.560 \longrightarrow 00:11:50.260$  and will between narcolepsy Type 1.

00:11:50.260 --> 00:11:52.633 And HLA DQ B 10602 allele and

NOTE Confidence: 0.843064995

 $00{:}11{:}52.633 \dashrightarrow 00{:}11{:}54.720$  it's not observed in idiopathic

NOTE Confidence: 0.843064995

 $00:11:54.720 \longrightarrow 00:11:57.195$  hypersomnia like I've said before,

NOTE Confidence: 0.843064995

00:11:57.200 --> 00:11:59.888 CSF hypocretin one concentrations are normal

NOTE Confidence: 0.843064995

 $00:11:59.888 \longrightarrow 00:12:02.910$  in patients with each of at the copper.

NOTE Confidence: 0.843064995

 $00:12:02.910 \longrightarrow 00:12:04.950$  Sonya well now there is.

NOTE Confidence: 0.843064995

 $00:12:04.950 \longrightarrow 00:12:07.320$  There was some, you know discussions

NOTE Confidence: 0.843064995

 $00:12:07.320 \longrightarrow 00:12:10.250$  and talks about the role of histamine.

NOTE Confidence: 0.7599491

 $00:12:12.610 \longrightarrow 00:12:15.158$  And the reduce use of histamine has

NOTE Confidence: 0.7599491

00:12:15.158 --> 00:12:17.728 been observed in narcolepsy type one,

NOTE Confidence: 0.7599491

 $00{:}12{:}17.730 \to 00{:}12{:}22.446$  as well as IH, but was normally no say.

NOTE Confidence: 0.7599491

 $00:12:22.450 \longrightarrow 00:12:24.255$  So this chart is essentially

NOTE Confidence: 0.7599491

 $00:12:24.255 \longrightarrow 00:12:26.544$  demonstrates you know the level of

NOTE Confidence: 0.7599491

 $00{:}12{:}26.544 \dashrightarrow 00{:}12{:}28.228$  hypocretin levels in narcolepsy.

NOTE Confidence: 0.7599491

 $00:12:28.230 \longrightarrow 00:12:30.558$  Type one and you can see

NOTE Confidence: 0.7599491

 $00:12:30.558 \longrightarrow 00:12:32.460$  where the blue arrow is.

 $00:12:32.460 \longrightarrow 00:12:34.390$  That tends to be low.

NOTE Confidence: 0.7599491

 $00:12:34.390 \longrightarrow 00:12:35.930$  It's, but it's normal.

NOTE Confidence: 0.7599491

 $00:12:35.930 \longrightarrow 00:12:36.700$  In narcolepsy,

NOTE Confidence: 0.7599491

 $00:12:36.700 \longrightarrow 00:12:38.620$  without cataplexy as well as

NOTE Confidence: 0.7599491

 $00:12:38.620 \longrightarrow 00:12:40.156$  normal in idiopathic hypersomnia.

NOTE Confidence: 0.7113056

 $00:12:44.160 \longrightarrow 00:12:48.756$  So this was the study done

NOTE Confidence: 0.7113056

 $00:12:48.756 \longrightarrow 00:12:51.820$  by Doctor Scott Akashi.

NOTE Confidence: 0.7113056

 $00{:}12{:}51.820 \dashrightarrow 00{:}12{:}54.286$  I'm mispronouncing the name and it

NOTE Confidence: 0.7113056

00:12:54.286 --> 00:12:56.953 basically shows that the lower CSF

NOTE Confidence: 0.7113056

 $00:12:56.953 \longrightarrow 00:12:59.323$  histamine levels mostly observed in

NOTE Confidence: 0.7113056

 $00:12:59.323 \longrightarrow 00:13:01.765$  non medicated patients and significant

NOTE Confidence: 0.7113056

 $00:13:01.765 \longrightarrow 00:13:04.135$  reductions in histamine levels were

NOTE Confidence: 0.7113056

00:13:04.135 --> 00:13:06.820 observed only in non medicated patients

NOTE Confidence: 0.7113056

 $00:13:06.820 \longrightarrow 00:13:08.500$  with hypocretin deficient narcolepsy

NOTE Confidence: 0.7113056

 $00:13:08.500 \longrightarrow 00:13:11.060$  with cataplexy and idiopathic hypersomnia.

00:13:11.060 --> 00:13:14.948 But then. Um, another study comes

NOTE Confidence: 0.7113056

 $00:13:14.948 \longrightarrow 00:13:19.579$  along and kind of disproves this.

NOTE Confidence: 0.7113056

 $00:13:19.580 \longrightarrow 00:13:21.656$  So, uh, is CSF.

NOTE Confidence: 0.7113056

00:13:21.656 --> 00:13:23.213 Histamine biomarker reflecting

NOTE Confidence: 0.7113056

00:13:23.213 --> 00:13:26.498 the degree of hypersomnia over H?

NOTE Confidence: 0.7113056

 $00:13:26.500 \longrightarrow 00:13:31.855$  And basically TMH is a stable metabolite

NOTE Confidence: 0.7113056

 $00:13:31.855 \longrightarrow 00:13:37.508$  of histamine and this group has measured.

NOTE Confidence: 0.7113056

 $00:13:37.510 \longrightarrow 00:13:40.186$  Histamine levels in CSF in patients

NOTE Confidence: 0.7113056

 $00{:}13{:}40.186 \dashrightarrow 00{:}13{:}41.970$  with different ideologists of

NOTE Confidence: 0.7113056

00:13:42.047 --> 00:13:44.039 excessive daytime sleepiness,

NOTE Confidence: 0.7113056

 $00:13:44.040 \longrightarrow 00:13:46.044$  so narcolepsy type ones

NOTE Confidence: 0.7113056

00:13:46.044 --> 00:13:47.547 narcolepsy without cataplexy,

NOTE Confidence: 0.7113056

 $00:13:47.550 \longrightarrow 00:13:50.862$  Type 2 as well as in patients with

NOTE Confidence: 0.7113056

 $00:13:50.862 \longrightarrow 00:13:54.075$  age opathic hypersomnia and those

NOTE Confidence: 0.7113056

 $00:13:54.075 \longrightarrow 00:13:56.370$  with unspecified hypersomnia.

NOTE Confidence: 0.7113056

00:13:56.370 --> 00:13:59.506 And when they did their final analysis,

00:13:59.510 --> 00:14:01.310 basically they saw no

NOTE Confidence: 0.7113056

 $00{:}14{:}01.310 \dashrightarrow 00{:}14{:}02.210$  significant associations.

NOTE Confidence: 0.642477

 $00:14:06.220 \longrightarrow 00:14:10.724$  So then all the glances turned to Gabo.

NOTE Confidence: 0.642477

00:14:10.730 --> 00:14:14.078 And you know God is promising.

NOTE Confidence: 0.642477

 $00{:}14{:}14.080 \dashrightarrow 00{:}14{:}16.418$  So I guess I'm starting the slide

NOTE Confidence: 0.642477

 $00{:}14{:}16.418 \dashrightarrow 00{:}14{:}18.932$  saying that there was a study that

NOTE Confidence: 0.642477

00:14:18.932 --> 00:14:21.092 looked at 32 hyper somnolent patients,

NOTE Confidence: 0.642477

00:14:21.100 --> 00:14:23.557 and so again a function GABA A.

NOTE Confidence: 0.642477

 $00:14:23.560 \longrightarrow 00:14:25.940$  But what does it mean?

NOTE Confidence: 0.642477

 $00{:}14{:}25.940 \dashrightarrow 00{:}14{:}29.223$  So um Garba is receptors are the

NOTE Confidence: 0.642477

00:14:29.223 --> 00:14:30.630 major inhibitory neurotransmitter

NOTE Confidence: 0.642477

 $00{:}14{:}30.707 \dashrightarrow 00{:}14{:}32.767$  receptors in mammalian brain.

NOTE Confidence: 0.642477

00:14:32.770 --> 00:14:36.578 Just to give a quick background they are

NOTE Confidence: 0.642477

 $00:14:36.578 \longrightarrow 00:14:40.060$  located in the postsynaptic membrane.

NOTE Confidence: 0.642477

00:14:40.060 --> 00:14:41.854 And there's fasic,

 $00:14:41.854 \longrightarrow 00:14:44.246$  which is fast inhibition.

NOTE Confidence: 0.642477

00:14:44.250 --> 00:14:47.958 Uh, and each is a form of GABAA consists

NOTE Confidence: 0.642477

 $00{:}14{:}47.958 \dashrightarrow 00{:}14{:}51.154$  of five homologous or identical

NOTE Confidence: 0.642477

 $00:14:51.154 \longrightarrow 00:14:54.509$  subunits around an essential chloride

NOTE Confidence: 0.642477

 $00:14:54.509 \longrightarrow 00:14:58.539$  ion selective channel created by Gabo.

NOTE Confidence: 0.642477

 $00{:}14{:}58.540 \dashrightarrow 00{:}15{:}01.718$  We don't know how many isoforms of

NOTE Confidence: 0.642477

 $00{:}15{:}01.718 \dashrightarrow 00{:}15{:}03.849$  these receptors actually do exist.

NOTE Confidence: 0.642477

 $00:15:03.850 \longrightarrow 00:15:06.150$  And these receptors can inactivate

NOTE Confidence: 0.642477

 $00{:}15{:}06.150 \dashrightarrow 00{:}15{:}08.450$  wide spread regions of the brain

NOTE Confidence: 0.642477

 $00:15:08.525 \longrightarrow 00:15:10.757$  and therefore dampen consciousness

NOTE Confidence: 0.642477

 $00{:}15{:}10.757 \dashrightarrow 00{:}15{:}12.989$  and therefore regulate sleep.

NOTE Confidence: 0.642477

 $00{:}15{:}12.990 \to 00{:}15{:}15.540$  An obviously GABA A receptors are

NOTE Confidence: 0.642477

 $00:15:15.540 \longrightarrow 00:15:17.950$  responsive to wide variety of drugs.

NOTE Confidence: 0.642477

 $00:15:17.950 \longrightarrow 00:15:21.177$  We all know and use Benzodiazepine's which

NOTE Confidence: 0.642477

 $00:15:21.177 \longrightarrow 00:15:25.249$  are used for sedatives and hypnotic effects.

NOTE Confidence: 0.642477

 $00:15:25.250 \longrightarrow 00:15:27.190$  But then the question is,

00:15:27.190 --> 00:15:30.673 you know why is it a sign of hope?

NOTE Confidence: 0.642477

00:15:30.680 --> 00:15:31.058 Well,

NOTE Confidence: 0.642477

 $00:15:31.058 \longrightarrow 00:15:33.704$  because we haven't agonist of GABA A

NOTE Confidence: 0.642477

 $00:15:33.704 \longrightarrow 00:15:35.586$  receptors flumazenil which was shown

NOTE Confidence: 0.642477

 $00{:}15{:}35.586 \dashrightarrow 00{:}15{:}37.710$  to improve vigilance and some patients

NOTE Confidence: 0.642477

 $00:15:37.710 \longrightarrow 00:15:39.988$  with hepatic encephalopathy as well,

NOTE Confidence: 0.642477

 $00:15:39.990 \longrightarrow 00:15:43.218$  and those who are sleep deprived.

NOTE Confidence: 0.642477

 $00:15:43.220 \longrightarrow 00:15:44.972$  We don't necessarily know

NOTE Confidence: 0.642477

 $00:15:44.972 \longrightarrow 00:15:47.162$  for sure why it works,

NOTE Confidence: 0.642477

 $00{:}15{:}47.170 \dashrightarrow 00{:}15{:}50.222$  and we also know that the benefit

NOTE Confidence: 0.642477

 $00:15:50.222 \longrightarrow 00:15:52.880$  of this medication is short lived.

NOTE Confidence: 0.677344375

00:15:54.960 --> 00:15:59.498 Um? So like I said before, you know,

NOTE Confidence: 0.677344375

 $00{:}15{:}59.498 \dashrightarrow 00{:}16{:}02.396$  this is a demonstration of the eyes,

NOTE Confidence: 0.677344375

 $00:16:02.400 \longrightarrow 00:16:06.010$  a form which is made of two A2 beta and

NOTE Confidence: 0.677344375

 $00:16:06.110 \longrightarrow 00:16:09.416$  one gamma subunit, and when the receptors

00:16:09.416 --> 00:16:12.330 are activated by the binding of GABA,

NOTE Confidence: 0.677344375

 $00:16:12.330 \longrightarrow 00:16:14.745$  the ion channel opens, allowing

NOTE Confidence: 0.677344375

 $00:16:14.745 \longrightarrow 00:16:18.160$  chloride ions to pass into the neuron.

NOTE Confidence: 0.677344375

00:16:18.160 --> 00:16:21.860 Negatively charged ions enter.

NOTE Confidence: 0.677344375

 $00:16:21.860 \longrightarrow 00:16:25.088$  In the influx of these negative

NOTE Confidence: 0.677344375

 $00:16:25.088 \longrightarrow 00:16:27.861$  charges inhibits neuron firing action

NOTE Confidence: 0.677344375

 $00:16:27.861 \longrightarrow 00:16:31.059$  potential and then you get sedation.

NOTE Confidence: 0.677344375

00:16:31.060 --> 00:16:33.566 Also, GABA is actually known to bind

NOTE Confidence: 0.677344375

 $00{:}16{:}33.566 \dashrightarrow 00{:}16{:}35.684$  between Alpha subunit, an beta,

NOTE Confidence: 0.677344375

 $00:16:35.684 \longrightarrow 00:16:38.816$  which is was demonstrated on this.

NOTE Confidence: 0.677344375

 $00:16:38.820 \longrightarrow 00:16:41.010$  Picture. Um?

NOTE Confidence: 0.75092614

 $00:16:43.320 \longrightarrow 00:16:45.558$  And benzos can only buy in

NOTE Confidence: 0.75092614

 $00{:}16{:}45.558 \dashrightarrow 00{:}16{:}47.750$  between Gama an Alpha subunit.

NOTE Confidence: 0.7954349

 $00:16:51.680 \longrightarrow 00:16:54.459$  So essentially to think about it is

NOTE Confidence: 0.7954349

 $00:16:54.459 \longrightarrow 00:16:57.245$  to say deficit of wakefulness means

NOTE Confidence: 0.7954349

 $00:16:57.245 \longrightarrow 00:17:00.263$  excessive activity of GABA a system.

 $00:17:00.270 \longrightarrow 00:17:02.976$  And how do we address it?

NOTE Confidence: 0.7954349

 $00:17:02.980 \longrightarrow 00:17:05.240$  How do we manage it?

NOTE Confidence: 0.7954349

00:17:05.240 --> 00:17:08.376 So the team at Emory speak speculate the

NOTE Confidence: 0.7954349

 $00:17:08.376 \longrightarrow 00:17:10.769$  existence of this endogenous ligands

NOTE Confidence: 0.7954349

 $00{:}17{:}10.769 \dashrightarrow 00{:}17{:}13.829$  that can affect the receptor function.

NOTE Confidence: 0.7954349

 $00:17:13.830 \longrightarrow 00:17:16.086$  Essentially, that can normalize

NOTE Confidence: 0.7954349

 $00:17:16.086 \longrightarrow 00:17:17.778$  the receptor function.

NOTE Confidence: 0.7954349

 $00:17:17.780 \longrightarrow 00:17:20.868$  And they enrolled 10 men and 20 two

NOTE Confidence: 0.7954349

00:17:20.868 --> 00:17:24.306 women who were who had chronic primary

NOTE Confidence: 0.7954349

 $00:17:24.306 \longrightarrow 00:17:27.759$  hypersomnia they have for sleep in a

NOTE Confidence: 0.7954349

 $00{:}17{:}27.759 \dashrightarrow 00{:}17{:}30.919$  scale beyond that mean would be about 17.

NOTE Confidence: 0.7954349

 $00:17:30.920 \longrightarrow 00:17:34.232$  And despite the fact that they've

NOTE Confidence: 0.7954349

 $00:17:34.232 \longrightarrow 00:17:37.489$  had plenty of hours of sleep.

NOTE Confidence: 0.7954349

00:17:37.490 --> 00:17:39.015 The main subject was what

NOTE Confidence: 0.7954349

 $00:17:39.015 \longrightarrow 00:17:40.235$  they were all mostly.

00:17:40.240 --> 00:17:42.994 Name it 30s and the mean BMI was 20,

NOTE Confidence: 0.7954349

00:17:43.000 --> 00:17:44.192 about 25.

NOTE Confidence: 0.7954349

00:17:44.192 --> 00:17:46.576 And daytime sleepiness was

NOTE Confidence: 0.7954349

 $00:17:46.576 \longrightarrow 00:17:49.560$  also confirmed with the MSLT.

NOTE Confidence: 0.7954349

 $00:17:49.560 \longrightarrow 00:17:52.248$  So they identify the presence of

NOTE Confidence: 0.7954349

00:17:52.248 --> 00:17:54.668 endogenous substance in the CSF

NOTE Confidence: 0.7954349

 $00:17:54.668 \longrightarrow 00:17:56.876$  of patients with hypersomnolence,

NOTE Confidence: 0.7954349

 $00:17:56.880 \longrightarrow 00:17:59.808$  which increases GABA a inhibitory effects.

NOTE Confidence: 0.7954349

 $00{:}17{:}59.810 \dashrightarrow 00{:}18{:}02.185$  This endogenous substance was shown

NOTE Confidence: 0.7954349

 $00:18:02.185 \longrightarrow 00:18:05.635$  to act to increase the influx of

NOTE Confidence: 0.7954349

 $00{:}18{:}05.635 \dashrightarrow 00{:}18{:}08.587$  chloride ions through GABA a receptor,

NOTE Confidence: 0.7954349

 $00:18:08.590 \longrightarrow 00:18:12.556$  increase the inhibition of the neuron.

NOTE Confidence: 0.7954349

 $00:18:12.560 \longrightarrow 00:18:14.250$  So it does not activate.

NOTE Confidence: 0.7954349

 $00{:}18{:}14.250 \dashrightarrow 00{:}18{:}16.266$  There is the government sector itself,

NOTE Confidence: 0.7954349

 $00:18:16.270 \longrightarrow 00:18:19.276$  it just makes it more efficient.

NOTE Confidence: 0.7954349

 $00:18:19.280 \longrightarrow 00:18:22.660$  An flumazenil prevents the binding.

00:18:22.660 --> 00:18:26.264 Um Overture gabaa receptor.

NOTE Confidence: 0.7954349

 $00:18:26.264 \longrightarrow 00:18:28.967$  So when it?

NOTE Confidence: 0.7954349

00:18:28.970 --> 00:18:31.694 When the GABAA receptor is exposed

NOTE Confidence: 0.7954349

 $00:18:31.694 \longrightarrow 00:18:34.284$  to this endogenous ligands as well

NOTE Confidence: 0.7954349

 $00:18:34.284 \longrightarrow 00:18:36.713$  As for marginals at the same time,

NOTE Confidence: 0.7954349

 $00:18:36.720 \longrightarrow 00:18:38.760$  the function of the receptor

NOTE Confidence: 0.7954349

 $00:18:38.760 \longrightarrow 00:18:39.984$  returns to normal.

NOTE Confidence: 0.7954349

 $00:18:39.990 \longrightarrow 00:18:42.030$  Therefore, be fewer negatively charged.

NOTE Confidence: 0.7954349

00:18:42.030 --> 00:18:44.070 Chloride ions entering the neuron,

NOTE Confidence: 0.7954349

 $00{:}18{:}44.070 \dashrightarrow 00{:}18{:}46.380$  and therefore they will be normal

NOTE Confidence: 0.7954349

 $00:18:46.380 \longrightarrow 00:18:48.960$  level of inhibition in less sedation.

NOTE Confidence: 0.7815892

 $00:18:52.670 \longrightarrow 00:18:54.260$  Again, benzos benzodiazepine's.

NOTE Confidence: 0.7815892

 $00{:}18{:}54.260 \dashrightarrow 00{:}18{:}57.970$  An indulgent molecules are not the same,

NOTE Confidence: 0.7815892

 $00:18:57.970 \longrightarrow 00:19:01.680$  and in general more research is needed.

NOTE Confidence: 0.7815892

 $00:19:01.680 \longrightarrow 00:19:04.330$  Needed to understand this phenomenon.

 $00:19:06.430 \longrightarrow 00:19:08.810$  Well, the next question is,

NOTE Confidence: 0.83709663

 $00{:}19{:}08.810 \dashrightarrow 00{:}19{:}12.023$  is there role of circadian regulation in

NOTE Confidence: 0.83709663

00:19:12.023 --> 00:19:15.162 hypersomnia and we would be looking and

NOTE Confidence: 0.83709663

 $00:19:15.162 \longrightarrow 00:19:18.335$  we know that the circadian master Clock

NOTE Confidence: 0.83709663

00:19:18.335 --> 00:19:21.190 is located in suprachiasmatic nucleus,

NOTE Confidence: 0.83709663

00:19:21.190 --> 00:19:24.865 is driven by a network of transcriptional

NOTE Confidence: 0.83709663

 $00{:}19{:}24.865 \dashrightarrow 00{:}19{:}28.490$  feedback loops of circadian Clock genes.

NOTE Confidence: 0.83709663

 $00:19:28.490 \longrightarrow 00:19:31.186$  Um? There was a study done by Lippert

NOTE Confidence: 0.83709663

 $00:19:31.186 \longrightarrow 00:19:32.857$  who basically investigated dynamics

NOTE Confidence: 0.83709663

 $00:19:32.857 \longrightarrow 00:19:35.635$  of expression of circadian Clock genes

NOTE Confidence: 0.83709663

 $00{:}19{:}35.635 \dashrightarrow 00{:}19{:}38.349$  in dermal fibroblast of patients with

NOTE Confidence: 0.83709663

 $00:19:38.349 \longrightarrow 00:19:40.929$  idiopathic hypersomnia had 10 of them

NOTE Confidence: 0.83709663

 $00:19:40.930 \longrightarrow 00:19:43.562$  in comparison to those who were healthy

NOTE Confidence: 0.83709663

 $00:19:43.562 \longrightarrow 00:19:46.677$  and they saw that there was a circadian

NOTE Confidence: 0.83709663

 $00:19:46.677 \longrightarrow 00:19:49.375$  ask ask isolation of Clock genes and

NOTE Confidence: 0.83709663

 $00:19:49.375 \longrightarrow 00:19:52.586$  basically these were so you have on the left.

00:19:52.586 --> 00:19:55.218 You have healthy controls and a jetpack.

NOTE Confidence: 0.83709663

 $00{:}19{:}55.220 \to 00{:}19{:}57.145$  Patients with opathic hypersomnia and

NOTE Confidence: 0.83709663

 $00:19:57.145 \longrightarrow 00:20:00.188$  you see that there is a difference in.

NOTE Confidence: 0.83709663

00:20:00.190 --> 00:20:04.774 Amplitude. Are related to each of the genes,

NOTE Confidence: 0.83709663

 $00:20:04.780 \longrightarrow 00:20:06.965$  so amplitude of the rhythmically

NOTE Confidence: 0.83709663

 $00:20:06.965 \longrightarrow 00:20:10.468$  expressed genes, BML, 1P1, and P or two.

NOTE Confidence: 0.83709663

00:20:10.470 --> 00:20:13.662 It was significantly dampened an patients

NOTE Confidence: 0.83709663

 $00:20:13.662 \longrightarrow 00:20:18.097$  in A5 internal fab list of patients with IH.

NOTE Confidence: 0.83709663

 $00:20:18.100 \longrightarrow 00:20:20.956$  So that suggests that there is an abnormality

NOTE Confidence: 0.83709663

 $00:20:20.956 \longrightarrow 00:20:23.948$  in the circadian Clock in iih patients.

NOTE Confidence: 0.82421756

 $00:20:28.350 \longrightarrow 00:20:31.262$  So to kind of summarize is you know

NOTE Confidence: 0.82421756

 $00{:}20{:}31.262 \dashrightarrow 00{:}20{:}34.679$  so far what I've found in literature.

NOTE Confidence: 0.82421756

 $00{:}20{:}34.680 \dashrightarrow 00{:}20{:}37.872$  A lot of it is not definite and

NOTE Confidence: 0.82421756

 $00:20:37.872 \longrightarrow 00:20:41.090$  still being studied and investigated.

NOTE Confidence: 0.82421756

 $00:20:41.090 \longrightarrow 00:20:42.502$  We know that hypocretin

 $00:20:42.502 \longrightarrow 00:20:43.914$  deficiency is not present.

NOTE Confidence: 0.82421756

00:20:43.920 --> 00:20:46.310 We know super spinal fluid

NOTE Confidence: 0.82421756

 $00:20:46.310 \longrightarrow 00:20:48.222$  from patients with age.

NOTE Confidence: 0.82421756

00:20:48.230 --> 00:20:50.432 Have been shown to enhance activity

NOTE Confidence: 0.82421756

 $00:20:50.432 \longrightarrow 00:20:52.860$  of GABA a GABA A receptors.

NOTE Confidence: 0.79670715

 $00{:}20{:}55.960 \dashrightarrow 00{:}20{:}58.924$  Well, the next I guess approach

NOTE Confidence: 0.79670715

 $00:20:58.924 \longrightarrow 00:21:03.226$  to look at if there is immunol

NOTE Confidence: 0.79670715

 $00:21:03.226 \longrightarrow 00:21:06.174$  kind of immunological effects.

NOTE Confidence: 0.79670715

 $00{:}21{:}06.180 \dashrightarrow 00{:}21{:}08.988$  So this was a study by Donna Karan

NOTE Confidence: 0.79670715

00:21:08.988 --> 00:21:11.646 Honda and they assessed immuno

NOTE Confidence: 0.79670715

 $00:21:11.646 \longrightarrow 00:21:14.138$  immunoglobulins IgG profiles in

NOTE Confidence: 0.79670715

 $00:21:14.138 \longrightarrow 00:21:16.963$  narcolepsy with cataplexy patients who

NOTE Confidence: 0.79670715

 $00:21:16.963 \longrightarrow 00:21:20.008$  had who are positive for each other.

NOTE Confidence: 0.79670715

00:21:20.010 --> 00:21:23.150 HLA DQ B 10602 allele.

NOTE Confidence: 0.79670715

 $00:21:23.150 \longrightarrow 00:21:25.514$  Um, as well as patients with

NOTE Confidence: 0.79670715

 $00{:}21{:}25.514 \dashrightarrow 00{:}21{:}26.696$ age opathic hypersomnia,

 $00:21:26.700 \longrightarrow 00:21:31.364$  as well as those who are healthy controls.

NOTE Confidence: 0.79670715

 $00:21:31.370 \longrightarrow 00:21:33.815$  So the distribution of serum

NOTE Confidence: 0.79670715

00:21:33.815 --> 00:21:35.771 IgG significantly differed among

NOTE Confidence: 0.79670715

 $00:21:35.771 \longrightarrow 00:21:38.077$  patients with narcolepsy type one.

NOTE Confidence: 0.79670715

 $00:21:38.080 \longrightarrow 00:21:40.954$  Those with my age and those

NOTE Confidence: 0.79670715

 $00:21:40.954 \longrightarrow 00:21:42.870$  who are healthy controls,

NOTE Confidence: 0.79670715

 $00:21:42.870 \longrightarrow 00:21:46.694$  so decreased IgG one decreased IgG 2 levels.

NOTE Confidence: 0.79670715

 $00:21:46.700 \longrightarrow 00:21:49.718$  Stable expression of IgG three an

NOTE Confidence: 0.79670715

 $00:21:49.718 \longrightarrow 00:21:52.695$  increase in proportion of IgG four

NOTE Confidence: 0.79670715

00:21:52.695 --> 00:21:55.317 was seen in narcolepsy type one.

NOTE Confidence: 0.79670715

 $00:21:55.320 \longrightarrow 00:21:58.374$  However, in contrast to that to

NOTE Confidence: 0.79670715

 $00:21:58.374 \longrightarrow 00:22:01.150$  narcolepsy type one and Type 1.

NOTE Confidence: 0.79670715

 $00:22:01.150 \longrightarrow 00:22:03.322$  In patients with idiopathic

NOTE Confidence: 0.79670715

 $00{:}22{:}03.322 \dashrightarrow 00{:}22{:}07.550$ hypersomnia IgG one and I just do I

NOTE Confidence: 0.79670715

 $00:22:07.550 \longrightarrow 00:22:10.609$  did you 2 just imbalance was present.

 $00:22:10.610 \longrightarrow 00:22:13.196$  There was a decrease in IgG.

NOTE Confidence: 0.79670715

 $00:22:13.200 \longrightarrow 00:22:15.312$  Two increase in IgG,

NOTE Confidence: 0.79670715

 $00:22:15.312 \longrightarrow 00:22:17.424$  three analogy for levels.

NOTE Confidence: 0.79670715

 $00:22:17.430 \longrightarrow 00:22:22.379$  And that favors the theory of role

NOTE Confidence: 0.79670715

 $00:22:22.379 \longrightarrow 00:22:25.371$  of immunological differences between

NOTE Confidence: 0.79670715

 $00{:}22{:}25.371 \dashrightarrow 00{:}22{:}29.131$  type One narcolepsy and idiopathic

NOTE Confidence: 0.79670715

00:22:29.131 --> 00:22:32.820 hypersomnia and the fact that.

NOTE Confidence: 0.79670715

 $00:22:32.820 \longrightarrow 00:22:36.290 \text{ IgG one IgG to ratio.}$ 

NOTE Confidence: 0.79670715

 $00{:}22{:}36.290 --> 00{:}22{:}37.758$  Energetic hypersomnia.

NOTE Confidence: 0.79670715

 $00:22:37.758 \longrightarrow 00:22:39.960$  Uh was increased,

NOTE Confidence: 0.79670715

 $00{:}22{:}39.960 \dashrightarrow 00{:}22{:}43.019$  appoints out to a role of type

NOTE Confidence: 0.79670715

 $00:22:43.019 \longrightarrow 00:22:46.169$  one helper T cell involvement.

NOTE Confidence: 0.794419

 $00:22:50.180 \longrightarrow 00:22:52.805$  Well, a lot of these symptoms we

NOTE Confidence: 0.794419

00:22:52.805 --> 00:22:54.958 have already discussed to this point,

NOTE Confidence: 0.794419

 $00:22:54.960 \longrightarrow 00:22:57.403$  but guess two reviewed one last time

NOTE Confidence: 0.794419

 $00:22:57.403 \longrightarrow 00:23:00.118$  is to say well symptoms of iih,

 $00:23:00.120 \longrightarrow 00:23:02.696$  what to look for when we are

NOTE Confidence: 0.794419

 $00:23:02.696 \longrightarrow 00:23:03.800$  interviewing our patients.

NOTE Confidence: 0.794419

 $00:23:03.800 \longrightarrow 00:23:06.369$  Long sleep duration more than 9 hours.

NOTE Confidence: 0.794419

 $00:23:06.370 \longrightarrow 00:23:08.205$  They've these patients will have

NOTE Confidence: 0.794419

 $00{:}23{:}08.205 \longrightarrow 00{:}23{:}09.673$  prolonged and unrefreshing naps,

NOTE Confidence: 0.794419

 $00:23:09.680 \longrightarrow 00:23:11.880$  so there tends to be no benefit an

NOTE Confidence: 0.794419

00:23:11.880 --> 00:23:14.003 you know prescribing them kind of

NOTE Confidence: 0.794419

00:23:14.003 --> 00:23:16.265 scheduled naps is there is benefit

NOTE Confidence: 0.794419

 $00:23:16.334 \longrightarrow 00:23:18.634$  with narcoleptics type one patients

NOTE Confidence: 0.794419

 $00{:}23{:}18.634 \dashrightarrow 00{:}23{:}20.934$  sleep inertia and sleep drunkenness.

NOTE Confidence: 0.794419

 $00:23:20.940 \longrightarrow 00:23:24.078$  Basically the it's to mean prolonged

NOTE Confidence: 0.794419

 $00:23:24.078 \longrightarrow 00:23:26.786$  and pronounced difficulty with awakening

NOTE Confidence: 0.794419

 $00{:}23{:}26.786 \dashrightarrow 00{:}23{:}29.996$  from nocturnal sleep and day time naps.

NOTE Confidence: 0.794419

 $00:23:30.000 \longrightarrow 00:23:33.198$  Sensation of this brain fog cognitive

NOTE Confidence: 0.794419

00:23:33.198 --> 00:23:35.866 dysfunction so 79% of patients

 $00{:}23{:}35.866 \to 00{:}23{:}38.531$  with age report memory problems

NOTE Confidence: 0.794419

00:23:38.531 --> 00:23:40.130 and attention problems.

NOTE Confidence: 0.7858514

 $00{:}23{:}44.050 \dashrightarrow 00{:}23{:}46.867$  Well, I guess on PSG you know roll out

NOTE Confidence: 0.7858514

 $00:23:46.867 \longrightarrow 00:23:49.848$  a sleep related breathing disorder.

NOTE Confidence: 0.7858514

 $00:23:49.850 \longrightarrow 00:23:53.042$  One thing to do. Sleep efficiency

NOTE Confidence: 0.7858514

 $00:23:53.042 \longrightarrow 00:23:56.180$  tends to be greater than 90%.

NOTE Confidence: 0.7858514

 $00:23:56.180 \longrightarrow 00:23:58.160$  They've been proposition of abnormalities

NOTE Confidence: 0.7858514

00:23:58.160 --> 00:24:00.910 in a slow wave sleep percentage,

NOTE Confidence: 0.7858514

 $00{:}24{:}00.910 \dashrightarrow 00{:}24{:}03.370$  and there was a very small

NOTE Confidence: 0.7858514

 $00:24:03.370 \longrightarrow 00:24:05.010$  study that suggested increasing

NOTE Confidence: 0.7858514

 $00{:}24{:}05.089 \dashrightarrow 00{:}24{:}06.929$  spindle activity in Egypt.

NOTE Confidence: 0.7858514

00:24:06.930 --> 00:24:09.378 Ethic cover somnia patients

NOTE Confidence: 0.7858514

 $00:24:09.378 \longrightarrow 00:24:12.438$  compared to those with narcolepsy.

NOTE Confidence: 0.7858514

 $00:24:12.440 \longrightarrow 00:24:14.624$  MSL T shows and mean sleep latency

NOTE Confidence: 0.7858514

 $00:24:14.624 \longrightarrow 00:24:16.988$  of equal or less than 8 minutes,

NOTE Confidence: 0.7858514

 $00{:}24{:}16.990 \dashrightarrow 00{:}24{:}19.265$  no more than once or an onymous Lt.

 $00:24:19.270 \longrightarrow 00:24:21.538$  OK an I as I've mentioned before,

NOTE Confidence: 0.7858514

 $00{:}24{:}21.540 \dashrightarrow 00{:}24{:}24.740$  objectively measured sleep time or.

NOTE Confidence: 0.7858514

 $00:24:24.740 \longrightarrow 00:24:26.540$  Sleep off 660 minutes.

NOTE Confidence: 0.85531336

00:24:30.330 --> 00:24:32.310 So differential diagnosis for ages,

NOTE Confidence: 0.85531336

 $00:24:32.310 \longrightarrow 00:24:36.510$  mainly narcolepsy type one and Type 2 and

NOTE Confidence: 0.85531336

 $00:24:36.510 \longrightarrow 00:24:41.094$  I think the you know there are a lot of.

NOTE Confidence: 0.85531336

 $00:24:41.100 \longrightarrow 00:24:43.473$  There's a lot of overlap in symptoms

NOTE Confidence: 0.85531336

 $00:24:43.473 \longrightarrow 00:24:45.818$  between the three of three conditions,

NOTE Confidence: 0.85531336

 $00:24:45.820 \longrightarrow 00:24:49.188$  but the biggest one to know is the

NOTE Confidence: 0.85531336

 $00:24:49.188 \longrightarrow 00:24:52.309$  cataplexy would only be present in Type 1.

NOTE Confidence: 0.85531336

 $00:24:52.310 \longrightarrow 00:24:55.160$  By the definition.

NOTE Confidence: 0.85531336

00:24:55.160 --> 00:24:57.860 So here we discuss cataplexy.

NOTE Confidence: 0.85531336

 $00{:}24{:}57.860 \dashrightarrow 00{:}25{:}00.564$  Excessive day time sleepiness is

NOTE Confidence: 0.85531336

 $00:25:00.564 \longrightarrow 00:25:04.620$  present in all three sleep paralysis.

NOTE Confidence: 0.85531336

 $00:25:04.620 \longrightarrow 00:25:08.708$  Is present mostly in type one type

00:25:08.708 --> 00:25:12.112 two and only 20% of idiopathic

NOTE Confidence: 0.85531336

 $00{:}25{:}12.112 \dashrightarrow 00{:}25{:}13.840$  hypersomnia patients sleep.

NOTE Confidence: 0.85531336

 $00:25:13.840 \longrightarrow 00:25:15.565$  Hallucinations again mostly

NOTE Confidence: 0.85531336

00:25:15.565 --> 00:25:17.865 present in type one.

NOTE Confidence: 0.85531336

 $00:25:17.870 \longrightarrow 00:25:20.174$  Narcoleptic patients in about

NOTE Confidence: 0.85531336

 $00:25:20.174 \longrightarrow 00:25:22.830$  25% of patients with IH.

NOTE Confidence: 0.85531336

 $00:25:22.830 \longrightarrow 00:25:25.950$  And having all these symptoms together

NOTE Confidence: 0.85531336

00:25:26.045 --> 00:25:29.440 kind of brings you more to diagnosis

NOTE Confidence: 0.85531336

 $00{:}25{:}29.440 \to 00{:}25{:}33.677$  of narcolepsy type one and not so much

NOTE Confidence: 0.85531336

 $00:25:33.677 \longrightarrow 00:25:35.829$  of idiopathic hypersomnia narcolepsy

NOTE Confidence: 0.85531336

 $00{:}25{:}35.829 \dashrightarrow 00{:}25{:}38.650$  Type 2 fragmented nocturnal sleep,

NOTE Confidence: 0.85531336

 $00:25:38.650 \longrightarrow 00:25:41.500$  so people with narcolepsy type

NOTE Confidence: 0.85531336

00:25:41.500 --> 00:25:44.737 1 have lower sleep efficiency.

NOTE Confidence: 0.85531336

 $00{:}25{:}44.740 \dashrightarrow 00{:}25{:}47.308$  But it's not typical in patients

NOTE Confidence: 0.85531336

00:25:47.308 --> 00:25:49.020 with age opathic hypersomnia,

NOTE Confidence: 0.85531336

 $00{:}25{:}49.020 \dashrightarrow 00{:}25{:}51.558$  REM sleep behavior disorder may be

 $00:25:51.558 \longrightarrow 00:25:54.580$  seen in type one or collect ICS.

NOTE Confidence: 0.85531336

 $00{:}25{:}54.580 \dashrightarrow 00{:}25{:}57.155$  It hasn't really been studied

NOTE Confidence: 0.85531336

 $00:25:57.155 \longrightarrow 00:25:59.215$  in those with IH.

NOTE Confidence: 0.85531336

00:25:59.220 --> 00:26:03.406 Um, sleep drunkenness is tends to be

NOTE Confidence: 0.85531336

 $00:26:03.406 \longrightarrow 00:26:08.020$  rare in narcolepsy, but common in age.

NOTE Confidence: 0.85531336

 $00:26:08.020 \longrightarrow 00:26:09.430$  Opathic hypersomnia.

NOTE Confidence: 0.85531336

 $00:26:09.430 \longrightarrow 00:26:09.869$  Um?

NOTE Confidence: 0.85531336

00:26:09.869 --> 00:26:12.064 Glow nocturnal sleep times armor

NOTE Confidence: 0.85531336

00:26:12.064 --> 00:26:15.039 would be unaware side for narcolepsy,

NOTE Confidence: 0.85531336

 $00{:}26{:}15.040 \dashrightarrow 00{:}26{:}17.050$  but more common for idiopathic

NOTE Confidence: 0.85531336

 $00{:}26{:}17.050 \dashrightarrow 00{:}26{:}19.792$  hypersomnia and the fact that naps in

NOTE Confidence: 0.85531336

00:26:19.792 --> 00:26:22.088 it's very subjective kind of to ask,

NOTE Confidence: 0.85531336

00:26:22.090 --> 00:26:24.316 do you feel refreshed or not?

NOTE Confidence: 0.85531336

 $00{:}26{:}24.320 \dashrightarrow 00{:}26{:}26.300$  But Narcoleptics will tell you that

NOTE Confidence: 0.85531336

 $00:26:26.300 \longrightarrow 00:26:28.923$  the naps tend to be refreshing for

00:26:28.923 --> 00:26:30.983 them while they're not refreshing.

NOTE Confidence: 0.85531336

 $00:26:30.990 \longrightarrow 00:26:33.690$  For patients with idiopathic hypersomnia

NOTE Confidence: 0.85531336

 $00:26:33.690 \longrightarrow 00:26:37.349$  and they tend to take long naps.

NOTE Confidence: 0.85531336

 $00:26:37.350 \longrightarrow 00:26:41.725$  So how can you know this umbrella

NOTE Confidence: 0.85531336

00:26:41.725 --> 00:26:44.370 of differential diagnosis for

NOTE Confidence: 0.85531336

00:26:44.370 --> 00:26:46.998 hypersomnolence is is huge?

NOTE Confidence: 0.85531336

00:26:47.000 --> 00:26:49.030 You know you start with,

NOTE Confidence: 0.8553133600:26:49.030 --> 00:26:49.420 well.

NOTE Confidence: 0.85531336

 $00{:}26{:}49.420 \dashrightarrow 00{:}26{:}51.370$  Is there in sufficient sleep time

NOTE Confidence: 0.85531336

00:26:51.370 --> 00:26:53.900 you consider delayed sleep phase syndrome?

NOTE Confidence: 0.85531336

 $00{:}26{:}53.900 \dashrightarrow 00{:}26{:}55.930$  Hypersomnia may happen due to

NOTE Confidence: 0.85531336

00:26:55.930 --> 00:26:57.960 medical issues such as Parkinson,

NOTE Confidence: 0.85531336

 $00:26:57.960 \longrightarrow 00:27:00.110$  My atonic dystrophy and hypersomnia

NOTE Confidence: 0.85531336

00:27:00.110 --> 00:27:03.379 is can occur also due to psychiatric

NOTE Confidence: 0.85531336

 $00:27:03.379 \longrightarrow 00:27:05.969$  issues and it's interesting that.

NOTE Confidence: 0.85531336

00:27:05.970 --> 00:27:08.490 Looking at the Diagnostic and

00:27:08.490 --> 00:27:11.010 Statistical Manual of Mental Disorders,

NOTE Confidence: 0.85531336

 $00:27:11.010 \longrightarrow 00:27:12.048$  5th edition,

NOTE Confidence: 0.85531336

00:27:12.048 --> 00:27:14.643 hypersomnia is an optional clinical

NOTE Confidence: 0.85531336

00:27:14.643 --> 00:27:17.226 diagnostic criteria of several mental

NOTE Confidence: 0.85531336

00:27:17.226 --> 00:27:20.076 disorders and that would be included,

NOTE Confidence: 0.85531336

 $00:27:20.080 \longrightarrow 00:27:22.600$  including bipolar one Bipolar 2,

NOTE Confidence: 0.85531336

 $00:27:22.600 \longrightarrow 00:27:27.500$  which is more typical for bipolar 2.

NOTE Confidence: 0.85531336

 $00:27:27.500 \longrightarrow 00:27:31.842$  So patients with major depressive disorder,

NOTE Confidence: 0.85531336

 $00{:}27{:}31.842 \dashrightarrow 00{:}27{:}34.008$  persistent depressive disorder,

NOTE Confidence: 0.85531336

 $00:27:34.008 \longrightarrow 00:27:36.896$  patients with schizoaffective disorder

NOTE Confidence: 0.85531336

 $00{:}27{:}36.896 \dashrightarrow 00{:}27{:}40.530$  on other spectrum of schizophrenia,

NOTE Confidence: 0.85531336

 $00:27:40.530 \longrightarrow 00:27:45.348$  these patients will have this unusually

NOTE Confidence: 0.85531336

 $00{:}27{:}45.348 \dashrightarrow 00{:}27{:}48.560$  high Epworth sleepiness scale.

NOTE Confidence: 0.85531336

 $00:27:48.560 \longrightarrow 00:27:50.765$  But what's important about them is this.

NOTE Confidence: 0.85531336

 $00:27:50.770 \longrightarrow 00:27:52.230$  This degree of sleepiness

 $00:27:52.230 \longrightarrow 00:27:54.780$  tends to vary from day to day.

NOTE Confidence: 0.85531336

 $00{:}27{:}54.780 \dashrightarrow 00{:}27{:}58.605$  An night sleep tends to be very poor quality.

NOTE Confidence: 0.85531336

 $00{:}27{:}58.610 \dashrightarrow 00{:}28{:}01.898$  Someone will report in somnia and again

NOTE Confidence: 0.85531336

00:28:01.898 --> 00:28:04.090 objective hypersomnolence is not

NOTE Confidence: 0.85531336

 $00:28:04.175 \longrightarrow 00:28:06.877$  going to be demonstrated on an SLT.

NOTE Confidence: 0.85531336

00:28:06.880 --> 00:28:09.436 And Hypersomnolence going back

NOTE Confidence: 0.85531336

 $00:28:09.436 \longrightarrow 00:28:11.353$  to Parkinson's hypersomnolence

NOTE Confidence: 0.85531336

 $00:28:11.353 \longrightarrow 00:28:14.031$  effects about observed in 16 to

NOTE Confidence: 0.85531336

 $00:28:14.031 \longrightarrow 00:28:16.368$  50% of patients with Parkinson's,

NOTE Confidence: 0.85531336

 $00:28:16.368 \longrightarrow 00:28:19.531$  and about 28% of patients who

NOTE Confidence: 0.85531336

 $00:28:19.531 \longrightarrow 00:28:21.639$  have my atonic dystrophy.

NOTE Confidence: 0.7893551

00:28:24.220 --> 00:28:26.932 Also, even viruses can produce both

NOTE Confidence: 0.7893551

 $00{:}28{:}26.932 \dashrightarrow 00{:}28{:}29.506$  somebody to hypersomnolence like viral

NOTE Confidence: 0.7893551

00:28:29.506 --> 00:28:31.600 pneumonias infectious mononucleosis,

NOTE Confidence: 0.7893551

00:28:31.600 --> 00:28:34.164 hepatitis B Valley virus,

NOTE Confidence: 0.7893551

00:28:34.164 --> 00:28:36.843 Guillain Barre syndrome. Um?

 $00:28:36.843 \longrightarrow 00:28:40.608$  So the the differential

NOTE Confidence: 0.7893551

00:28:40.608 --> 00:28:43.620 diagnosis is pretty big.

NOTE Confidence: 0.7893551

 $00:28:43.620 \longrightarrow 00:28:46.315$  And those who are loan sleepers but

NOTE Confidence: 0.7893551

00:28:46.315 --> 00:28:48.405 loan sleepers will feel refreshed

NOTE Confidence: 0.7893551

 $00:28:48.405 \longrightarrow 00:28:50.545$  after a long time sleeping.

NOTE Confidence: 0.7893551

 $00:28:50.550 \longrightarrow 00:28:54.080$  So this is was mostly kind of endorsed by the

NOTE Confidence: 0.7893551

00:28:54.162 --> 00:28:57.456 patients who have age opathic hypersomnia.

NOTE Confidence: 0.7893551

 $00:28:57.460 \longrightarrow 00:28:59.620$  So we want to ask,

NOTE Confidence: 0.7893551

 $00:28:59.620 \longrightarrow 00:29:03.295$  you know what helps you treatment wise.

NOTE Confidence: 0.7893551

00:29:03.300 --> 00:29:04.656 Um, you know,

NOTE Confidence: 0.7893551

 $00:29:04.656 \longrightarrow 00:29:06.916$  82% of patients will say,

NOTE Confidence: 0.7893551

 $00:29:06.920 \longrightarrow 00:29:09.659$  well, coffee, caffeine.

NOTE Confidence: 0.7893551

 $00:29:09.660 \longrightarrow 00:29:10.932$  It's interesting Lee,

NOTE Confidence: 0.7893551

 $00:29:10.932 \longrightarrow 00:29:14.750$  but you know 81% of patients still say that,

NOTE Confidence: 0.7893551

 $00:29:14.750 \longrightarrow 00:29:17.195$  yeah, daytime naps they feel

 $00:29:17.195 \longrightarrow 00:29:19.151$  subjectively that they help

NOTE Confidence: 0.7893551

 $00:29:19.151 \longrightarrow 00:29:21.550$  scheduling of their nocturnal sleep.

NOTE Confidence: 0.7893551

00:29:21.550 --> 00:29:24.615 Anne, it's very important with

NOTE Confidence: 0.7893551

 $00:29:24.615 \longrightarrow 00:29:27.067$  patients who have hypersomnolence

NOTE Confidence: 0.7893551

00:29:27.067 --> 00:29:30.421 to strongly advise and recommend

NOTE Confidence: 0.7893551

00:29:30.421 --> 00:29:33.726 to avoid operating heavy machinery.

NOTE Confidence: 0.7893551

 $00:29:33.730 \longrightarrow 00:29:37.456$  Due to increased risk of accidents.

NOTE Confidence: 0.7893551

00:29:37.460 --> 00:29:41.990 So um, pharmacologic treatment well?

NOTE Confidence: 0.7893551

 $00{:}29{:}41.990 \dashrightarrow 00{:}29{:}44.895$  There are currently no medications

NOTE Confidence: 0.7893551

 $00:29:44.895 \longrightarrow 00:29:47.800$  that are officially approved by

NOTE Confidence: 0.7893551

 $00{:}29{:}47.893 \dashrightarrow 00{:}29{:}50.005$  FDA for specific specifically

NOTE Confidence: 0.7893551

 $00:29:50.005 \longrightarrow 00:29:52.645$  for the treatment of IH.

NOTE Confidence: 0.7893551

 $00:29:52.650 \longrightarrow 00:29:54.062$  So you know what?

NOTE Confidence: 0.7893551

 $00:29:54.062 \longrightarrow 00:29:55.474$  What do we do?

NOTE Confidence: 0.7893551

 $00:29:55.480 \longrightarrow 00:29:55.834$  Well,

NOTE Confidence: 0.7893551

 $00:29:55.834 \longrightarrow 00:29:57.958$  we we treat it like hypersomnolence

 $00{:}29{:}57.958 \dashrightarrow 00{:}30{:}00.248$  like we would address in Narcos.

NOTE Confidence: 0.7893551

 $00{:}30{:}00.250 \dashrightarrow 00{:}30{:}06.138$  Sing so stimulance and these are very common,

NOTE Confidence: 0.7893551

 $00:30:06.140 \longrightarrow 00:30:09.386$  frequently used so we have methylphenidate,

NOTE Confidence: 0.7893551

 $00:30:09.390 \longrightarrow 00:30:12.666$  which blocks reuptake of norpin Efron

NOTE Confidence: 0.7893551

 $00:30:12.666 \longrightarrow 00:30:15.982$  dopamine into presynaptic neurons and the

NOTE Confidence: 0.7893551

00:30:15.982 --> 00:30:18.617 side effects would include irritability,

NOTE Confidence: 0.7893551

00:30:18.620 --> 00:30:21.484 insomnia, GI upset psychosis.

NOTE Confidence: 0.7893551

00:30:21.484 --> 00:30:22.200 Hypertension,

NOTE Confidence: 0.7893551

 $00:30:22.200 \longrightarrow 00:30:25.000$  palpitations and then there

NOTE Confidence: 0.7893551

 $00:30:25.000 \longrightarrow 00:30:27.800$  is suggestion feta mean.

NOTE Confidence: 0.7893551

 $00:30:27.800 \longrightarrow 00:30:29.588$  Which promotes the release of dopamine,

NOTE Confidence: 0.7893551

 $00:30:29.590 \longrightarrow 00:30:31.114$  an open a friend from their

NOTE Confidence: 0.7893551

 $00{:}30{:}31.114 {\:{\circ}{\circ}{\circ}\:} 00{:}30{:}32.824$  storage sites in a person optic

NOTE Confidence: 0.7893551

 $00:30:32.824 \longrightarrow 00:30:34.399$  nerve terminal and the side

NOTE Confidence: 0.7893551

 $00:30:34.399 \longrightarrow 00:30:35.850$  effects would be similar.

 $00:30:37.870 \longrightarrow 00:30:40.230$  And we have a wakefulness

NOTE Confidence: 0.73495376

00:30:40.230 --> 00:30:41.174 promoting medications,

NOTE Confidence: 0.73495376

 $00:30:41.180 \longrightarrow 00:30:43.808$  and there is Modafinil which increases

NOTE Confidence: 0.73495376

 $00:30:43.808 \longrightarrow 00:30:47.063$  the dopamine levels in the brain by

NOTE Confidence: 0.73495376

00:30:47.063 --> 00:30:49.433 binding to the dopamine transport

NOTE Confidence: 0.73495376

 $00{:}30{:}49.433 \dashrightarrow 00{:}30{:}51.110$  inhibiting dopamine reuptake.

NOTE Confidence: 0.73495376

00:30:51.110 --> 00:30:53.480 And then we have armodafinil,

NOTE Confidence: 0.73495376

00:30:53.480 --> 00:30:56.504 which is our anatomy of Modafinil and

NOTE Confidence: 0.73495376

 $00:30:56.504 \longrightarrow 00:31:00.097$  both have the side effects of headaches,

NOTE Confidence: 0.73495376

00:31:00.100 --> 00:31:01.588 nausea, insomnia, nervousness.

NOTE Confidence: 0.73495376

 $00:31:01.588 \longrightarrow 00:31:05.579$  And the biggest thing to advise to your

NOTE Confidence: 0.73495376

00:31:05.579 --> 00:31:08.195 patients is must use birth control.

NOTE Confidence: 0.73495376

 $00:31:08.200 \longrightarrow 00:31:11.035$  Other than or in addition

NOTE Confidence: 0.73495376

 $00:31:11.035 \longrightarrow 00:31:12.736$  to contraceptive pills.

NOTE Confidence: 0.6580176

00:31:18.020 --> 00:31:20.715 On you other some new wakefulness

NOTE Confidence: 0.6580176

 $00{:}31{:}20.715 \dashrightarrow 00{:}31{:}23.560$  promoting medications we have so nosey.

 $00:31:23.560 \longrightarrow 00:31:25.615$  Which is a dopamine opener

NOTE Confidence: 0.6580176

00:31:25.615 --> 00:31:26.848 friendly uptake inhibitor,

NOTE Confidence: 0.6580176

 $00:31:26.850 \longrightarrow 00:31:29.496$  an ad shown to improve sleepiness in

NOTE Confidence: 0.6580176

 $00:31:29.496 \longrightarrow 00:31:32.291$  narcolepsy type one and two as well

NOTE Confidence: 0.6580176

 $00:31:32.291 \longrightarrow 00:31:34.281$  as excessive day time sleepiness in

NOTE Confidence: 0.6580176

 $00:31:34.281 \longrightarrow 00:31:36.708$  patients with obstructive sleep apnea.

NOTE Confidence: 0.6580176

00:31:36.710 --> 00:31:38.358 Side effects include headache,

NOTE Confidence: 0.6580176

00:31:38.358 --> 00:31:39.820 nausea, decreased appetite,

NOTE Confidence: 0.6580176

 $00{:}31{:}39.820 \dashrightarrow 00{:}31{:}41.920$  increased anxiety, and psychosis.

NOTE Confidence: 0.6580176

 $00:31:41.920 \longrightarrow 00:31:43.780$  Contraindicated in patients who

NOTE Confidence: 0.6580176

 $00:31:43.780 \longrightarrow 00:31:45.640$  take monoamine oxidase inhibitors

NOTE Confidence: 0.6580176

 $00:31:45.640 \longrightarrow 00:31:48.060$  due to hypertensive reaction,

NOTE Confidence: 0.6580176

 $00:31:48.060 \longrightarrow 00:31:54.576$  and may be used with ocps safe to use.

NOTE Confidence: 0.6580176

 $00:31:54.580 \longrightarrow 00:31:57.724$  Another new kid on get relatively new kid

NOTE Confidence: 0.6580176

 $00:31:57.724 \longrightarrow 00:32:01.059$  on the block is Patella St Way kicks.

 $00:32:01.060 \longrightarrow 00:32:03.085$  It's an H3 inverse agonist

NOTE Confidence: 0.6580176

00:32:03.085 --> 00:32:04.300 like an antagonist,

NOTE Confidence: 0.6580176

 $00:32:04.300 \longrightarrow 00:32:05.848$  therefore increases the

NOTE Confidence: 0.6580176

 $00:32:05.848 \longrightarrow 00:32:08.428$  level of histamine in CSF.

NOTE Confidence: 0.6580176

 $00:32:08.430 \longrightarrow 00:32:10.800$  And it's indicated for the treatment

NOTE Confidence: 0.6580176

00:32:10.800 --> 00:32:12.380 of excessive daytime sleepiness

NOTE Confidence: 0.6580176

 $00:32:12.440 \longrightarrow 00:32:14.300$  and narcolepsy type one and two.

NOTE Confidence: 0.6580176

 $00:32:14.300 \longrightarrow 00:32:16.292$  What's great about it is that

NOTE Confidence: 0.6580176

 $00:32:16.292 \longrightarrow 00:32:18.340$  it's not a controlled substance,

NOTE Confidence: 0.6580176

 $00{:}32{:}18.340 \dashrightarrow 00{:}32{:}20.909$  and there's a minimal risk of abuse.

NOTE Confidence: 0.6580176

 $00:32:20.910 \longrightarrow 00:32:21.528$  But again,

NOTE Confidence: 0.6580176

 $00:32:21.528 \longrightarrow 00:32:23.691$  must use birth control other than or

NOTE Confidence: 0.6580176

00:32:23.691 --> 00:32:26.048 in addition to contraceptive pills,

NOTE Confidence: 0.6580176

00:32:26.050 --> 00:32:27.880 adverse effects, insomnia, anxiety, mostly.

NOTE Confidence: 0.84702724 00:32:30.140 --> 00:32:30.990 And.

NOTE Confidence: 0.7319374

00:32:33.400 --> 00:32:37.594 New therapies are looking at treating

00:32:37.594 --> 00:32:40.390 GABA related hypersomnia essentially.

NOTE Confidence: 0.7319374

 $00:32:40.390 \longrightarrow 00:32:43.720$  Um so. I've mentioned it in

NOTE Confidence: 0.7319374

 $00:32:43.720 \longrightarrow 00:32:46.630$  the beginning of this talk.

NOTE Confidence: 0.7319374

 $00:32:46.630 \longrightarrow 00:32:50.734$  The role of flumazenil for the treatment of.

NOTE Confidence: 0.7319374

 $00:32:50.740 \longrightarrow 00:32:53.267$  Hypersomnolence and you do about the cover.

NOTE Confidence: 0.7319374

 $00:32:53.270 \longrightarrow 00:32:56.288$  Sonia and this was the study.

NOTE Confidence: 0.7319374

00:32:56.290 --> 00:33:00.385 Which looked at 153 patients which had

NOTE Confidence: 0.7319374

 $00:33:00.385 \longrightarrow 00:33:03.680$  hypersomnolence due to domestic abuse,

NOTE Confidence: 0.7319374

 $00{:}33{:}03.680 \dashrightarrow 00{:}33{:}06.180$  Anya and other conditions so

NOTE Confidence: 0.7319374

 $00{:}33{:}06.180 \dashrightarrow 00{:}33{:}09.441$  little it looked at evaluation of

NOTE Confidence: 0.7319374

 $00{:}33{:}09.441 \dashrightarrow 00{:}33{:}12.121$  cerebrospinal fluid from patients

NOTE Confidence: 0.7319374

 $00{:}33{:}12.121 \dashrightarrow 00{:}33{:}14.801$  whose hypersomnia persisted despite

NOTE Confidence: 0.7319374

 $00{:}33{:}14.801 \dashrightarrow 00{:}33{:}17.848$  trying wake promoting medications.

NOTE Confidence: 0.77923536

 $00:33:20.220 \longrightarrow 00:33:23.145$  And basically you know they

NOTE Confidence: 0.77923536

00:33:23.145 --> 00:33:25.485 have increased GABA current.

 $00:33:27.850 \longrightarrow 00:33:32.314$  Sorry. Our increased garbled current.

NOTE Confidence: 0.91834515

 $00{:}33{:}32.314 \dashrightarrow 00{:}33{:}35.560$  There's a issue with the GABA,

NOTE Confidence: 0.91834515

 $00:33:35.560 \longrightarrow 00:33:39.544$  a lag and and this increased activity of

NOTE Confidence: 0.91834515

 $00:33:39.544 \longrightarrow 00:33:42.933$  that current can obviously be reversed

NOTE Confidence: 0.91834515

 $00:33:42.933 \longrightarrow 00:33:46.371$  with using flumazenil and they did.

NOTE Confidence: 0.91834515

00:33:46.380 --> 00:33:48.508 Intravenous injection of flumazenil,

NOTE Confidence: 0.91834515

 $00:33:48.508 \longrightarrow 00:33:51.168$  which improved objective measures of

NOTE Confidence: 0.91834515

00:33:51.168 --> 00:33:53.949 vigilance and reduced subjective sleepiness.

NOTE Confidence: 0.8027675

 $00{:}33{:}57.270 --> 00{:}33{:}59.668$  So as you can see, they looked

NOTE Confidence: 0.8027675

00:33:59.668 --> 00:34:01.552 at the CSF of patients with

NOTE Confidence: 0.8027675

 $00{:}34{:}01.552 \dashrightarrow 00{:}34{:}03.840$  nar colepsy type one and two patients

NOTE Confidence: 0.8027675

 $00:34:03.840 \longrightarrow 00:34:05.040$  with idiopathic hypersomnia.

NOTE Confidence: 0.8027675

 $00:34:05.040 \longrightarrow 00:34:07.480$  They had a 30.

NOTE Confidence: 0.8027675

 $00:34:07.480 \longrightarrow 00:34:09.814$  Six of them are patients with

NOTE Confidence: 0.8027675

 $00:34:09.814 \longrightarrow 00:34:11.370$  obstructive sleep apnea with

NOTE Confidence: 0.8027675

 $00{:}34{:}11.438 \dashrightarrow 00{:}34{:}13.698$  hypersomnolence an as well as

 $00:34:13.698 \longrightarrow 00:34:15.480$  other hypersomnolence as well.

NOTE Confidence: 0.8167983

 $00{:}34{:}18.270 \dashrightarrow 00{:}34{:}21.222$  So they they gave flumazenil sublingually

NOTE Confidence: 0.8167983

00:34:21.222 --> 00:34:24.683 about 6 milligrams to these patients and

NOTE Confidence: 0.8167983

00:34:24.683 --> 00:34:27.966 the starting dose was about 6 milligrams,

NOTE Confidence: 0.8167983

 $00:34:27.970 \longrightarrow 00:34:31.858$  four times a day, and then they titrated to

NOTE Confidence: 0.8167983

 $00:34:31.858 \longrightarrow 00:34:35.932$  the effective dose or total of 12 milligrams

NOTE Confidence: 0.8167983

 $00:34:35.932 \longrightarrow 00:34:40.032$  four times per day so that those would

NOTE Confidence: 0.8167983

00:34:40.032 --> 00:34:43.492 not exist exceed 60 milligrams per day.

NOTE Confidence: 0.8167983

 $00:34:43.492 \longrightarrow 00:34:46.454$  And in between. If they still had.

NOTE Confidence: 0.8167983

 $00:34:46.454 \longrightarrow 00:34:47.958$  Issues with sleeping as

NOTE Confidence: 0.8167983

 $00:34:47.958 \longrightarrow 00:34:49.949$  they were also prescribed.

NOTE Confidence: 0.8167983

 $00:34:49.950 \longrightarrow 00:34:52.659$  Aflam adonal cream.

NOTE Confidence: 0.8167983

 $00{:}34{:}52.660 \dashrightarrow 00{:}34{:}55.880$  Which would be applied to the forms

NOTE Confidence: 0.8167983

 $00:34:55.880 \longrightarrow 00:34:59.100$  at bedtime, or four times a day,

NOTE Confidence: 0.8167983

 $00:34:59.100 \longrightarrow 00:35:02.320$  if the sublingual dose was not enough.

 $00:35:06.070 \longrightarrow 00:35:14.500$  All. So 96% on 96 patients out of 153 with.

NOTE Confidence: 0.23930006

 $00{:}35{:}14.500 \dashrightarrow 00{:}35{:}16.231$  Hypersomnolence reported improvement

NOTE Confidence: 0.23930006

 $00:35:16.231 \longrightarrow 00:35:18.539$  of excessive daytime sleepiness,

NOTE Confidence: 0.23930006

 $00:35:18.540 \longrightarrow 00:35:21.420$  one treated with flumazenil so

NOTE Confidence: 0.23930006

 $00:35:21.420 \longrightarrow 00:35:23.724$  prior to initiating flumazenil,

NOTE Confidence: 0.23930006

 $00:35:23.730 \longrightarrow 00:35:27.186$  the average score was a 1515.1,

NOTE Confidence: 0.23930006

00:35:27.190 --> 00:35:30.895 even though these patients were

NOTE Confidence: 0.23930006

 $00:35:30.895 \longrightarrow 00:35:34.600$  already taking wake promoting agents.

NOTE Confidence: 0.23930006

 $00{:}35{:}34.600 {\:{\mbox{--}}\!>}\ 00{:}35{:}37.810$  An after the treatment average score

NOTE Confidence: 0.23930006

 $00:35:37.810 \longrightarrow 00:35:41.528$  dropped by about four to five to 10.3,

NOTE Confidence: 0.23930006

 $00{:}35{:}41.530 \dashrightarrow 00{:}35{:}43.890$  which which is significant.

NOTE Confidence: 0.23930006

 $00:35:43.890 \longrightarrow 00:35:46.250$  Um and 59 patients.

NOTE Confidence: 0.23930006

 $00:35:46.250 \longrightarrow 00:35:50.394$  Out of these, 96 continued on taking the

NOTE Confidence: 0.23930006

 $00:35:50.394 \longrightarrow 00:35:54.410$  medication at the seven months of follow up.

NOTE Confidence: 0.23930006

 $00:35:54.410 \longrightarrow 00:35:58.930$  And the. Affect persisted.

NOTE Confidence: 0.23930006

 $00:35:58.930 \longrightarrow 00:36:00.394$  So it's interesting,

00:36:00.394 --> 00:36:02.834 72% of women reported a

NOTE Confidence: 0.23930006

 $00{:}36{:}02.834 \dashrightarrow 00{:}36{:}04.839$  positive response to the drug.

NOTE Confidence: 0.23930006

 $00:36:04.840 \longrightarrow 00:36:08.728$  Whereas only 48% of men had a positive

NOTE Confidence: 0.23930006

00:36:08.728 --> 00:36:12.516 response and those who had the most

NOTE Confidence: 0.23930006

 $00:36:12.516 \longrightarrow 00:36:15.231$  significant sleep inertia were the

NOTE Confidence: 0.23930006

 $00:36:15.335 \longrightarrow 00:36:18.954$  ones whom were more likely to respond.

NOTE Confidence: 0.23930006

 $00:36:18.960 \longrightarrow 00:36:20.532$  Side effects observed,

NOTE Confidence: 0.23930006

00:36:20.532 --> 00:36:22.100 dizziness, anxiety, headache.

NOTE Confidence: 0.18428144

 $00:36:24.630 \longrightarrow 00:36:29.352$  Um? Another oh,

NOTE Confidence: 0.18428144

 $00{:}36{:}29.352 \dashrightarrow 00{:}36{:}33.384$  another medication that was looked at.

NOTE Confidence: 0.18428144

 $00:36:33.390 \longrightarrow 00:36:36.570$  And the biotic clarithromycin.

NOTE Confidence: 0.18428144

00:36:36.570 --> 00:36:38.934 Because it is also to happens

NOTE Confidence: 0.18428144

 $00{:}36{:}38.934 \dashrightarrow 00{:}36{:}41.137$  to be a negative allosteric

NOTE Confidence: 0.18428144

 $00{:}36{:}41.137 \dashrightarrow 00{:}36{:}44.365$  modulator of the GABA a receptor.

NOTE Confidence: 0.18428144

00:36:44.370 --> 00:36:47.754 OK, so this was a two week randomized

00:36:47.754 --> 00:36:49.757 placebo controlled double blind

NOTE Confidence: 0.18428144

 $00{:}36{:}49.757 \dashrightarrow 00{:}36{:}51.905$  crossover trial of clarithromycin

NOTE Confidence: 0.18428144

 $00:36:51.905 \longrightarrow 00:36:54.932$  500 milligrams which was taken with

NOTE Confidence: 0.18428144

 $00:36:54.932 \longrightarrow 00:36:57.739$  breakfast as well as lunch in patient

NOTE Confidence: 0.18428144

 $00:36:57.739 \longrightarrow 00:36:59.304$  with hypersomnolence syndromes.

NOTE Confidence: 0.18428144

 $00:36:59.304 \longrightarrow 00:37:01.632$  But they excluded those

NOTE Confidence: 0.18428144

 $00:37:01.632 \longrightarrow 00:37:03.960$  with narcolepsy Type 1.

NOTE Confidence: 0.18428144

 $00:37:03.960 \longrightarrow 00:37:06.612$  Um, and these patients had evidence

NOTE Confidence: 0.18428144

 $00{:}37{:}06.612 \dashrightarrow 00{:}37{:}08.904$  of abnormal cerebral spinal fluid

NOTE Confidence: 0.18428144

00:37:08.904 --> 00:37:11.129 potentiation of GABA A receptor,

NOTE Confidence: 0.18428144

00:37:11.130 --> 00:37:13.805 and the primary outcome measure

NOTE Confidence: 0.18428144

 $00:37:13.805 \longrightarrow 00:37:16.480$  was median reaction time on

NOTE Confidence: 0.18428144

 $00:37:16.575 \longrightarrow 00:37:19.659$  psychomotor vigilance task at 2 E.

NOTE Confidence: 0.18428144

 $00:37:19.660 \longrightarrow 00:37:21.355$  At week two.

NOTE Confidence: 0.18428144

 $00:37:21.355 \longrightarrow 00:37:24.180$  And the secondary outcome was

NOTE Confidence: 0.18428144

00:37:24.180 --> 00:37:25.960 Epworth Sleepiness Scale.

00:37:25.960 --> 00:37:27.840 So subjects were randomized

NOTE Confidence: 0.18428144

 $00{:}37{:}27.840 {\:{\circ}{\circ}{\circ}}>00{:}37{:}30.190$  such as equal number received

NOTE Confidence: 0.18428144

 $00:37:30.190 \longrightarrow 00:37:32.179$  each intervention first.

NOTE Confidence: 0.18428144

 $00:37:32.180 \longrightarrow 00:37:34.956$  So 10 received clarithromycin.

NOTE Confidence: 0.18428144

 $00:37:34.956 \longrightarrow 00:37:38.426$  First an Jen received placebo.

NOTE Confidence: 0.18428144

 $00:37:38.430 \longrightarrow 00:37:41.388$  And then there was a switch.

NOTE Confidence: 0.77485985

00:37:44.900 --> 00:37:48.043 And looking at it, you'd see that

NOTE Confidence: 0.77485985

 $00{:}37{:}48.043 \dashrightarrow 00{:}37{:}51.269$  with PPT there was no improvement,

NOTE Confidence: 0.77485985

 $00:37:51.270 \longrightarrow 00:37:53.230$  but it upward sleepiness

NOTE Confidence: 0.77485985

 $00{:}37{:}53.230 \dashrightarrow 00{:}37{:}55.190$  scale decreased four points.

NOTE Confidence: 0.8477815

 $00:37:59.030 \longrightarrow 00:38:02.824$  So there was a benefit in 64% of patients

NOTE Confidence: 0.8477815

 $00:38:02.824 \longrightarrow 00:38:05.356$  and 38% of patients continued therapy.

NOTE Confidence: 0.8477815

 $00{:}38{:}05.360 \dashrightarrow 00{:}38{:}08.736$  When I when I spoke to the lab,

NOTE Confidence: 0.8477815

 $00:38:08.740 \longrightarrow 00:38:11.323$  they basically told me that at that

NOTE Confidence: 0.8477815

 $00:38:11.323 \longrightarrow 00:38:14.224$  time at least they were about six

00:38:14.224 --> 00:38:16.798 months of continuation of therapy and

NOTE Confidence: 0.8477815

 $00{:}38{:}16.879 \dashrightarrow 00{:}38{:}19.139$  adverse effects that were reported

NOTE Confidence: 0.8477815

 $00:38:19.139 \longrightarrow 00:38:21.821$  would be GI side effects, taste,

NOTE Confidence: 0.8477815

 $00:38:21.821 \longrightarrow 00:38:24.347$  perversion as well as antibiotics resistance.

NOTE Confidence: 0.11924832

 $00:38:26.430 \longrightarrow 00:38:27.260$  Sirem

NOTE Confidence: 0.884301

 $00:38:29.270 \longrightarrow 00:38:31.920$  this was a chart review.

NOTE Confidence: 0.884301

 $00:38:31.920 \longrightarrow 00:38:34.495$  AC and clinical series of

NOTE Confidence: 0.884301

 $00:38:34.495 \longrightarrow 00:38:36.555$  treatment of refractory patients.

NOTE Confidence: 0.884301

 $00{:}38{:}36.560 \dashrightarrow 00{:}38{:}39.650$  So they had 46 H patients,

NOTE Confidence: 0.884301

 $00:38:39.650 \longrightarrow 00:38:41.970$  247 patients with narcolepsy

NOTE Confidence: 0.884301

 $00{:}38{:}41.970 \dashrightarrow 00{:}38{:}46.090$  type one and they showed that it

NOTE Confidence: 0.884301

00:38:46.090 --> 00:38:48.250 actually decreased essm between

NOTE Confidence: 0.884301

 $00:38:48.250 \longrightarrow 00:38:52.250$  three to four and a half points.

NOTE Confidence: 0.884301

 $00:38:52.250 \longrightarrow 00:38:55.022$  But the mean those in Egypt hypersomnia

NOTE Confidence: 0.884301

00:38:55.022 --> 00:38:57.418 patients was 4.3 grams per night,

NOTE Confidence: 0.884301

 $00:38:57.420 \longrightarrow 00:39:00.619$  which is lower than the ones given

 $00:39:00.619 \longrightarrow 00:39:03.699$  to patients with narcolepsy Type 1.

NOTE Confidence: 0.884301

00:39:03.700 --> 00:39:04.660 And of course,

NOTE Confidence: 0.884301

 $00:39:04.660 \longrightarrow 00:39:06.900$  the biggest things to console and discuss

NOTE Confidence: 0.884301

 $00:39:06.964 \longrightarrow 00:39:09.538$  with your patience is respiratory depression.

NOTE Confidence: 0.884301

00:39:09.540 --> 00:39:12.460 You know chance of abuse of this drug,

NOTE Confidence: 0.884301

00:39:12.460 --> 00:39:13.460 respiratory depression?

NOTE Confidence: 0.884301

 $00:39:13.460 \longrightarrow 00:39:16.460$  Um, as well as a central

NOTE Confidence: 0.884301

 $00:39:16.460 \longrightarrow 00:39:18.420$  nervous system depression.

NOTE Confidence: 0.884301

 $00:39:18.420 \longrightarrow 00:39:19.516$  Side effects.

NOTE Confidence: 0.884301

 $00:39:19.516 \dashrightarrow 00:39:22.804$  While most side effects would be

NOTE Confidence: 0.884301

 $00:39:22.804 \dashrightarrow 00:39:25.878$  patients don't like the taste of it,

NOTE Confidence: 0.884301

 $00:39:25.880 \longrightarrow 00:39:28.876$  nausha is probably the most common one.

NOTE Confidence: 0.884301

 $00:39:28.880 \longrightarrow 00:39:29.740$  Dizziness, headache.

NOTE Confidence: 0.82953537

 $00:39:35.060 \longrightarrow 00:39:37.783$  So now circling back to where we

NOTE Confidence: 0.82953537

 $00:39:37.783 \longrightarrow 00:39:39.990$  started from the current day.

 $00:39:39.990 \longrightarrow 00:39:42.486$  A lot of treatment options were

NOTE Confidence: 0.82953537

 $00{:}39{:}42.486 \dashrightarrow 00{:}39{:}45.012$  discussed with this patient and she

NOTE Confidence: 0.82953537

00:39:45.012 --> 00:39:46.977 is more reluctant to worthless,

NOTE Confidence: 0.82953537

 $00:39:46.980 \longrightarrow 00:39:51.148$  wasn't more left and to try new things.

NOTE Confidence: 0.82953537

 $00:39:51.150 \longrightarrow 00:39:54.366$  She was on armodafinil 150 milligrams,

NOTE Confidence: 0.82953537

 $00:39:54.370 \longrightarrow 00:39:58.528$  which it took at 7:30 AM.

NOTE Confidence: 0.82953537

 $00{:}39{:}58.530 \dashrightarrow 00{:}40{:}01.134$  She's reported some residual.

NOTE Confidence: 0.82953537

00:40:01.134 --> 00:40:03.087 Sleepiness and reported

NOTE Confidence: 0.82953537

 $00{:}40{:}03.087 \dashrightarrow 00{:}40{:}05.920$  having some insomnia symptoms.

NOTE Confidence: 0.82953537

00:40:05.920 --> 00:40:07.850 Um, trying different doses was

NOTE Confidence: 0.82953537

 $00{:}40{:}07.850 \dashrightarrow 00{:}40{:}10.130$  about the same effect for her,

NOTE Confidence: 0.82953537

 $00:40:10.130 \longrightarrow 00:40:12.188$  but her essm range between 9:00

NOTE Confidence: 0.82953537

 $00:40:12.188 \longrightarrow 00:40:14.813$  and 12:00 and for her that meant

NOTE Confidence: 0.82953537

 $00{:}40{:}14.813 \dashrightarrow 00{:}40{:}16.773$  being functional during the day

NOTE Confidence: 0.82953537

00:40:16.773 --> 00:40:19.649 and being able to carry on through

NOTE Confidence: 0.82953537

 $00:40:19.649 \longrightarrow 00:40:20.858$  her daily activities.

 $00{:}40{:}20.860 --> 00{:}40{:}21.620$  Thank you.

NOTE Confidence: 0.8401172

 $00{:}40{:}30.560 \dashrightarrow 00{:}40{:}32.495$  Great, thank you so much for

NOTE Confidence: 0.8401172

00:40:32.495 --> 00:40:33.464 that presentation Eliana.

NOTE Confidence: 0.8401172

 $00:40:33.470 \longrightarrow 00:40:37.754$  I just want to open it up to questions.

NOTE Confidence: 0.8401172

 $00:40:37.760 \longrightarrow 00:40:40.178$  And I think I'd love to

NOTE Confidence: 0.8401172

 $00:40:40.178 \longrightarrow 00:40:41.790$  hear about anybody else.

NOTE Confidence: 0.8401172

00:40:41.790 --> 00:40:44.443 Is kind of experiences with the practical

NOTE Confidence: 0.8401172

 $00:40:44.443 \longrightarrow 00:40:47.029$  approval of some of these medications.

NOTE Confidence: 0.8401172

 $00:40:47.030 \longrightarrow 00:40:49.790$  You know, there are these specific

NOTE Confidence: 0.8401172

 $00:40:49.790 \longrightarrow 00:40:52.122$  com pounding pharmacies that are

NOTE Confidence: 0.8401172

 $00{:}40{:}52.122 \dashrightarrow 00{:}40{:}54.202$  needed to get these formulations

NOTE Confidence: 0.8401172

 $00{:}40{:}54.202 \dashrightarrow 00{:}40{:}56.560$  of medications and I know some

NOTE Confidence: 0.8401172

 $00:40:56.560 \longrightarrow 00:40:58.716$  of us have tried to do this,

NOTE Confidence: 0.8401172

 $00:40:58.720 \longrightarrow 00:41:01.920$  but I invite anybody to kind of share

NOTE Confidence: 0.8401172

 $00:41:01.920 \longrightarrow 00:41:04.864$  your own anecdotes about how that's

 $00:41:04.864 \longrightarrow 00:41:08.470$  worked and what the efficacy has been.

NOTE Confidence: 0.8401172

 $00:41:08.470 \longrightarrow 00:41:10.010$  With that and then ask,

NOTE Confidence: 0.8401172

 $00:41:10.010 \longrightarrow 00:41:11.540$  ask any questions to Eliana.

NOTE Confidence: 0.6846112

 $00:41:26.320 \longrightarrow 00:41:30.860$  Hello Andy Petroff I'm a

NOTE Confidence: 0.6846112

 $00:41:30.860 \longrightarrow 00:41:33.584$  neurologist and epileptologist.

NOTE Confidence: 0.6846112

00:41:33.590 --> 00:41:37.209 The flumazenil, at least you can have

NOTE Confidence: 0.6846112

 $00:41:37.209 \longrightarrow 00:41:40.660$  there been any pet studies on it?

NOTE Confidence: 0.6846112

 $00:41:40.660 \longrightarrow 00:41:43.999$  'cause there is a ligand and it's

NOTE Confidence: 0.6846112

 $00:41:43.999 \longrightarrow 00:41:47.730$  available here and variety of other places.

NOTE Confidence: 0.6846112

 $00:41:47.730 \longrightarrow 00:41:50.700$  So are there any differences

NOTE Confidence: 0.6846112

 $00{:}41{:}50.700 \dashrightarrow 00{:}41{:}53.670$  with the hypersomnia in terms

NOTE Confidence: 0.6846112

 $00:41:53.776 \longrightarrow 00:41:56.440$  of the flumazenil binding?

NOTE Confidence: 0.6846112

00:41:56.440 --> 00:41:58.690 The related question, of course,

NOTE Confidence: 0.6846112

 $00:41:58.690 \longrightarrow 00:42:00.880$  is that flumazenil preferentially binds

NOTE Confidence: 0.6846112

 $00:42:00.880 \longrightarrow 00:42:03.620$  to microglia engliah rather than neurons,

NOTE Confidence: 0.6846112

 $00:42:03.620 \longrightarrow 00:42:05.870$  so it isn't very specific

 $00:42:05.870 \longrightarrow 00:42:07.220$  for Gabaergic neurons.

NOTE Confidence: 0.88410556

 $00:42:08.960 \longrightarrow 00:42:11.207$  I'm not familiar with the pet studies.

NOTE Confidence: 0.88410556

00:42:11.210 --> 00:42:13.910 I did not look at those when I was doing

NOTE Confidence: 0.88410556

00:42:13.981 --> 00:42:18.770 my literature review, and honestly. Um?

NOTE Confidence: 0.88410556

 $00{:}42{:}18.770 \dashrightarrow 00{:}42{:}21.400$  I mean, I would my assumption would be

NOTE Confidence: 0.88410556

 $00:42:21.400 \longrightarrow 00:42:23.804$  that it had to be at least. Similarly,

NOTE Confidence: 0.88410556

00:42:23.804 --> 00:42:26.960 I don't know if you can add on to that.

NOTE Confidence: 0.79947734

 $00:42:29.780 \longrightarrow 00:42:31.952$  Well, as I said,

NOTE Confidence: 0.79947734

 $00:42:31.952 \longrightarrow 00:42:34.124$  the other related question,

NOTE Confidence: 0.79947734

 $00:42:34.130 \longrightarrow 00:42:37.214$  did the Emory people discussed the

NOTE Confidence: 0.79947734

 $00{:}42{:}37.214 \dashrightarrow 00{:}42{:}39.939$  molecular weight of this endogenous

NOTE Confidence: 0.79947734

00:42:39.939 --> 00:42:43.377 pro GABA a receptor function agent?

NOTE Confidence: 0.79947734

 $00:42:43.380 \longrightarrow 00:42:45.556$  Is that a protein?

NOTE Confidence: 0.79947734

00:42:45.556 --> 00:42:48.820 Is it more than 600 Daltons,

NOTE Confidence: 0.79947734

00:42:48.820 --> 00:42:52.078 or is it a small molecule?

 $00:42:54.740 \longrightarrow 00:42:57.076$  I would have to review that again actually.

NOTE Confidence: 0.81758577

 $00:42:58.170 \longrightarrow 00:43:02.220$  Right and the? Has there been

NOTE Confidence: 0.81758577

 $00:43:02.220 \longrightarrow 00:43:06.867$  any work using the new histamine

NOTE Confidence: 0.81758577

 $00:43:06.867 \longrightarrow 00:43:10.467$  promoting agent or inverse

NOTE Confidence: 0.81758577

 $00:43:10.467 \longrightarrow 00:43:14.920$  agonist of histamine in this?

NOTE Confidence: 0.81758577

 $00:43:14.920 \longrightarrow 00:43:16.472$  Idiopathic hypersomnia hasn't been

NOTE Confidence: 0.81758577

 $00:43:16.472 \longrightarrow 00:43:18.412$  used as the beneficial effect.

NOTE Confidence: 0.81758577

 $00:43:18.420 \longrightarrow 00:43:20.370 I$ , from my knowledge, as

NOTE Confidence: 0.82777745

 $00:43:20.370 \longrightarrow 00:43:22.698$  far as that is, you know,

NOTE Confidence: 0.82777745

 $00:43:22.700 \longrightarrow 00:43:25.804$  we tried to use it and not collapse.

NOTE Confidence: 0.82777745

00:43:25.810 --> 00:43:28.456 It has some effect, but I don't

NOTE Confidence: 0.82777745

00:43:28.456 --> 00:43:31.989 think we know for sure effective it

NOTE Confidence: 0.82777745

00:43:31.989 --> 00:43:34.150 in idiopathic hypersomnia. Yeah,

NOTE Confidence: 0.7986588

 $00:43:34.150 \longrightarrow 00:43:35.890$  I don't believe we're

NOTE Confidence: 0.7986588

 $00:43:35.890 \longrightarrow 00:43:37.630$  talking bout Petola sent.

NOTE Confidence: 0.7986588

00:43:37.630 --> 00:43:41.638 I think I don't believe that that was

 $00:43:41.638 \longrightarrow 00:43:44.809$  this approved for age specifically.

NOTE Confidence: 0.7986588

00:43:44.810 --> 00:43:46.748 Although I don't know if anyone

NOTE Confidence: 0.7986588

00:43:46.748 --> 00:43:48.629 else has had experience using it,

NOTE Confidence: 0.7986588

 $00:43:48.630 \longrightarrow 00:43:50.694$  I have not used it in patients other

NOTE Confidence: 0.7986588

 $00:43:50.694 \longrightarrow 00:43:52.758$  than those with narcolepsy personally.

NOTE Confidence: 0.54014516

 $00:43:57.370 \longrightarrow 00:44:01.140$  Thank you very nice talken.

NOTE Confidence: 0.54014516

 $00:44:01.140 \longrightarrow 00:44:04.218$  Not really aware of these newer

NOTE Confidence: 0.54014516

 $00{:}44{:}04.218 \dashrightarrow 00{:}44{:}06.270$  developments and I appreciate

NOTE Confidence: 0.54014516

 $00:44:06.361 \longrightarrow 00:44:08.546$  the review and the update.

NOTE Confidence: 0.80647475

 $00:44:09.210 \longrightarrow 00:44:10.710$  Thank you yeah. What

NOTE Confidence: 0.80647475

00:44:10.710 --> 00:44:11.832 do you think?

NOTE Confidence: 0.80647475

00:44:11.832 --> 00:44:14.450 Doctor Montaivo about the diagnosis of IH?

NOTE Confidence: 0.80647475

 $00{:}44{:}14.450 \dashrightarrow 00{:}44{:}15.942$  I've suspected personally that

NOTE Confidence: 0.80647475

00:44:15.942 --> 00:44:17.434 we're probably missing this,

NOTE Confidence: 0.80647475

 $00:44:17.440 \longrightarrow 00:44:19.360$  and in some patients where

 $00:44:19.360 \longrightarrow 00:44:21.930$  we get an MSL T in it,

NOTE Confidence: 0.80647475

 $00:44:21.930 \longrightarrow 00:44:23.795$  you know sometimes shows a

NOTE Confidence: 0.80647475

 $00:44:23.795 \longrightarrow 00:44:25.287$  short mean sleep latency.

NOTE Confidence: 0.80647475

 $00:44:25.290 \longrightarrow 00:44:27.918$  But if we don't see the store and then

NOTE Confidence: 0.80647475

 $00:44:27.918 \longrightarrow 00:44:30.074$  we have an alternative explanation

NOTE Confidence: 0.80647475

 $00:44:30.074 \longrightarrow 00:44:32.762$  for a short mean sleep latency,

NOTE Confidence: 0.80647475

 $00:44:32.770 \longrightarrow 00:44:35.020$  and sometimes we suspect sleep deprivation,

NOTE Confidence: 0.80647475

 $00:44:35.020 \longrightarrow 00:44:38.476$  or if we don't have actigraphy.

NOTE Confidence: 0.80647475

 $00:44:38.480 \longrightarrow 00:44:41.540$  We chalk it up to to not having had

NOTE Confidence: 0.80647475

 $00:44:41.540 \longrightarrow 00:44:44.179$  sufficient sleep leading up to the study.

NOTE Confidence: 0.80647475

 $00{:}44{:}44.180 \dashrightarrow 00{:}44{:}46.310$  Do you think we're missing this,

NOTE Confidence: 0.80647475

00:44:46.310 --> 00:44:49.158 or is it truly quite a rare diagnosis?

NOTE Confidence: 0.80647475

 $00:44:49.160 \longrightarrow 00:44:49.870$  I think

NOTE Confidence: 0.85622454

 $00:44:49.870 \longrightarrow 00:44:52.206$  it's not as rare. I think we just

NOTE Confidence: 0.85622454

 $00:44:52.206 \longrightarrow 00:44:54.500$  kind of looking for narcolepsy.

NOTE Confidence: 0.85622454

 $00:44:54.500 \longrightarrow 00:44:56.774$  And if we don't see the

 $00:44:56.774 \longrightarrow 00:44:59.499$  evidence of it on our testing.

NOTE Confidence: 0.85622454

 $00{:}44{:}59.500 \to 00{:}45{:}02.034$  Then you know we either just saying,

NOTE Confidence: 0.85622454

 $00:45:02.040 \longrightarrow 00:45:03.876$  well, you don't have narcolepsy or

NOTE Confidence: 0.85622454

 $00:45:03.876 \longrightarrow 00:45:06.655$  we kind of don't think too often to

NOTE Confidence: 0.85622454

 $00{:}45{:}06.655 \dashrightarrow 00{:}45{:}08.515$  consider idiopathic hypersomnia you know

NOTE Confidence: 0.85622454

 $00:45:08.515 \longrightarrow 00:45:11.120$  we started thinking about other things.

NOTE Confidence: 0.85622454

 $00:45:11.120 \longrightarrow 00:45:12.935$  Could this be medications or

NOTE Confidence: 0.85622454

 $00:45:12.935 \longrightarrow 00:45:14.750$  the use of illicit drugs?

NOTE Confidence: 0.85622454

 $00{:}45{:}14.750 \dashrightarrow 00{:}45{:}16.560$  Or some kind of psychiatric

NOTE Confidence: 0.85622454

00:45:16.560 --> 00:45:17.284 comorbid disorder?

NOTE Confidence: 0.85622454

 $00:45:17.290 \longrightarrow 00:45:19.733$  And I guess a lot of these

NOTE Confidence: 0.85622454

 $00{:}45{:}19.733 \dashrightarrow 00{:}45{:}21.767$  people having this issue do

NOTE Confidence: 0.85622454

 $00{:}45{:}21.767 \dashrightarrow 00{:}45{:}24.037$  present with depression as well.

NOTE Confidence: 0.85622454

00:45:24.040 --> 00:45:26.920 And psychiatric issues.

NOTE Confidence: 0.85622454

 $00:45:26.920 \longrightarrow 00:45:27.958$  Yeah yeah, very

 $00:45:27.960 \longrightarrow 00:45:28.998$  common for that.

NOTE Confidence: 0.85116893

00:45:28.998 --> 00:45:31.420 And in a narcolepsy to see depression,

NOTE Confidence: 0.85116893

00:45:31.420 --> 00:45:35.384 right? Or a great well if there's

NOTE Confidence: 0.85116893

00:45:35.384 --> 00:45:37.242 no other questions, I think well,

NOTE Confidence: 0.85116893

 $00:45:37.242 \longrightarrow 00:45:39.780$  well and there and thank you so much.

NOTE Confidence: 0.85116893

00:45:39.780 --> 00:45:44.163 I just want to let people know what the.

NOTE Confidence: 0.85116893

00:45:44.170 --> 00:45:46.168 That talk is for next week,

NOTE Confidence: 0.85116893

 $00:45:46.170 \longrightarrow 00:45:47.835$  so December 9th we're going

NOTE Confidence: 0.85116893

00:45:47.835 --> 00:45:49.500 to have our next joint,

NOTE Confidence: 0.85116893

00:45:49.500 --> 00:45:50.382 Harvard Yale Conference,

NOTE Confidence: 0.85116893

 $00{:}45{:}50.382 \dashrightarrow 00{:}45{:}53.260$  and it's going to be on the cost of

NOTE Confidence: 0.85116893

00:45:53.260 --> 00:45:55.160 insufficient sleep with Janet Mulligan,

NOTE Confidence: 0.85116893

 $00:45:55.160 \longrightarrow 00:45:57.020$  who is a professor of neurology

NOTE Confidence: 0.85116893

 $00:45:57.020 \longrightarrow 00:45:59.038$  at Harvard Medical School in Beth

NOTE Confidence: 0.85116893

 $00{:}45{:}59.038 \dashrightarrow 00{:}46{:}00.486$  Israel Deaconess Medical Center.

NOTE Confidence: 0.85116893

 $00:46:00.490 \longrightarrow 00:46:02.488$  So please join us for that.

 $00:46:02.490 \longrightarrow 00:46:04.488$  That is our next to last

NOTE Confidence: 0.85116893

 $00:46:04.488 \longrightarrow 00:46:05.820$  talk for the semester,

NOTE Confidence: 0.85116893

 $00:46:05.820 \longrightarrow 00:46:08.808$  which I feel like has just flown by then.

NOTE Confidence: 0.85116893

 $00{:}46{:}08.810 \dashrightarrow 00{:}46{:}10.808$  Thank you everyone and have a

NOTE Confidence: 0.8631892

 $00:46:10.810 \longrightarrow 00:46:12.480$  great rest of the afternoon.

NOTE Confidence: 0.8631892

 $00:46:12.480 \longrightarrow 00:46:13.808$  Thank you. Bye bye.

NOTE Confidence: 0.9217543

 $00:46:14.950 \longrightarrow 00:46:16.540$  Thank you bye.