## WEBVTT

NOTE duration: "00:57:40.6500000"

NOTE recognizability:0.793

NOTE language:en-us

NOTE Confidence: 0.8763470575

 $00:00:00.000 \longrightarrow 00:00:02.108$  So without further ado,

NOTE Confidence: 0.8763470575

 $00:00:02.108 \longrightarrow 00:00:04.696$  I want to introduce today's speaker

NOTE Confidence: 0.8763470575

 $00:00:04.696 \longrightarrow 00:00:06.645$  and it's a really pleasure to

NOTE Confidence: 0.8763470575

00:00:06.645 --> 00:00:08.909 introduce Doctor Cyrus Caldani,

NOTE Confidence: 0.8763470575

00:00:08.909 --> 00:00:11.927 who's a former Yale Pomarico care

NOTE Confidence: 0.8763470575

00:00:11.927 --> 00:00:14.737 and and Sleep Medicine Fellow.

NOTE Confidence: 0.8763470575

 $00:00:14.740 \longrightarrow 00:00:18.100$  He is also an alma mater from Ohh.

NOTE Confidence: 0.8763470575

 $00:00:18.100 \longrightarrow 00:00:20.214$  He's also a faculty at my former

NOTE Confidence: 0.8763470575

 $00:00:20.214 \longrightarrow 00:00:22.010$  alma mater Beth Israel Deaconess

NOTE Confidence: 0.8763470575

 $00{:}00{:}22.010 \dashrightarrow 00{:}00{:}24.454$  Medical Center at Harvard now and

NOTE Confidence: 0.8763470575

 $00{:}00{:}24.454 \dashrightarrow 00{:}00{:}27.072$ just give you a few Nuggets about

NOTE Confidence: 0.8763470575

 $00{:}00{:}27.072 \dashrightarrow 00{:}00{:}30.059$  Cyrus who is an incredible physician.

NOTE Confidence: 0.8763470575

 $00:00:30.060 \longrightarrow 00:00:30.588$  And educator.

00:00:30.588 --> 00:00:33.070 And so he was born in New York City,

NOTE Confidence: 0.8763470575

 $00:00:33.070 \longrightarrow 00:00:35.025$  and then immediately after that

NOTE Confidence: 0.8763470575

00:00:35.025 --> 00:00:36.980 he earned his Physiology degree

NOTE Confidence: 0.8763470575

00:00:37.043 --> 00:00:39.630 at Georgetown before he got his

NOTE Confidence: 0.8763470575

 $00:00:39.630 \longrightarrow 00:00:41.855$  training medical training at Drexel.

NOTE Confidence: 0.8763470575

 $00:00:41.860 \longrightarrow 00:00:44.145$  He then moved to beautiful

NOTE Confidence: 0.8763470575

 $00{:}00{:}44.145 \dashrightarrow 00{:}00{:}45.973$  Charlottes ville for his residency

NOTE Confidence: 0.8763470575

 $00:00:45.973 \longrightarrow 00:00:47.947$  and training in internal medicine,

NOTE Confidence: 0.8763470575

 $00:00:47.947 \longrightarrow 00:00:49.681$  and then moved on to Yale

NOTE Confidence: 0.8763470575

00:00:49.681 --> 00:00:51.398 for pulmonary critical care,

NOTE Confidence: 0.8763470575

 $00{:}00{:}51.400 \dashrightarrow 00{:}00{:}54.928$  where he did research with doctor

NOTE Confidence: 0.8763470575

 $00:00:54.928 \longrightarrow 00:00:57.594$  with our own doctor Mossanen,

NOTE Confidence: 0.8763470575

 $00{:}00{:}57.594 \dashrightarrow 00{:}01{:}00.276$  and had done some significant work

NOTE Confidence: 0.8763470575

00:01:00.276 --> 00:01:02.225 on relationships in hypertension

NOTE Confidence: 0.8763470575

 $00:01:02.225 \longrightarrow 00:01:04.197$  and sleep disorder breathing.

NOTE Confidence: 0.8763470575

 $00{:}01{:}04.200 \dashrightarrow 00{:}01{:}06.528$  And so he then moved on to do

 $00{:}01{:}06.528 \operatorname{--}{>} 00{:}01{:}08.270$ his pulmonary vascular disease

NOTE Confidence: 0.8763470575

00:01:08.270 --> 00:01:09.896 fellowship at Stanford,

NOTE Confidence: 0.8763470575

 $00:01:09.900 \longrightarrow 00:01:12.636$  where he then joined the faculty.

NOTE Confidence: 0.8763470575

 $00:01:12.640 \longrightarrow 00:01:14.728$  And then in 2018,

NOTE Confidence: 0.8763470575

 $00:01:14.728 \longrightarrow 00:01:18.022$  he moved to the Beth Israel

NOTE Confidence: 0.8763470575

 $00:01:18.022 \longrightarrow 00:01:20.426$  Deaconess and now Leahy.

NOTE Confidence: 0.8763470575

00:01:20.430 --> 00:01:21.678 Medical Center associate

NOTE Confidence: 0.8763470575

00:01:21.678 --> 00:01:22.926 affiliated with Harvard,

NOTE Confidence: 0.8763470575

00:01:22.930 --> 00:01:24.900 where he directs the Pulmonary

NOTE Confidence: 0.8763470575

00:01:24.900 --> 00:01:25.688 Hypertension Center,

NOTE Confidence: 0.8763470575

00:01:25.690 --> 00:01:27.832 and he's highly involved in teaching

NOTE Confidence: 0.8763470575

 $00:01:27.832 \longrightarrow 00:01:29.260$  residents and fellows there.

NOTE Confidence: 0.8763470575

 $00:01:29.260 \longrightarrow 00:01:30.433$  And so Cyrus,

NOTE Confidence: 0.8763470575

 $00:01:30.433 \longrightarrow 00:01:33.170$  like me as a lover of Physiology,

NOTE Confidence: 0.8763470575

 $00:01:33.170 \longrightarrow 00:01:34.945$  as evidenced by his publication

 $00{:}01{:}34.945 \dashrightarrow 00{:}01{:}37.236$  record and his published work on

NOTE Confidence: 0.8763470575

 $00:01:37.236 \longrightarrow 00:01:39.064$  the intersection of pulmonary

NOTE Confidence: 0.8763470575

 $00:01:39.064 \longrightarrow 00:01:39.978$  arterial hypertension,

NOTE Confidence: 0.8763470575

 $00:01:39.980 \longrightarrow 00:01:41.273$  pulmonary hypertension and

NOTE Confidence: 0.8763470575

00:01:41.273 --> 00:01:42.566 sleep disorder breathing,

NOTE Confidence: 0.8763470575

 $00:01:42.570 \longrightarrow 00:01:44.554$  addressing some mechanistic links

NOTE Confidence: 0.8763470575

 $00:01:44.554 \longrightarrow 00:01:46.538$  and also clinical implications.

NOTE Confidence: 0.8763470575

00:01:46.540 --> 00:01:48.244 And his recent work has actually

NOTE Confidence: 0.8763470575

 $00:01:48.244 \longrightarrow 00:01:49.849$  focused on some different implication

NOTE Confidence: 0.8763470575

00:01:49.849 --> 00:01:51.497 too for pulmonary circulation,

NOTE Confidence: 0.8763470575

00:01:51.500 --> 00:01:52.586 including vascular pruning.

NOTE Confidence: 0.8763470575

00:01:52.586 --> 00:01:54.396 It's a paper those recently

NOTE Confidence: 0.8763470575

 $00:01:54.396 \longrightarrow 00:01:55.500$  published in chest.

NOTE Confidence: 0.8763470575

 $00:01:55.500 \longrightarrow 00:02:00.414$  And so I am very excited to hear Cyrus's

NOTE Confidence: 0.8763470575

 $00:02:00.414 \longrightarrow 00:02:02.178$  talk today on the intersection of

NOTE Confidence: 0.8763470575

 $00:02:02.178 \longrightarrow 00:02:04.539$  the PD and sleep disorder breathing.

00:02:04.540 --> 00:02:04.956 So Cyrus,

NOTE Confidence: 0.8763470575

 $00:02:04.956 \longrightarrow 00:02:05.580$  take it away.

NOTE Confidence: 0.8763470575

 $00:02:05.580 \longrightarrow 00:02:06.030$  Welcome.

NOTE Confidence: 0.912377366

 $00:02:06.280 \longrightarrow 00:02:08.140$  Thank you so much, Andre.

NOTE Confidence: 0.912377366

 $00:02:08.140 \dashrightarrow 00:02:10.624$  Glad to see your face, hear your voice.

NOTE Confidence: 0.912377366

00:02:10.624 --> 00:02:12.575 And then before this started,

NOTE Confidence: 0.912377366

 $00:02:12.575 \longrightarrow 00:02:13.985$  I was sort of running through

NOTE Confidence: 0.912377366

 $00:02:13.985 \longrightarrow 00:02:15.702$  a list of names with Debbie to

NOTE Confidence: 0.912377366

 $00:02:15.702 \longrightarrow 00:02:17.390$  find out who's still at Yale and.

NOTE Confidence: 0.912377366

 $00{:}02{:}17.390 \dashrightarrow 00{:}02{:}20.594$  Would love to be back in grab a a

NOTE Confidence: 0.912377366

 $00:02:20.594 \longrightarrow 00:02:23.949$  Kati roll if those are still around.

NOTE Confidence: 0.912377366

 $00:02:23.950 \longrightarrow 00:02:26.776$  Uh, this is the same disclosure

NOTE Confidence: 0.912377366

 $00{:}02{:}26.776 \dashrightarrow 00{:}02{:}28.189$  and accreditation slide,

NOTE Confidence: 0.912377366

 $00:02:28.190 \longrightarrow 00:02:29.780$  the outline of today's talk.

NOTE Confidence: 0.912377366

 $00:02:29.780 \longrightarrow 00:02:30.410$  We're gonna,

 $00:02:30.410 \longrightarrow 00:02:32.615$  I'll start with sort of recent changes

NOTE Confidence: 0.912377366

 $00{:}02{:}32.615 \dashrightarrow 00{:}02{:}35.117$  in the diagnosis and definition of

NOTE Confidence: 0.912377366

 $00:02:35.117 \longrightarrow 00:02:37.134$  pulmonary vascular disease and then

NOTE Confidence: 0.912377366

 $00:02:37.134 \longrightarrow 00:02:39.738$  we'll jump right to sort of like

NOTE Confidence: 0.912377366

 $00:02:39.738 \longrightarrow 00:02:42.226$  how to use existing phenotypes to

NOTE Confidence: 0.912377366

00:02:42.226 --> 00:02:44.786 try and describe a relationship

NOTE Confidence: 0.912377366

00:02:44.786 --> 00:02:47.150 between pH and sleep apnea.

NOTE Confidence: 0.912377366

00:02:47.150 --> 00:02:49.542 Will highlight the unique

NOTE Confidence: 0.912377366

 $00{:}02{:}49.542 \dashrightarrow 00{:}02{:}52.532$  relationship between pH and obesity

NOTE Confidence: 0.912377366

 $00:02:52.532 \longrightarrow 00:02:54.502$  hyperventilation syndrome over the

NOTE Confidence: 0.912377366

 $00{:}02{:}54.502 \dashrightarrow 00{:}02{:}56.854$  course of the talk will be talking

NOTE Confidence: 0.912377366

 $00:02:56.854 \longrightarrow 00:02:59.091$  about the implications of CPAP

NOTE Confidence: 0.912377366

 $00:02:59.091 \longrightarrow 00:03:00.826$  and noninvasive positive pressure

NOTE Confidence: 0.912377366

 $00:03:00.826 \longrightarrow 00:03:02.866$  ventilation on those two conditions

NOTE Confidence: 0.912377366

 $00:03:02.866 \longrightarrow 00:03:04.590$  and probably vascular disease.

NOTE Confidence: 0.912377366

 $00:03:04.590 \longrightarrow 00:03:05.958$  And then if there is time,

 $00{:}03{:}05.960 \dashrightarrow 00{:}03{:}07.794$  I I do have an interesting case

NOTE Confidence: 0.912377366

 $00:03:07.794 \longrightarrow 00:03:10.166$  to finish up with that I I hope

NOTE Confidence: 0.912377366

 $00:03:10.166 \longrightarrow 00:03:11.686$  you guys would find interesting.

NOTE Confidence: 0.912377366

00:03:11.690 --> 00:03:14.546 So just as a you know background,

NOTE Confidence: 0.912377366

 $00{:}03{:}14.550 \longrightarrow 00{:}03{:}17.510$  there was a seminal paper published in 2016.

NOTE Confidence: 0.912377366

00:03:17.510 --> 00:03:19.750 Using the VA card database,

NOTE Confidence: 0.912377366

 $00:03:19.750 \longrightarrow 00:03:24.286$  which is sort of a linking of all VM

NOTE Confidence: 0.912377366

 $00:03:24.286 \longrightarrow 00:03:26.574$  catheterization laboratories in the

NOTE Confidence: 0.912377366

 $00{:}03{:}26.574 \dashrightarrow 00{:}03{:}29.364$  VA system that participated in the

NOTE Confidence: 0.912377366

 $00:03:29.364 \longrightarrow 00:03:32.300$  generation of a database and you know,

NOTE Confidence: 0.912377366

 $00:03:32.300 \longrightarrow 00:03:35.190$  an evaluation of almost 22,000

NOTE Confidence: 0.912377366

 $00:03:35.190 \longrightarrow 00:03:37.502$  very well characterized individuals

NOTE Confidence: 0.912377366

 $00:03:37.502 \longrightarrow 00:03:41.800$  that underwent catheterizations.

NOTE Confidence: 0.912377366

 $00:03:41.800 \longrightarrow 00:03:44.488$  Were able to demonstration very important

NOTE Confidence: 0.912377366

 $00:03:44.488 \longrightarrow 00:03:47.287$  findings that changed our concept of

 $00:03:47.287 \longrightarrow 00:03:49.627$  what pulmonary hypertension should be.

NOTE Confidence: 0.834479969642857

 $00{:}03{:}53.330 \dashrightarrow 00{:}03{:}55.910$  And importantly, what we were able

NOTE Confidence: 0.834479969642857

 $00:03:55.910 \longrightarrow 00:03:58.861$  to establish is that the previous cut

NOTE Confidence: 0.834479969642857

00:03:58.861 --> 00:04:02.045 off of the main peer pressure of 25

NOTE Confidence: 0.834479969642857

 $00:04:02.045 \longrightarrow 00:04:04.565$  and above missed a significant amount

NOTE Confidence: 0.834479969642857

 $00:04:04.565 \longrightarrow 00:04:06.160$  of clinically significant disease.

NOTE Confidence: 0.834479969642857

 $00:04:06.160 \longrightarrow 00:04:09.287$  And it was based on this paper that

NOTE Confidence: 0.834479969642857

 $00{:}04{:}09.287 \dashrightarrow 00{:}04{:}11.285$  we changed the criteria to mean

NOTE Confidence: 0.834479969642857

 $00{:}04{:}11.285 \dashrightarrow 00{:}04{:}13.168$  peer pressure of 20 and above.

NOTE Confidence: 0.834479969642857

 $00:04:13.170 \longrightarrow 00:04:16.310$  And you can see here that we

NOTE Confidence: 0.834479969642857

 $00{:}04{:}16.310 \dashrightarrow 00{:}04{:}18.150$  have 3 categories here.

NOTE Confidence: 0.834479969642857

00:04:18.150 --> 00:04:20.710 You know, your reference is sort of your,

NOTE Confidence: 0.834479969642857

 $00:04:20.710 \longrightarrow 00:04:23.113$  your, your previous.

NOTE Confidence: 0.834479969642857

 $00:04:23.113 \longrightarrow 00:04:27.424$  Um, criteria of 25 and the

NOTE Confidence: 0.834479969642857

 $00:04:27.424 \longrightarrow 00:04:28.640$  middle line here is,

NOTE Confidence: 0.834479969642857

00:04:28.640 --> 00:04:31.226 I mean you have person 1924 and then

00:04:31.226 --> 00:04:33.518 lastly is a normal OK pressures

NOTE Confidence: 0.834479969642857

 $00:04:33.520 \longrightarrow 00:04:36.360$  and you can see that even having a

NOTE Confidence: 0.834479969642857

00:04:36.360 --> 00:04:38.460 slightly elevated PA pressure results

NOTE Confidence: 0.834479969642857

 $00:04:38.460 \longrightarrow 00:04:40.916$  in a significant increase in risk

NOTE Confidence: 0.834479969642857

00:04:40.916 --> 00:04:43.004 and a reduction in the probability

NOTE Confidence: 0.834479969642857

 $00:04:43.004 \longrightarrow 00:04:45.542$  of survival and then also increases

NOTE Confidence: 0.834479969642857

 $00:04:45.542 \longrightarrow 00:04:47.314$  your chance of hospitalization.

NOTE Confidence: 0.834479969642857 00:04:47.320 --> 00:04:47.614 Importantly,

NOTE Confidence: 0.834479969642857

 $00:04:47.614 \longrightarrow 00:04:49.966$  it's sort of hard to see on here

NOTE Confidence: 0.834479969642857

 $00:04:49.966 \longrightarrow 00:04:50.999$  on this graph,

NOTE Confidence: 0.834479969642857

 $00:04:51.000 \longrightarrow 00:04:54.864$  but the hazard ratio that increased

NOTE Confidence: 0.834479969642857

 $00:04:54.864 \longrightarrow 00:04:58.151$  that happens between 20 and 2121

NOTE Confidence: 0.834479969642857

 $00:04:58.151 \longrightarrow 00:05:00.319$  and 22 all the way up to 25,

NOTE Confidence: 0.834479969642857

 $00{:}05{:}00.320 \dashrightarrow 00{:}05{:}02.732$  each of those one millimeter mercury

NOTE Confidence: 0.834479969642857

 $00:05:02.732 \longrightarrow 00:05:05.232$  increments is of greater clinical

 $00:05:05.232 \longrightarrow 00:05:07.847$  significance than any one millimeter

NOTE Confidence: 0.834479969642857

 $00{:}05{:}07.847 \dashrightarrow 00{:}05{:}10.478$  mercury increment that follows it.

NOTE Confidence: 0.834479969642857

 $00{:}05{:}10.480 \dashrightarrow 00{:}05{:}12.657$  This study was also able to establish

NOTE Confidence: 0.834479969642857

 $00{:}05{:}12.657 \dashrightarrow 00{:}05{:}14.968$  that the risk that comes along with

NOTE Confidence: 0.834479969642857

00:05:14.968 --> 00:05:16.942 having this mean pay pressure of

NOTE Confidence: 0.834479969642857

00:05:17.008 --> 00:05:18.408 20 and above occurs irrespective

NOTE Confidence: 0.834479969642857

 $00:05:18.408 \longrightarrow 00:05:20.078$  of what the PR is.

NOTE Confidence: 0.834479969642857

 $00:05:20.080 \longrightarrow 00:05:22.090$  So whether you're a low PVR

NOTE Confidence: 0.834479969642857

 $00{:}05{:}22.090 \to 00{:}05{:}24.400$  patient or a high PVR patient,

NOTE Confidence: 0.834479969642857

 $00:05:24.400 \longrightarrow 00:05:26.906$  having a mean pay pressure that is

NOTE Confidence: 0.834479969642857

 $00{:}05{:}26.906 \dashrightarrow 00{:}05{:}29.488$  20 or above increases your risk of

NOTE Confidence: 0.834479969642857

 $00{:}05{:}29.488 \dashrightarrow 00{:}05{:}31.750$  mortality and your risk of hospitalization.

NOTE Confidence: 0.834479969642857

 $00:05:31.750 \longrightarrow 00:05:34.070$  Fast forward a couple years,

NOTE Confidence: 0.834479969642857

 $00{:}05{:}34.070 \dashrightarrow 00{:}05{:}36.408$  there was a paper using similar data,

NOTE Confidence: 0.834479969642857

 $00:05:36.410 \longrightarrow 00:05:37.204$  same database,

NOTE Confidence: 0.834479969642857

 $00:05:37.204 \longrightarrow 00:05:39.586$  that was able to establish that

00:05:39.586 --> 00:05:41.940 the previous PVR definition for pH,

NOTE Confidence: 0.834479969642857

 $00:05:41.940 \longrightarrow 00:05:44.348$  which was three wood units and above,

NOTE Confidence: 0.834479969642857

 $00:05:44.350 \longrightarrow 00:05:47.280$  similarly was missing a lot

NOTE Confidence: 0.834479969642857

 $00:05:47.280 \longrightarrow 00:05:49.624$  of morbidity and mortality.

NOTE Confidence: 0.834479969642857

 $00:05:49.630 \longrightarrow 00:05:52.353$  The red lines here sort of reflect

NOTE Confidence: 0.834479969642857

 $00:05:52.353 \longrightarrow 00:05:54.462$  the density of patients that

NOTE Confidence: 0.834479969642857

00:05:54.462 --> 00:05:57.024 exist at any given PVR value,

NOTE Confidence: 0.834479969642857

 $00{:}05{:}57.030 \dashrightarrow 00{:}05{:}59.856$  and the blue line here represents

NOTE Confidence: 0.834479969642857

 $00:05:59.856 \longrightarrow 00:06:01.740$  the increase in mortality.

NOTE Confidence: 0.834479969642857

 $00:06:01.740 \longrightarrow 00:06:03.520$  And you can see that.

NOTE Confidence: 0.834479969642857

 $00:06:03.520 \longrightarrow 00:06:06.526$  In individuals that have many pressures

NOTE Confidence: 0.834479969642857

 $00:06:06.526 \longrightarrow 00:06:11.126$  of 19 or above having a PVR that is above.

NOTE Confidence: 0.834479969642857

 $00:06:11.130 \longrightarrow 00:06:13.678$  Two, although this one really is 2.2,

NOTE Confidence: 0.834479969642857

00:06:13.678 --> 00:06:15.382 does confer significant

NOTE Confidence: 0.834479969642857

 $00:06:15.382 \longrightarrow 00:06:17.654$  increase in mortality and.

 $00:06:17.660 \longrightarrow 00:06:19.400$  As we mentioned before,

NOTE Confidence: 0.834479969642857

00:06:19.400 --> 00:06:21.140 this increase in mortality

NOTE Confidence: 0.834479969642857

 $00:06:21.140 \longrightarrow 00:06:23.470$  occurs both with subjects that

NOTE Confidence: 0.834479969642857

00:06:23.470 --> 00:06:25.314 have classic pH Physiology,

NOTE Confidence: 0.834479969642857

 $00:06:25.320 \longrightarrow 00:06:27.480$  which is to say I mean

NOTE Confidence: 0.834479969642857

00:06:27.480 --> 00:06:28.678 pressure that's you know,

NOTE Confidence: 0.834479969642857

 $00:06:28.678 \longrightarrow 00:06:30.590$  19 or above in the setting of a

NOTE Confidence: 0.834479969642857

00:06:30.656 --> 00:06:32.956 low wedge pressure or pulmonary

NOTE Confidence: 0.834479969642857

 $00{:}06{:}32.956 \dashrightarrow 00{:}06{:}34.336$  venous hypertension Physiology.

NOTE Confidence: 0.834479969642857

 $00:06:34.340 \longrightarrow 00:06:36.392$  So if you're PR is over 2 and you

NOTE Confidence: 0.834479969642857

 $00{:}06{:}36.392 \dashrightarrow 00{:}06{:}38.480$  have pulmonary venous hypertension,

NOTE Confidence: 0.83447996964285700:06:38.480 --> 00:06:39.032 same thing,

NOTE Confidence: 0.834479969642857

 $00:06:39.032 \longrightarrow 00:06:40.412$  increased risk of mortality and

NOTE Confidence: 0.834479969642857

 $00:06:40.412 \longrightarrow 00:06:42.010$  increased risk of hospitalization.

NOTE Confidence: 0.888029104

 $00:06:44.280 \longrightarrow 00:06:47.388$  The sum total of all of these

NOTE Confidence: 0.888029104

 $00:06:47.388 \longrightarrow 00:06:49.012$  recommendations sort of came

 $00:06:49.012 \longrightarrow 00:06:51.486$  to a head in the fall of 2022,

NOTE Confidence: 0.888029104

 $00:06:51.486 \longrightarrow 00:06:53.616$  where the European Respiratory Society

NOTE Confidence: 0.888029104

00:06:53.616 --> 00:06:55.819 and European Society of Cardiology

NOTE Confidence: 0.888029104

 $00:06:55.819 \longrightarrow 00:06:58.399$  released their new set of guidelines.

NOTE Confidence: 0.888029104

 $00:06:58.400 \longrightarrow 00:07:00.992$  And define pulmonary hypertension

NOTE Confidence: 0.888029104

 $00:07:00.992 \longrightarrow 00:07:05.309$  and it's a subtypes as follows PH-20

NOTE Confidence: 0.888029104

00:07:05.309 --> 00:07:08.312 and above precapillary pH is sort of

NOTE Confidence: 0.888029104

 $00:07:08.312 \longrightarrow 00:07:10.599$  your your classic low wedge pressure

NOTE Confidence: 0.888029104

 $00:07:10.599 \longrightarrow 00:07:12.880$  but the PR cut off here is now too.

NOTE Confidence: 0.888029104

 $00{:}07{:}12.880 \dashrightarrow 00{:}07{:}14.625$  And then we've isolated post

NOTE Confidence: 0.888029104

00:07:14.625 --> 00:07:16.370 capillary combined pre and post

NOTE Confidence: 0.888029104

 $00:07:16.429 \longrightarrow 00:07:18.349$  capillary and then exercise page also

NOTE Confidence: 0.888029104

 $00{:}07{:}18.349 \dashrightarrow 00{:}07{:}20.559$  made it back into the definition.

NOTE Confidence: 0.888029104

 $00:07:20.560 \longrightarrow 00:07:22.048$  So now we're going to step back five

NOTE Confidence: 0.888029104

 $00:07:22.048 \longrightarrow 00:07:23.629$  years to the previous set of guidelines

 $00:07:23.629 \longrightarrow 00:07:25.281$  and instead of looking at the human

NOTE Confidence: 0.888029104

00:07:25.281 --> 00:07:26.619 dynamics as we know that changed,

NOTE Confidence: 0.888029104

 $00:07:26.620 \longrightarrow 00:07:28.318$  I want to just look at.

NOTE Confidence: 0.888029104

00:07:28.320 --> 00:07:30.108 Our Group 3 pH paradigm which

NOTE Confidence: 0.888029104

00:07:30.108 --> 00:07:32.908 was um pH in the setting of lung

NOTE Confidence: 0.888029104

 $00:07:32.908 \longrightarrow 00:07:34.436$  disease and or hypoxia,

NOTE Confidence: 0.888029104

 $00:07:34.440 \longrightarrow 00:07:37.240$  and then importantly both sleep

NOTE Confidence: 0.888029104

 $00:07:37.240 \longrightarrow 00:07:39.480$  disorder breathing and alveolar

NOTE Confidence: 0.888029104

 $00{:}07{:}39.480 \dashrightarrow 00{:}07{:}41.139$  hypoventilation disorders were listed

NOTE Confidence: 0.888029104

 $00:07:41.139 \longrightarrow 00:07:43.810$  as causes of pH or Group 3 pH,

NOTE Confidence: 0.888029104

 $00:07:43.810 \longrightarrow 00:07:46.660$  specifically and.

NOTE Confidence: 0.678171770833333

00:07:49.570 --> 00:07:51.460 Group 2 PAH, which is P secondary

NOTE Confidence: 0.678171770833333

00:07:51.460 --> 00:07:53.150 left side of heart disease.

NOTE Confidence: 0.678171770833333

 $00:07:53.150 \longrightarrow 00:07:55.470$  They did recommend evaluating for

NOTE Confidence: 0.678171770833333

 $00:07:55.470 \longrightarrow 00:07:57.790$  sleep apnea syndrome and other

NOTE Confidence: 0.678171770833333

00:07:57.870 --> 00:07:59.806 commodities as well before any

 $00:07:59.806 \longrightarrow 00:08:01.196$  consideration of treatment of pH.

NOTE Confidence: 0.678171770833333

 $00:08:01.200 \longrightarrow 00:08:02.195$  So there's a little bit

NOTE Confidence: 0.678171770833333

 $00:08:02.195 \longrightarrow 00:08:03.190$  of a mixed picture here,

NOTE Confidence: 0.678171770833333

 $00:08:03.190 \longrightarrow 00:08:06.270$  but it's clear that sleep apnea appears

NOTE Confidence: 0.678171770833333

 $00{:}08{:}06.270 \dashrightarrow 00{:}08{:}08.909$  in the guidelines Fast forward to.

NOTE Confidence: 0.678171770833333

 $00:08:08.910 \longrightarrow 00:08:11.054$  The new aesthetic guidelines

NOTE Confidence: 0.678171770833333

00:08:11.054 --> 00:08:12.910 2022 and I quote the authors,

NOTE Confidence: 0.678171770833333

 $00:08:12.910 \longrightarrow 00:08:14.085$  instead of the general term

NOTE Confidence: 0.678171770833333

00:08:14.085 --> 00:08:14.790 sleep disorder breathing,

NOTE Confidence: 0.678171770833333

 $00:08:14.790 \longrightarrow 00:08:16.310$  the term hypoventilation syndrome should

NOTE Confidence: 0.678171770833333

00:08:16.310 --> 00:08:18.474 be used within Group 3 to describe

NOTE Confidence: 0.678171770833333

 $00:08:18.474 \longrightarrow 00:08:20.250$  conditions with increased risk of pH.

NOTE Confidence: 0.678171770833333

 $00{:}08{:}20.250 \dashrightarrow 00{:}08{:}21.754$  Sole nocturnal obstructive sleep

NOTE Confidence: 0.678171770833333

00:08:21.754 --> 00:08:24.430 apnea is generally not a cause of pH,

NOTE Confidence: 0.678171770833333

 $00:08:24.430 \longrightarrow 00:08:26.500$  but pH is frequent in patients

 $00:08:26.500 \longrightarrow 00:08:27.535$  with hypoventilation syndromes

NOTE Confidence: 0.678171770833333

 $00{:}08{:}27.535 \dashrightarrow 00{:}08{:}28.930$  causing daytime hypercapnia.

NOTE Confidence: 0.678171770833333 00:08:28.930 --> 00:08:30.970 OK, so. NOTE Confidence: 0.678171770833333 00:08:30.970 --> 00:08:32.610 Great. NOTE Confidence: 0.678171770833333

 $00:08:32.610 \longrightarrow 00:08:34.584$  Now the problem here is that there

NOTE Confidence: 0.678171770833333

 $00:08:34.584 \longrightarrow 00:08:36.345$  really isn't much else on sleep

NOTE Confidence: 0.678171770833333

 $00:08:36.345 \longrightarrow 00:08:38.049$  apnea in these guidelines at all,

NOTE Confidence: 0.678171770833333

 $00:08:38.050 \longrightarrow 00:08:40.726$  so it's sort of just subtracted.

NOTE Confidence: 0.678171770833333

 $00:08:40.730 \longrightarrow 00:08:44.366$  But we know based on our.

NOTE Confidence: 0.678171770833333

00:08:44.370 --> 00:08:46.248 You know, reality in our clinical

NOTE Confidence: 0.678171770833333

 $00{:}08{:}46.248 \to 00{:}08{:}47.830$  experience that there's something there.

NOTE Confidence: 0.678171770833333

 $00:08:47.830 \longrightarrow 00:08:50.128$  So let's go back in time.

NOTE Confidence: 0.678171770833333

00:08:50.130 --> 00:08:51.066 This is before I was born,

NOTE Confidence: 0.678171770833333

 $00:08:51.070 \longrightarrow 00:08:53.552$  but there was a study in 1976 that looked

NOTE Confidence: 0.678171770833333

 $00:08:53.552 \longrightarrow 00:08:56.310$  at 12 subjects with severe sleep apnea.

NOTE Confidence: 0.678171770833333

 $00:08:56.310 \longrightarrow 00:08:57.624$  There's no way you get IRB

 $00:08:57.624 \longrightarrow 00:08:58.810$  approval for this again today,

NOTE Confidence: 0.678171770833333

 $00:08:58.810 \longrightarrow 00:09:01.606$  but these patients were all catheterized

NOTE Confidence: 0.678171770833333

 $00:09:01.606 \longrightarrow 00:09:03.957$  with radial and pulmonary arterial

NOTE Confidence: 0.678171770833333

 $00:09:03.957 \longrightarrow 00:09:06.007$  catheters and they were just

NOTE Confidence: 0.678171770833333

 $00:09:06.007 \dashrightarrow 00:09:08.909$  allowed to sleep and have as many

NOTE Confidence: 0.678171770833333

 $00:09:08.909 \longrightarrow 00:09:10.894$  apneic episodes as they desired.

NOTE Confidence: 0.678171770833333

00:09:10.900 --> 00:09:14.540 You can see that during waking hours,

NOTE Confidence: 0.678171770833333

 $00:09:14.540 \longrightarrow 00:09:16.385$  there was probably a couple

NOTE Confidence: 0.678171770833333

00:09:16.385 --> 00:09:18.480 subjects that had mean pressures of,

NOTE Confidence: 0.678171770833333

00:09:18.480 --> 00:09:19.272 you know,

NOTE Confidence: 0.678171770833333

 $00:09:19.272 \longrightarrow 00:09:20.460$  20 or above.

NOTE Confidence: 0.678171770833333

 $00:09:20.460 \longrightarrow 00:09:23.490$  But importantly with sleep there was

NOTE Confidence: 0.678171770833333

 $00{:}09{:}23.490 \dashrightarrow 00{:}09{:}25.005$  significant pulmonary hypertension

NOTE Confidence: 0.678171770833333

 $00:09:25.005 \longrightarrow 00:09:27.232$  that developed of tentimes in

NOTE Confidence: 0.678171770833333

 $00:09:27.232 \longrightarrow 00:09:29.690$  the setting of systolic and

 $00:09:29.690 \longrightarrow 00:09:31.090$  systemic hypertension as well.

NOTE Confidence: 0.678171770833333

 $00:09:31.090 \longrightarrow 00:09:31.640$  But nonetheless,

NOTE Confidence: 0.678171770833333

 $00:09:31.640 \longrightarrow 00:09:33.565$  this is a fact of sleep apnea.

NOTE Confidence: 0.678171770833333

00:09:33.570 --> 00:09:36.858 We know this is happening overnight.

NOTE Confidence: 0.678171770833333

 $00:09:36.860 \longrightarrow 00:09:38.935$  The exact prevalence is sort

NOTE Confidence: 0.678171770833333

 $00:09:38.935 \longrightarrow 00:09:40.595$  of difficult to ascertain.

NOTE Confidence: 0.678171770833333

 $00{:}09{:}40.600 \dashrightarrow 00{:}09{:}44.576$  The studies that look for pH and OSA

NOTE Confidence: 0.678171770833333

 $00:09:44.580 \longrightarrow 00:09:49.298$  have non uniform diagnostic criteria for pH.

NOTE Confidence: 0.678171770833333

 $00{:}09{:}49.300 \dashrightarrow 00{:}09{:}51.050$  PA pressures of mean pressures

NOTE Confidence: 0.678171770833333

 $00:09:51.050 \longrightarrow 00:09:53.080$  of 20 mean papers of 25.

NOTE Confidence: 0.678171770833333

00:09:53.080 --> 00:09:55.282 The modalities used to diagnose the

NOTE Confidence: 0.678171770833333

 $00{:}09{:}55.282 \dashrightarrow 00{:}09{:}57.184$  pH echocardiogram or relocation buried

NOTE Confidence: 0.678171770833333

 $00:09:57.184 \longrightarrow 00:09:59.452$  in the patient populations were not

NOTE Confidence: 0.678171770833333

00:09:59.452 --> 00:10:00.860 particularly phenotyped at all,

NOTE Confidence: 0.678171770833333

 $00:10:00.860 \longrightarrow 00:10:03.768$  so there was a lot of variants and subjects.

NOTE Confidence: 0.678171770833333

 $00:10:03.768 \longrightarrow 00:10:07.330$  Some studies had a high fraction

00:10:07.330 --> 00:10:09.555 of subjects with significant COPD

NOTE Confidence: 0.678171770833333

 $00:10:09.555 \longrightarrow 00:10:11.260$  as others had not,

NOTE Confidence: 0.678171770833333

 $00:10:11.260 \longrightarrow 00:10:13.498$  but within all these limitations there

NOTE Confidence: 0.678171770833333

00:10:13.498 --> 00:10:15.581 is a prevalence range of between

NOTE Confidence: 0.678171770833333

 $00:10:15.581 \longrightarrow 00:10:19.626$  12 and 34% across a variety of studies.

NOTE Confidence: 0.678171770833333

00:10:19.630 --> 00:10:20.654 More recently,

NOTE Confidence: 0.678171770833333

00:10:20.654 --> 00:10:24.313 the group out of Cleveland Clinic looked

NOTE Confidence: 0.678171770833333

 $00:10:24.313 \longrightarrow 00:10:28.394$  at a cohort of almost 500 patients.

NOTE Confidence: 0.678171770833333

 $00:10:28.400 \longrightarrow 00:10:30.572$  That had right heart catheter relations

NOTE Confidence: 0.678171770833333

 $00:10:30.572 \longrightarrow 00:10:34.488$  done within two years of polysomnography.

NOTE Confidence: 0.678171770833333

 $00{:}10{:}34.490 \dashrightarrow 00{:}10{:}37.220$  And they find some, you know,

NOTE Confidence: 0.678171770833333

 $00:10:37.220 \longrightarrow 00:10:38.602$  interesting findings,

NOTE Confidence: 0.678171770833333

 $00{:}10{:}38.602 \dashrightarrow 00{:}10{:}43.439$  notably that the HIV doesn't seem to

NOTE Confidence: 0.678171770833333

00:10:43.439 --> 00:10:46.446 discriminate between developing pH,

NOTE Confidence: 0.678171770833333

 $00:10:46.446 \longrightarrow 00:10:48.776$  which is these three cohorts,

 $00:10:48.780 \longrightarrow 00:10:52.777$  or not having pH but having OSA.

NOTE Confidence: 0.678171770833333

00:10:52.780 --> 00:10:54.160 What did correlate,

NOTE Confidence: 0.678171770833333 00:10:54.160 --> 00:10:54.620 however, NOTE Confidence: 0.678171770833333

 $00:10:54.620 \longrightarrow 00:10:58.596$  was your T-90 and then also your

NOTE Confidence: 0.678171770833333

 $00:10:58.596 \longrightarrow 00:11:00.354$  nature auction saturations,

NOTE Confidence: 0.678171770833333

 $00:11:00.360 \longrightarrow 00:11:02.424$  which they don't have listed on

NOTE Confidence: 0.678171770833333

 $00:11:02.424 \longrightarrow 00:11:05.494$  this table here as well.

NOTE Confidence: 0.678171770833333

00:11:05.494 --> 00:11:09.022 But the findings on the polysomnography

NOTE Confidence: 0.678171770833333

 $00{:}11{:}09.022 \dashrightarrow 00{:}11{:}10.887$  that were predictive of pulmonary

NOTE Confidence: 0.678171770833333

00:11:10.887 --> 00:11:12.150 vascular disease didn't really

NOTE Confidence: 0.678171770833333

 $00:11:12.150 \longrightarrow 00:11:13.830$  do a good job of predicting,

NOTE Confidence: 0.678171770833333 00:11:13.830 --> 00:11:14.566 you know, NOTE Confidence: 0.678171770833333

00:11:14.566 --> 00:11:16.038 whether you pulmonary venous

NOTE Confidence: 0.678171770833333

00:11:16.038 --> 00:11:17.510 hypertension or pulmonary arterial

NOTE Confidence: 0.752070949666667

00:11:17.563 --> 00:11:19.528 hypertension or something that's mixed.

NOTE Confidence: 0.752070949666667

 $00:11:19.530 \longrightarrow 00:11:21.864$  We just know that these desaturations

00:11:21.864 --> 00:11:23.923 were happening and they're associated

NOTE Confidence: 0.752070949666667

 $00:11:23.923 \longrightarrow 00:11:26.563$  with pulmonary vascular disease of some

NOTE Confidence: 0.752070949666667

00:11:26.563 --> 00:11:29.754 variety and that's sort of like you know

NOTE Confidence: 0.752070949666667

 $00:11:29.754 \longrightarrow 00:11:32.374$  clarified further here where it's the

NOTE Confidence: 0.752070949666667

 $00{:}11{:}32.374 \dashrightarrow 00{:}11{:}34.649$  the T-90 that really differentiates.

NOTE Confidence: 0.752070949666667

00:11:34.650 --> 00:11:37.856 Between having pH and not having pH.

NOTE Confidence: 0.752070949666667

00:11:37.860 --> 00:11:39.724 But it doesn't discriminate

NOTE Confidence: 0.752070949666667

 $00:11:39.724 \longrightarrow 00:11:41.710$  between the types of pH.

NOTE Confidence: 0.752070949666667

00:11:41.710 --> 00:11:43.460 AI, like I mentioned earlier,

NOTE Confidence: 0.752070949666667

 $00:11:43.460 \longrightarrow 00:11:47.654$  does not predict whether you have pH or not.

NOTE Confidence: 0.752070949666667

 $00:11:47.660 \longrightarrow 00:11:50.528$  OK. So, so now what it's

NOTE Confidence: 0.752070949666667

 $00:11:50.528 \longrightarrow 00:11:52.160$  out of the guidelines.

NOTE Confidence: 0.752070949666667

 $00{:}11{:}52.160 --> 00{:}11{:}53.356$  We know it exists.

NOTE Confidence: 0.752070949666667

 $00{:}11{:}53.356 \dashrightarrow 00{:}11{:}55.559$  We know it's probably have some clinical

NOTE Confidence: 0.752070949666667

00:11:55.559 --> 00:11:57.641 significance just because we know that

 $00{:}11{:}57.641 \dashrightarrow 00{:}12{:}00.238$  mild pH is of clinical significance.

NOTE Confidence: 0.752070949666667

 $00:12:00.240 \longrightarrow 00:12:02.220$  So what do we do?

NOTE Confidence: 0.752070949666667

 $00:12:02.220 \longrightarrow 00:12:06.116$  And so in a lot of ways this talk is more

NOTE Confidence: 0.752070949666667

 $00:12:06.116 \longrightarrow 00:12:08.974$  about my approach and a lot of credit

NOTE Confidence: 0.752070949666667

 $00:12:08.974 \longrightarrow 00:12:11.408$  should go to Doctor Mosimane because

NOTE Confidence: 0.752070949666667

 $00{:}12{:}11.408 \dashrightarrow 00{:}12{:}15.016$  when I was a pulmonary fellow and we

NOTE Confidence: 0.752070949666667

 $00:12:15.016 \longrightarrow 00:12:18.005$  were working with that set of guidelines.

NOTE Confidence: 0.752070949666667

00:12:18.010 --> 00:12:21.205 I assume that OSA belonged in in Group 3,

NOTE Confidence: 0.752070949666667

 $00:12:21.210 \longrightarrow 00:12:25.719$  pH and he was immediately doubtful of it.

NOTE Confidence: 0.752070949666667

00:12:25.720 --> 00:12:29.269 And thought it was much more related

NOTE Confidence: 0.752070949666667

 $00{:}12{:}29.269 \dashrightarrow 00{:}12{:}32.010$  to the consequent diabetology.

NOTE Confidence: 0.752070949666667

 $00:12:32.010 \longrightarrow 00:12:34.400$  So there is a role I think for sort of

NOTE Confidence: 0.752070949666667

 $00:12:34.468 \longrightarrow 00:12:36.472$  trying to phenotype these patients and

NOTE Confidence: 0.752070949666667

 $00:12:36.472 \longrightarrow 00:12:39.440$  to that end in the Blue Journal 2014

NOTE Confidence: 0.752070949666667

 $00:12:39.440 \longrightarrow 00:12:43.360$  there was a consensus statement made by.

NOTE Confidence: 0.752070949666667

 $00{:}12{:}43.360 \dashrightarrow 00{:}12{:}49.560$  A group of pH specialists who suggested.

 $00:12:49.560 \longrightarrow 00:12:53.176$  That within pH there should be an effort

NOTE Confidence: 0.752070949666667

 $00:12:53.176 \longrightarrow 00:12:55.724$  made to more adequately phenotype these

NOTE Confidence: 0.752070949666667

00:12:55.724 --> 00:12:58.190 patients just because there's a lot

NOTE Confidence: 0.752070949666667

00:12:58.256 --> 00:13:00.671 of diversity within that bucket of pH

NOTE Confidence: 0.752070949666667

 $00{:}13{:}00.671 \dashrightarrow 00{:}13{:}02.528$  between congenital heart disease and

NOTE Confidence: 0.752070949666667

 $00:13:02.528 \longrightarrow 00:13:04.413$  HIV and portal pulmonary hypertension,

NOTE Confidence: 0.752070949666667

 $00:13:04.420 \longrightarrow 00:13:05.890$  a drug and toxin related pH,

NOTE Confidence: 0.752070949666667

 $00:13:05.890 \longrightarrow 00:13:10.769$  there are the underlying causes are myriad.

NOTE Confidence: 0.752070949666667

 $00{:}13{:}10.770 \dashrightarrow 00{:}13{:}12.378$  To that end,

NOTE Confidence: 0.752070949666667

00:13:12.378 --> 00:13:14.884 the 2022 consent guidelines did actually

NOTE Confidence: 0.752070949666667

 $00:13:14.884 \longrightarrow 00:13:17.730$  sort of move the needle on this a little bit.

NOTE Confidence: 0.752070949666667

 $00:13:17.730 \longrightarrow 00:13:19.732$  And that was based on a cluster

NOTE Confidence: 0.752070949666667

 $00{:}13{:}19.732 \dashrightarrow 00{:}13{:}21.818$  analysis that was done using one of

NOTE Confidence: 0.752070949666667

00:13:21.818 --> 00:13:23.570 the big pH registries in Europe,

NOTE Confidence: 0.752070949666667

 $00:13:23.570 \longrightarrow 00:13:25.950$  which is the compare registry.

 $00:13:25.950 \longrightarrow 00:13:29.247$  And it was an analysis of the

NOTE Confidence: 0.752070949666667

00:13:29.247 --> 00:13:33.352 compare registry that generated 3

NOTE Confidence: 0.752070949666667

 $00:13:33.352 \longrightarrow 00:13:37.568$  sort of main clusters.

NOTE Confidence: 0.752070949666667

 $00:13:37.570 \longrightarrow 00:13:39.880$  The classic idiopathic PAH cluster.

NOTE Confidence: 0.752070949666667

00:13:39.880 --> 00:13:41.630 So that's your, you know,

NOTE Confidence: 0.752070949666667

 $00:13:41.630 \longrightarrow 00:13:45.630$  30-40 year old woman.

NOTE Confidence: 0.752070949666667

 $00:13:45.630 \longrightarrow 00:13:47.676$  As opposed to a left heart

NOTE Confidence: 0.752070949666667

00:13:47.676 --> 00:13:49.794 phenotype or a cardio pulmonary

NOTE Confidence: 0.752070949666667

 $00{:}13{:}49.794 \dashrightarrow 00{:}13{:}52.302$  phenotype which are often men,

NOTE Confidence: 0.752070949666667

 $00:13:52.302 \longrightarrow 00:13:53.218$  former smokers,

NOTE Confidence: 0.752070949666667

 $00{:}13{:}53.220 \dashrightarrow 00{:}13{:}56.310$ low DL Co not particularly significant

NOTE Confidence: 0.752070949666667

 $00{:}13{:}56.310 \dashrightarrow 00{:}13{:}59.164$  findings on CT scanning with risk

NOTE Confidence: 0.752070949666667

 $00{:}13{:}59.164 \dashrightarrow 00{:}14{:}02.041$  factors left side of heart disease and

NOTE Confidence: 0.752070949666667

 $00:14:02.041 \longrightarrow 00:14:05.478$  these patients have well we the

NOTE Confidence: 0.752070949666667

 $00:14:05.478 \longrightarrow 00:14:08.299$  classic idiopathic phenotype and these

NOTE Confidence: 0.752070949666667

 $00:14:08.299 \longrightarrow 00:14:11.219$  two phenotypes have fairly different

 $00:14:11.219 \longrightarrow 00:14:14.035$  responses to pH therapies both when it

NOTE Confidence: 0.752070949666667

 $00:14:14.035 \longrightarrow 00:14:16.120$  comes to improvement in functional status.

NOTE Confidence: 0.752070949666667

 $00:14:16.120 \longrightarrow 00:14:18.955$  Uh and then also sort of physiologic

NOTE Confidence: 0.752070949666667

 $00:14:18.955 \longrightarrow 00:14:21.280$  improvement on subsequent catheterization.

NOTE Confidence: 0.752070949666667

 $00:14:21.280 \longrightarrow 00:14:22.292$  Nonetheless in the guidelines

NOTE Confidence: 0.752070949666667

00:14:22.292 --> 00:14:24.129 they make a point to say that

NOTE Confidence: 0.752070949666667

 $00:14:24.129 \longrightarrow 00:14:25.755$  there are currently are still no

NOTE Confidence: 0.752070949666667

 $00{:}14{:}25.755 \dashrightarrow 00{:}14{:}27.484$  evidence based rules for how best

NOTE Confidence: 0.752070949666667

 $00{:}14{:}27.484 \dashrightarrow 00{:}14{:}28.919$  to determine the patients phenotype.

NOTE Confidence: 0.752070949666667

 $00:14:28.920 \longrightarrow 00:14:31.916$  We just know that there's something there.

NOTE Confidence: 0.752070949666667

00:14:31.920 --> 00:14:35.880 So what would an OSA pH phenotype look like?

NOTE Confidence: 0.752070949666667

 $00:14:35.880 \longrightarrow 00:14:39.636$  We know that there's some relationship,

NOTE Confidence: 0.752070949666667

 $00:14:39.640 \longrightarrow 00:14:41.680$  but how would we go about trying to do so?

NOTE Confidence: 0.752070949666667

 $00:14:41.680 \longrightarrow 00:14:44.938$  And so this is my approach.

NOTE Confidence: 0.752070949666667

 $00:14:44.940 \longrightarrow 00:14:47.761$  The guidelines do try and describe a

 $00:14:47.761 \longrightarrow 00:14:49.514$  phenotype for pulmonary hypertension

NOTE Confidence: 0.752070949666667

 $00:14:49.514 \longrightarrow 00:14:52.334$  secondary left side of heart disease

NOTE Confidence: 0.823288484545455

 $00:14:52.340 \longrightarrow 00:14:53.605$  and I'll draw your attention

NOTE Confidence: 0.823288484545455

 $00:14:53.605 \longrightarrow 00:14:55.340$  to a couple of these factors.

NOTE Confidence: 0.823288484545455

 $00:14:55.340 \longrightarrow 00:14:58.280$  And so patients that have

NOTE Confidence: 0.823288484545455

 $00:14:58.280 \longrightarrow 00:15:00.632$  a high likelihood of.

NOTE Confidence: 0.823288484545455

00:15:00.640 --> 00:15:02.173 PH second to left side of heart

NOTE Confidence: 0.823288484545455

 $00{:}15{:}02.173 \dashrightarrow 00{:}15{:}03.540$  disease have a constellation of

NOTE Confidence: 0.823288484545455

 $00:15:03.540 \longrightarrow 00:15:05.175$  sort of the metabolic syndrome,

NOTE Confidence: 0.823288484545455

00:15:05.180 --> 00:15:07.148 obesity, hypertension and

NOTE Confidence: 0.823288484545455

 $00:15:07.148 \longrightarrow 00:15:09.116$  dyslipidemia glucose intolerance.

NOTE Confidence: 0.823288484545455

 $00:15:09.120 \longrightarrow 00:15:11.136$  They have no less side of heart disease

NOTE Confidence: 0.823288484545455

 $00:15:11.136 \longrightarrow 00:15:13.340$  or the risk factors for hypertension,

NOTE Confidence: 0.823288484545455

 $00{:}15{:}13.340 --> 00{:}15{:}14.340 \ diastolic \ dysfunction,$ 

NOTE Confidence: 0.823288484545455

00:15:14.340 --> 00:15:15.840 coronary artery disease,

NOTE Confidence: 0.823288484545455

 $00:15:15.840 \longrightarrow 00:15:18.080$  clinical diagnosis of heart failure,

00:15:18.080 --> 00:15:20.180 much higher prevalence of atrial

NOTE Confidence: 0.823288484545455

 $00:15:20.180 \longrightarrow 00:15:21.860$  fibrillation and then echocardiographic

NOTE Confidence: 0.823288484545455

 $00:15:21.860 \longrightarrow 00:15:23.515$  findings that are suggested of

NOTE Confidence: 0.823288484545455

00:15:23.515 --> 00:15:24.990 a significant burning of left

NOTE Confidence: 0.823288484545455

 $00:15:24.990 \longrightarrow 00:15:26.926$  sided heart disease primarily with

NOTE Confidence: 0.823288484545455

 $00:15:26.926 \longrightarrow 00:15:29.191$  the left atrial dilatation and

NOTE Confidence: 0.823288484545455

00:15:29.191 --> 00:15:30.800 then echocardiographic signs of.

NOTE Confidence: 0.823288484545455

 $00{:}15{:}30.800 \dashrightarrow 00{:}15{:}32.265$  Mythology I I should point

NOTE Confidence: 0.823288484545455

 $00:15:32.265 \longrightarrow 00:15:33.910$  out here that there is a,

NOTE Confidence: 0.823288484545455

 $00:15:33.910 \longrightarrow 00:15:36.490$  there is good data on insulin

NOTE Confidence: 0.823288484545455

 $00:15:36.490 \longrightarrow 00:15:39.418$  resistance in in pH but not

NOTE Confidence: 0.823288484545455

00:15:39.418 --> 00:15:41.230 necessarily frank diabetes.

NOTE Confidence: 0.823288484545455

 $00{:}15{:}41.230 \dashrightarrow 00{:}15{:}43.673$  And so I sleep audience would look

NOTE Confidence: 0.823288484545455

00:15:43.673 --> 00:15:46.670 at this chart and say that's kind of

NOTE Confidence: 0.823288484545455

 $00:15:46.670 \longrightarrow 00:15:48.960$  familiar and we know that patients

00:15:48.960 --> 00:15:52.259 with OSA have a variety of associated

NOTE Confidence: 0.823288484545455

 $00{:}15{:}52.259 \dashrightarrow 00{:}15{:}56.121$  commodities that are are shared with

NOTE Confidence: 0.823288484545455

00:15:56.121 --> 00:15:58.250 the pH left hand side of heart disease,

NOTE Confidence: 0.823288484545455

00:15:58.250 --> 00:16:00.162 phenotype, obesity,

NOTE Confidence: 0.823288484545455

00:16:00.162 -> 00:16:02.074 metabolic syndrome.

NOTE Confidence: 0.823288484545455

00:16:02.074 --> 00:16:04.011 Discology and atrial fibrillation

NOTE Confidence: 0.823288484545455

00:16:04.011 --> 00:16:06.982 to start the lease and so I I think

NOTE Confidence: 0.823288484545455

 $00:16:06.982 \longrightarrow 00:16:08.830$  a way to start this conversation

NOTE Confidence: 0.823288484545455

 $00:16:08.830 \longrightarrow 00:16:11.050$  is sort of just go through these

NOTE Confidence: 0.823288484545455

 $00:16:11.050 \longrightarrow 00:16:14.658$  to to to try and prove this point.

NOTE Confidence: 0.823288484545455

00:16:14.660 --> 00:16:16.428 I I will say there is you know

NOTE Confidence: 0.823288484545455

00:16:16.428 --> 00:16:18.002 maybe some data that would suggest

NOTE Confidence: 0.823288484545455

 $00:16:18.002 \longrightarrow 00:16:20.030$  that there is a little bit of

NOTE Confidence: 0.823288484545455

00:16:20.030 --> 00:16:21.089 bidirectionality between some

NOTE Confidence: 0.823288484545455

 $00:16:21.089 \longrightarrow 00:16:22.854$  of these findings and OSA.

NOTE Confidence: 0.823288484545455

 $00{:}16{:}22.860 \dashrightarrow 00{:}16{:}25.229$  You know so for example patients

 $00:16:25.229 \longrightarrow 00:16:26.974$  with really bad heart failure

NOTE Confidence: 0.823288484545455

00:16:26.974 --> 00:16:28.370 might retain fluid overnight.

NOTE Confidence: 0.823288484545455

 $00{:}16{:}28.370 \dashrightarrow 00{:}16{:}30.566$  Those fluid chest might sort of

NOTE Confidence: 0.823288484545455

 $00:16:30.566 \longrightarrow 00:16:32.030$  predisposed to worse obstructive

NOTE Confidence: 0.823288484545455

00:16:32.087 --> 00:16:34.082 symptoms since but you know by and

NOTE Confidence: 0.823288484545455

 $00:16:34.082 \longrightarrow 00:16:35.665$  large these are the communities

NOTE Confidence: 0.823288484545455

 $00:16:35.665 \longrightarrow 00:16:37.651$  we associate with OSA are driven

NOTE Confidence: 0.823288484545455

 $00:16:37.651 \longrightarrow 00:16:39.088$  that that lead to SA.

NOTE Confidence: 0.825119618571429

 $00:16:41.890 \longrightarrow 00:16:43.750$  So obesity alone can result

NOTE Confidence: 0.825119618571429

 $00:16:43.750 \longrightarrow 00:16:45.238$  in pulmonary vascular disease

NOTE Confidence: 0.825119618571429

00:16:45.238 --> 00:16:47.050 through a variety of mechanisms,

NOTE Confidence: 0.825119618571429

00:16:47.050 --> 00:16:48.634 prior use of anorexia,

NOTE Confidence: 0.825119618571429

00:16:48.634 --> 00:16:50.454 eens, frank cardiomyopathy,

NOTE Confidence: 0.825119618571429

 $00{:}16{:}50.454 {\:\dashrightarrow\:} 00{:}16{:}53.302$  predisposition to thromboembolism and

NOTE Confidence: 0.825119618571429

 $00:16:53.302 \longrightarrow 00:16:57.830$  to fill this function and hyperuricemia.

 $00:16:57.830 \longrightarrow 00:17:01.774$  There is an interesting study that was done.

NOTE Confidence: 0.825119618571429

00:17:01.780 --> 00:17:06.588 Uh, in 2008, that looked at 76 consecutive

NOTE Confidence: 0.825119618571429

 $00:17:06.588 \longrightarrow 00:17:09.721$  autopsies of subjects with obesity.

NOTE Confidence: 0.825119618571429

 $00:17:09.721 \longrightarrow 00:17:11.726$  These are fairly high BMI.

NOTE Confidence: 0.777333919090909

 $00:17:13.900 \longrightarrow 00:17:15.970$  45 and above I believe and

NOTE Confidence: 0.777333919090909

00:17:15.970 --> 00:17:17.860 based on this autopsy study,

NOTE Confidence: 0.777333919090909

 $00:17:17.860 \longrightarrow 00:17:21.108$  there was a very high prevalence of

NOTE Confidence: 0.777333919090909

00:17:21.108 --> 00:17:24.066 pulmonary vascular changes that have

NOTE Confidence: 0.777333919090909

00:17:24.066 --> 00:17:27.198 implications for pulmonary hypertension,

NOTE Confidence: 0.777333919090909

00:17:27.200 --> 00:17:29.171 primarily pulmonary venous

NOTE Confidence: 0.777333919090909

 $00{:}17{:}29.171 \dashrightarrow 00{:}17{:}31.799$  hypertensive changes but but

NOTE Confidence: 0.777333919090909

 $00:17:31.799 \longrightarrow 00:17:35.580$  also arterial changes as well.

NOTE Confidence: 0.777333919090909

 $00:17:35.580 \longrightarrow 00:17:38.821$  And then an increased fractures of Frank

NOTE Confidence: 0.777333919090909

 $00:17:38.821 \longrightarrow 00:17:41.801$  Hemosiderosis and findings that that look

NOTE Confidence: 0.777333919090909

00:17:41.801 --> 00:17:43.817 like pulmonary capillary Hemangioma.

NOTE Confidence: 0.777333919090909

 $00:17:43.820 \longrightarrow 00:17:48.002$  Business as well on biopsy here on

00:17:48.002 --> 00:17:51.785 autopsy you know here we've got sort of

NOTE Confidence: 0.777333919090909

 $00{:}17{:}51.785 \dashrightarrow 00{:}17{:}54.610$  interstitial changes and then a lot of

NOTE Confidence: 0.777333919090909

00:17:54.610 --> 00:17:57.190 medial thickening and and pulmonary veins,

NOTE Confidence: 0.777333919090909

00:17:57.190 --> 00:17:59.569 tortuosity pulmonary veins,

NOTE Confidence: 0.777333919090909

 $00:17:59.569 \longrightarrow 00:18:03.534$  so in a non phenotyped.

NOTE Confidence: 0.777333919090909

00:18:03.540 --> 00:18:05.228 Cohort of OB subjects,

NOTE Confidence: 0.777333919090909

 $00:18:05.228 \longrightarrow 00:18:07.760$  we know that there are significant

NOTE Confidence: 0.777333919090909

 $00{:}18{:}07.840 \dashrightarrow 00{:}18{:}09.556$  vascular changes happening in

NOTE Confidence: 0.777333919090909

 $00:18:09.556 \longrightarrow 00:18:12.130$  the lung and we know nothing

NOTE Confidence: 0.777333919090909

 $00:18:12.214 \longrightarrow 00:18:14.659$  about these patients besides that

NOTE Confidence: 0.777333919090909

 $00:18:14.660 \longrightarrow 00:18:17.670$  this is just sort of all comers.

NOTE Confidence: 0.777333919090909

 $00:18:17.670 \longrightarrow 00:18:21.446$  The other way to look at this is.

NOTE Confidence: 0.777333919090909

00:18:21.450 --> 00:18:22.578 Using cardiac Mr.

NOTE Confidence: 0.777333919090909

00:18:22.578 --> 00:18:25.210 Data and some of you might be

NOTE Confidence: 0.777333919090909

 $00:18:25.296 \longrightarrow 00:18:27.616$  familiar with the Mesa study,

 $00:18:27.620 \longrightarrow 00:18:30.374$  so the multi ethnic study for

NOTE Confidence: 0.777333919090909

 $00:18:30.374 \longrightarrow 00:18:32.730$  atherosclerosis trying to look at

NOTE Confidence: 0.777333919090909

 $00:18:32.730 \longrightarrow 00:18:35.346$  subclinical heart disease in a variety

NOTE Confidence: 0.777333919090909

 $00:18:35.346 \longrightarrow 00:18:38.499$  of subjects and communities in America.

NOTE Confidence: 0.777333919090909

 $00:18:38.500 \longrightarrow 00:18:41.055$  There was an ancillary study that was

NOTE Confidence: 0.777333919090909

 $00:18:41.055 \longrightarrow 00:18:45.512$  performed and 4127 subjects were obtained.

NOTE Confidence: 0.777333919090909

 $00:18:45.512 \longrightarrow 00:18:49.119$  Of those around 2/3 were overweight or

NOTE Confidence: 0.777333919090909

 $00:18:49.119 \longrightarrow 00:18:51.795$  obese compared to a lean population.

NOTE Confidence: 0.777333919090909

 $00:18:51.800 \longrightarrow 00:18:55.280$  And there was an obvious and

NOTE Confidence: 0.777333919090909

 $00:18:55.280 \longrightarrow 00:18:58.928$  linear trend with BMI and increased

NOTE Confidence: 0.777333919090909

 $00{:}18{:}58.928 --{>} 00{:}19{:}00.920 \ {\rm right\ ventricular\ mass},$ 

NOTE Confidence: 0.777333919090909

 $00:19:00.920 \longrightarrow 00:19:02.488$  increased right ventricular diastolic

NOTE Confidence: 0.777333919090909

 $00:19:02.488 \longrightarrow 00:19:05.420$  volume and a decrease in the right

NOTE Confidence: 0.777333919090909

 $00:19:05.420 \longrightarrow 00:19:07.448$  ventricular ejection fraction even

NOTE Confidence: 0.777333919090909

00:19:07.448 --> 00:19:10.724 after adjustment for a variety at all

NOTE Confidence: 0.777333919090909

 $00{:}19{:}10.724 \dashrightarrow 00{:}19{:}12.700$  democratic demographic factors and

 $00:19:12.700 \longrightarrow 00:19:15.784$  then also left ventricular function as well.

NOTE Confidence: 0.777333919090909

 $00:19:15.784 \longrightarrow 00:19:18.893$  And so we know at a vascular level and

NOTE Confidence: 0.777333919090909

 $00:19:18.893 \longrightarrow 00:19:21.845$  then now we know at a functional level.

NOTE Confidence: 0.777333919090909

 $00:19:21.850 \longrightarrow 00:19:24.445$  That obesity is associated with

NOTE Confidence: 0.777333919090909

 $00:19:24.445 \longrightarrow 00:19:26.521$  significant right ventricular changes

NOTE Confidence: 0.777333919090909

 $00{:}19{:}26.521 \dashrightarrow 00{:}19{:}29.028$  and pulmonary vascular changes.

NOTE Confidence: 0.777333919090909

 $00:19:29.030 \longrightarrow 00:19:30.812$  Now going through the rest of

NOTE Confidence: 0.777333919090909

 $00:19:30.812 \longrightarrow 00:19:31.703$  those risk factors.

NOTE Confidence: 0.777333919090909

 $00{:}19{:}31.710 \dashrightarrow 00{:}19{:}34.266$  The metabolic syndrome, like I said,

NOTE Confidence: 0.777333919090909

 $00:19:34.270 \longrightarrow 00:19:39.118$  is importantly it's a driver of.

NOTE Confidence: 0.777333919090909

00:19:39.120 --> 00:19:40.790 Both the development of pulmonary

NOTE Confidence: 0.777333919090909

00:19:40.790 --> 00:19:42.460 hypertension due to left side

NOTE Confidence: 0.777333919090909

00:19:42.518 --> 00:19:43.418 of heart disease,

NOTE Confidence: 0.777333919090909

 $00:19:43.420 \longrightarrow 00:19:45.844$  but there's some nascent data that

NOTE Confidence: 0.777333919090909

 $00:19:45.844 \longrightarrow 00:19:48.621$  would suggest that it also exacerbates

 $00:19:48.621 \longrightarrow 00:19:50.785$  and worsens that Physiology.

NOTE Confidence: 0.777333919090909

 $00:19:50.790 \longrightarrow 00:19:52.920$  We know that OS is associated

NOTE Confidence: 0.777333919090909

 $00:19:52.920 \longrightarrow 00:19:53.985$  with metabolic syndrome.

NOTE Confidence: 0.777333919090909

 $00:19:53.990 \longrightarrow 00:19:56.334$  And now I'm going to sort of like

NOTE Confidence: 0.777333919090909

 $00:19:56.334 \longrightarrow 00:19:58.161$  toggle between both the risk factor

NOTE Confidence: 0.777333919090909

 $00:19:58.161 \longrightarrow 00:20:00.251$  and then sort of the effect of

NOTE Confidence: 0.777333919090909

 $00:20:00.251 \longrightarrow 00:20:02.355$  CPAP on the risk factor and in this

NOTE Confidence: 0.777333919090909

 $00:20:02.355 \longrightarrow 00:20:05.020$  case the treat OSA Ms.

NOTE Confidence: 0.777333919090909 00:20:05.020 --> 00:20:05.620 study.

NOTE Confidence: 0.777333919090909

 $00:20:05.620 \longrightarrow 00:20:06.540$  This is pretty recent,

NOTE Confidence: 0.777333919090909

 $00{:}20{:}06.540 \dashrightarrow 00{:}20{:}08.582$  I think came out at the end of 2022,

NOTE Confidence: 0.777333919090909

 $00:20:08.582 \longrightarrow 00:20:10.394$  looked at the effect of CPAP

NOTE Confidence: 0.777333919090909

 $00:20:10.394 \longrightarrow 00:20:11.900$  on the metabolic syndrome.

NOTE Confidence: 0.777333919090909

00:20:11.900 --> 00:20:13.284 And these aren't necessarily

NOTE Confidence: 0.777333919090909

00:20:13.284 --> 00:20:13.976 dramatic changes,

NOTE Confidence: 0.777333919090909

 $00:20:13.980 \longrightarrow 00:20:15.877$  but you can see that CPAP does

00:20:15.877 --> 00:20:17.888 seem to have a significant effect

NOTE Confidence: 0.777333919090909

 $00:20:17.888 \longrightarrow 00:20:19.778$  on a variety of parameters.

NOTE Confidence: 0.777333919090909

 $00:20:19.780 \longrightarrow 00:20:23.752$  In the metabolic syndrome where you

NOTE Confidence: 0.777333919090909

 $00{:}20{:}23.752 \dashrightarrow 00{:}20{:}27.570$  had frank reversal of of some of these

NOTE Confidence: 0.777333919090909

 $00:20:27.570 \longrightarrow 00:20:30.404$  findings and very little development

NOTE Confidence: 0.777333919090909

 $00:20:30.404 \longrightarrow 00:20:33.090$  of of new findings over the course

NOTE Confidence: 0.777333919090909

 $00:20:33.090 \longrightarrow 00:20:35.120$  of six months of CPAP therapy.

NOTE Confidence: 0.777333919090909

 $00{:}20{:}35.120 \dashrightarrow 00{:}20{:}38.478$  This is 100 subjects with moderate

NOTE Confidence: 0.777333919090909

 $00:20:38.478 \longrightarrow 00:20:39.792$  to severe OSA.

NOTE Confidence: 0.777333919090909

 $00:20:39.792 \longrightarrow 00:20:45.170$  So HI's are all 15 and above and.

NOTE Confidence: 0.777333919090909 00:20:45.170 --> 00:20:46.439 It was, um, NOTE Confidence: 0.777333919090909

 $00:20:46.439 \longrightarrow 00:20:46.862$  placebo-controlled.

NOTE Confidence: 0.777333919090909

00:20:46.862 --> 00:20:49.802 So there's both CPAP and then I

NOTE Confidence: 0.777333919090909

 $00:20:49.802 \longrightarrow 00:20:51.794$  think they used the nasal dilator

NOTE Confidence: 0.777333919090909

 $00:20:51.794 \longrightarrow 00:20:53.700$  strip as the other group.

00:20:56.350 --> 00:20:56.990 Diastolic dysfunction,

NOTE Confidence: 0.667146455

00:20:56.990 --> 00:20:58.270 like I said earlier,

NOTE Confidence: 0.667146455

00:20:58.270 --> 00:21:00.806 is probably a big driver of pH Physiology.

NOTE Confidence: 0.667146455

 $00:21:00.810 \longrightarrow 00:21:03.855$  We know that you can develop diastolic

NOTE Confidence: 0.667146455

 $00:21:03.855 \longrightarrow 00:21:07.100$  dysfunction in OSA even in the

NOTE Confidence: 0.667146455

 $00:21:07.100 \longrightarrow 00:21:09.348$  absence of diurnal hypertension.

NOTE Confidence: 0.667146455

 $00{:}21{:}09.350 \dashrightarrow 00{:}21{:}11.974$  This is a I'm showing you data here

NOTE Confidence: 0.667146455

00:21:11.974 --> 00:21:14.248 looking at 61 subjects with OSA

NOTE Confidence: 0.667146455

 $00{:}21{:}14.248 \dashrightarrow 00{:}21{:}16.558$  who are being evaluated for ethyl

NOTE Confidence: 0.667146455

00:21:16.638 --> 00:21:18.673 pletal fragile plasty and there

NOTE Confidence: 0.667146455

 $00{:}21{:}18.673 \dashrightarrow 00{:}21{:}21.734$  were compared to an equal number of

NOTE Confidence: 0.667146455

 $00:21:21.734 \longrightarrow 00:21:24.755$  normal tensive controls and based on

NOTE Confidence: 0.667146455

 $00:21:24.755 \longrightarrow 00:21:26.735$  echocardiographic findings of diastolic.

NOTE Confidence: 0.667146455

00:21:26.740 --> 00:21:30.300 Dysfunction um, even those with

NOTE Confidence: 0.667146455

00:21:30.300 --> 00:21:33.860 OSA with normal blood pressure,

NOTE Confidence: 0.667146455

 $00:21:33.860 \longrightarrow 00:21:35.328$  they had significant increases

 $00:21:35.328 \longrightarrow 00:21:37.163$  in left ventricular mass index

NOTE Confidence: 0.667146455

 $00{:}21{:}37.163 \dashrightarrow 00{:}21{:}39.200$  to suggest The Isaacs function.

NOTE Confidence: 0.667146455

00:21:39.200 --> 00:21:40.820 We know that CPAP therapy,

NOTE Confidence: 0.667146455

00:21:40.820 --> 00:21:43.605 particularly in subjects that have

NOTE Confidence: 0.667146455

 $00{:}21{:}43.605 \longrightarrow 00{:}21{:}45.833$  clinically diagnosed heart failure,

NOTE Confidence: 0.667146455

00:21:45.840 --> 00:21:48.768 reduces LV after load and has a positive

NOTE Confidence: 0.667146455

00:21:48.768 --> 00:21:52.000 effect on parameters of diastolic function,

NOTE Confidence: 0.667146455

00:21:52.000 --> 00:21:53.953 both using echocardiographic

NOTE Confidence: 0.667146455

00:21:53.953 --> 00:21:56.557 data and then separately.

NOTE Confidence: 0.667146455

00:21:56.560 --> 00:21:58.456 Based on Cmdr Data as well.

NOTE Confidence: 0.724166031

00:22:00.480 --> 00:22:03.816 The Discology is sort of linked

NOTE Confidence: 0.724166031

 $00:22:03.816 \longrightarrow 00:22:06.040$  to another pertinent finding.

NOTE Confidence: 0.724166031

 $00{:}22{:}06.040 \dashrightarrow 00{:}22{:}08.648$  If you guys will call from that first

NOTE Confidence: 0.724166031

 $00:22:08.648 \longrightarrow 00:22:11.510$  table that deals with left atrial

NOTE Confidence: 0.724166031

 $00:22:11.510 \longrightarrow 00:22:15.540$  structure and then in a sense function

 $00:22:15.540 \longrightarrow 00:22:17.960$  with progressive diastolic dysfunction,

NOTE Confidence: 0.724166031

 $00:22:17.960 \longrightarrow 00:22:20.985$  left atrial size will increase

NOTE Confidence: 0.724166031

 $00:22:20.985 \longrightarrow 00:22:23.890$  and that will predispose you to

NOTE Confidence: 0.724166031

 $00:22:23.890 \longrightarrow 00:22:26.230$  atrial fibrillation as well.

NOTE Confidence: 0.724166031

 $00:22:26.230 \longrightarrow 00:22:30.460$  Cpap therapy does definitely have an impact.

NOTE Confidence: 0.724166031

00:22:30.460 --> 00:22:31.984 On left atrial functions,

NOTE Confidence: 0.724166031

00:22:31.984 --> 00:22:34.270 so sort of left atrial contraction,

NOTE Confidence: 0.724166031

00:22:34.270 --> 00:22:36.304 um, it's less likely to actually

NOTE Confidence: 0.724166031

 $00:22:36.304 \longrightarrow 00:22:38.884$  cause a reduction in LA volume based

NOTE Confidence: 0.724166031

 $00:22:38.884 \longrightarrow 00:22:40.606$  on echocardiographic parameters.

NOTE Confidence: 0.724166031

 $00:22:40.606 \longrightarrow 00:22:45.448$  And I'm not sure if there's any data on Mr.

NOTE Confidence: 0.724166031

 $00:22:45.450 \longrightarrow 00:22:48.036$  The link here is towards a

NOTE Confidence: 0.724166031

 $00:22:48.036 \longrightarrow 00:22:48.898$  atrial fibrillation.

NOTE Confidence: 0.754333314444444

 $00:22:51.750 \longrightarrow 00:22:56.902$  And we know that OSA is a predictor

NOTE Confidence: 0.754333314444444

 $00:22:56.902 \longrightarrow 00:23:00.030$  of incident prevalent and worsening

NOTE Confidence: 0.754333314444444

 $00{:}23{:}00.030 \dashrightarrow 00{:}23{:}01.890$  severity mitral fibrillation.

 $00:23:01.890 \longrightarrow 00:23:04.368$  We know that untreated sleep apnea

NOTE Confidence: 0.754333314444444

 $00:23:04.368 \longrightarrow 00:23:06.659$  reduces the efficacy of rhythm

NOTE Confidence: 0.754333314444444

00:23:06.659 --> 00:23:08.907 control interventions for the

NOTE Confidence: 0.754333314444444

 $00:23:08.907 \longrightarrow 00:23:11.155$  management of atrial fibrillation.

NOTE Confidence: 0.754333314444444

00:23:11.160 --> 00:23:14.388 More recently, the sleep AF trial

NOTE Confidence: 0.754333314444444

 $00:23:14.390 \longrightarrow 00:23:16.238$  that was published also I think at

NOTE Confidence: 0.754333314444444

 $00:23:16.238 \longrightarrow 00:23:18.850$  end of 2022 did demonstrate that

NOTE Confidence: 0.754333314444444

 $00{:}23{:}18.850 \longrightarrow 00{:}23{:}21.865$  CPAP therapy is associated with the

NOTE Confidence: 0.754333314444444

00:23:21.865 --> 00:23:24.355 reversal of HR modeling that happens

NOTE Confidence: 0.754333314444444

 $00{:}23{:}24.355 \dashrightarrow 00{:}23{:}26.743$  along with the atrial fibrillation

NOTE Confidence: 0.754333314444444

 $00{:}23{:}26.743 \mathrel{--}{>} 00{:}23{:}29.388$  based on a trial mapping data.

NOTE Confidence: 0.754333314444444

 $00{:}23{:}29.390 \dashrightarrow 00{:}23{:}32.470$  I've read this paper three times and I

NOTE Confidence: 0.754333314444444

 $00{:}23{:}32.470 \dashrightarrow 00{:}23{:}35.287$  still really struggle with the methods,

NOTE Confidence: 0.754333314444444

 $00:23:35.290 \longrightarrow 00:23:37.270$  primarily because of sort of the,

NOTE Confidence: 0.754333314444444

 $00:23:37.270 \longrightarrow 00:23:38.570$  the technique of atrial mapping.

00:23:38.570 --> 00:23:41.492 There's a lot of vocabulary that you know.

NOTE Confidence: 0.754333314444444

 $00:23:41.492 \longrightarrow 00:23:44.999$  Is not familiar to a non electrophysiologist.

NOTE Confidence: 0.754333314444444

 $00:23:45.000 \longrightarrow 00:23:48.856$  But the data looked to be fairly convincing.

NOTE Confidence: 0.754333314444444

00:23:48.860 --> 00:23:52.416 It would also appear that CPAP therapy

NOTE Confidence: 0.754333314444444

 $00:23:52.420 \longrightarrow 00:23:54.345$  allows for improved efficacy over

NOTE Confidence: 0.754333314444444

 $00:23:54.345 \longrightarrow 00:23:56.270$  the control interventions as well.

NOTE Confidence: 0.861929275

 $00:23:59.440 \longrightarrow 00:24:06.034$  So what's the impact of OSA on pH?

NOTE Confidence: 0.861929275

00:24:06.034 --> 00:24:10.410 Well, the. Same things that impacted

NOTE Confidence: 0.861929275

 $00:24:10.410 \longrightarrow 00:24:13.620$  our ability to define the prevalence

NOTE Confidence: 0.861929275

00:24:13.708 --> 00:24:16.201 of pH and OSA sort of impact,

NOTE Confidence: 0.861929275

 $00:24:16.201 \longrightarrow 00:24:18.966$  our ability to define how much of an

NOTE Confidence: 0.861929275

00:24:18.966 --> 00:24:21.042 impact CPAP is happening on, on pH.

NOTE Confidence: 0.861929275

 $00{:}24{:}21.042 \dashrightarrow 00{:}24{:}24.199$  And so the modalities that were used

NOTE Confidence: 0.861929275

 $00:24:24.199 \longrightarrow 00:24:26.970$  to determine how the pH was being

NOTE Confidence: 0.861929275

00:24:26.970 --> 00:24:28.310 surveilled was a catheter based,

NOTE Confidence: 0.861929275

 $00:24:28.310 \longrightarrow 00:24:30.085$  was a catheter based both

 $00:24:30.085 \longrightarrow 00:24:31.505$  pre and post intervention,

NOTE Confidence: 0.861929275

 $00{:}24{:}31.510 \dashrightarrow 00{:}24{:}33.298$  was it echocardiogram based or was

NOTE Confidence: 0.861929275

 $00:24:33.298 \longrightarrow 00:24:35.511$  it based on different cut offs of

NOTE Confidence: 0.861929275

00:24:35.511 --> 00:24:37.111 pH systolic pressures or inferred

NOTE Confidence: 0.861929275

00:24:37.111 --> 00:24:38.816 mean pressures so on and so forth.

NOTE Confidence: 0.861929275

 $00:24:38.820 \longrightarrow 00:24:40.131$  Within those limitations,

NOTE Confidence: 0.861929275

00:24:40.131 --> 00:24:42.753 it would appear that CPAP therapy

NOTE Confidence: 0.861929275

 $00:24:42.760 \longrightarrow 00:24:45.315$  looking at completely on phenotype

NOTE Confidence: 0.861929275

00:24:45.315 --> 00:24:48.824 cohorts can have some effect on the

NOTE Confidence: 0.861929275

 $00:24:48.824 \longrightarrow 00:24:51.440$  calculator reduction in the mean PAP

NOTE Confidence: 0.861929275

00:24:51.440 --> 00:24:54.768 from nothing to a fairly mild to modest

NOTE Confidence: 0.861929275

 $00:24:54.768 \longrightarrow 00:24:57.438$  reduction of 6 millimeters mercury.

NOTE Confidence: 0.861929275

 $00{:}24{:}57.440 \dashrightarrow 00{:}25{:}00.212$  Based on what we know about the risk that's

NOTE Confidence: 0.861929275

 $00:25:00.212 \longrightarrow 00:25:02.378$  conferred by elevations and key pressure,

NOTE Confidence: 0.861929275 00:25:02.380 --> 00:25:03.482 that's.

00:25:03.482 --> 00:25:09.210 Probably not insignificant, I I will say.

NOTE Confidence: 0.861929275

 $00:25:09.210 \longrightarrow 00:25:10.925$  Probably a liberty to speak about this

NOTE Confidence: 0.861929275

00:25:10.925 --> 00:25:12.429 because hopefully will be published soon,

NOTE Confidence: 0.861929275

00:25:12.430 --> 00:25:16.110 but but you know we will be showing

NOTE Confidence: 0.861929275

 $00:25:16.110 \longrightarrow 00:25:19.780$  momentarily that changes in the tricuspid

NOTE Confidence: 0.861929275

 $00{:}25{:}19.780 \dashrightarrow 00{:}25{:}22.841$  regurgitation velocity jet which is used

NOTE Confidence: 0.861929275

 $00:25:22.841 \longrightarrow 00:25:25.480$  to calculate the estimated PA pressure on

NOTE Confidence: 0.861929275

 $00:25:25.550 \longrightarrow 00:25:28.136$  echocardiogram are clinically significant.

NOTE Confidence: 0.861929275

 $00{:}25{:}28.136 \dashrightarrow 00{:}25{:}31.216$  So people that whose charge of

NOTE Confidence: 0.861929275

00:25:31.216 --> 00:25:34.387 velocity goes up even my small amounts

NOTE Confidence: 0.861929275

 $00{:}25{:}34.387 \dashrightarrow 00{:}25{:}37.289$  are at increased risk risk for.

NOTE Confidence: 0.861929275

 $00:25:37.290 \longrightarrow 00:25:37.777$  Death.

NOTE Confidence: 0.861929275

 $00:25:37.777 \longrightarrow 00:25:41.673$  And we know that those whose TCRF velocity

NOTE Confidence: 0.861929275

 $00:25:41.673 \longrightarrow 00:25:44.718$  decreases over time for whatever reason.

NOTE Confidence: 0.861929275

 $00:25:44.720 \longrightarrow 00:25:46.040$  Do have a reduction in,

NOTE Confidence: 0.861929275

 $00:25:46.040 \longrightarrow 00:25:46.892$  in, in,

 $00{:}25{:}46.892 {\:{\circ}{\circ}{\circ}}> 00{:}25{:}49.000$  in their mortality risk again

NOTE Confidence: 0.861929275

 $00:25:49.000 \longrightarrow 00:25:51.000$  in an all Comer population.

NOTE Confidence: 0.861929275

 $00:25:51.000 \longrightarrow 00:25:54.073$  And so I think that the the

NOTE Confidence: 0.861929275

00:25:54.073 --> 00:25:56.760 general take away from this is.

NOTE Confidence: 0.861929275

 $00:25:56.760 \longrightarrow 00:25:59.640$  The most legible way to try and define a

NOTE Confidence: 0.861929275

 $00:25:59.640 \longrightarrow 00:26:02.694$  OSA pH subject is using the paradigm that

NOTE Confidence: 0.861929275

00:26:02.694 --> 00:26:04.827 we're used for pulmonary hypertension

NOTE Confidence: 0.861929275

 $00:26:04.827 \longrightarrow 00:26:08.054$  due to left side of heart disease.

NOTE Confidence: 0.861929275

00:26:08.060 --> 00:26:10.286 And my approach in clinic and where

NOTE Confidence: 0.861929275

 $00:26:10.286 \longrightarrow 00:26:12.278$  you know occurs with the group to

NOTE Confidence: 0.861929275

00:26:12.278 --> 00:26:14.452 do is to sort of look through all

NOTE Confidence: 0.861929275

 $00:26:14.452 \longrightarrow 00:26:16.396$  of those risk factors that are

NOTE Confidence: 0.861929275

 $00{:}26{:}16.396 \dashrightarrow 00{:}26{:}18.430$  shared in common between pH,

NOTE Confidence: 0.861929275

00:26:18.430 --> 00:26:21.650 LHD and OSA and sort of just

NOTE Confidence: 0.861929275

 $00:26:21.748 \longrightarrow 00:26:25.400$  have endpoints for all of them.

00:26:25.400 --> 00:26:28.776 Cpap and weight loss are the big inventions,

NOTE Confidence: 0.861929275

00:26:28.780 --> 00:26:29.189 obviously,

NOTE Confidence: 0.861929275

 $00:26:29.189 \longrightarrow 00:26:31.234$  because they'll have an outsize

NOTE Confidence: 0.861929275

00:26:31.234 --> 00:26:33.860 effect on all those subcategories,

NOTE Confidence: 0.861929275

 $00:26:33.860 \longrightarrow 00:26:36.848$  be it metabolic syndrome.

NOTE Confidence: 0.861929275

 $00:26:36.850 \longrightarrow 00:26:37.613$  Umm.

NOTE Confidence: 0.861929275

 $00:26:37.613 \longrightarrow 00:26:41.428$  And it's a associated manifestations

NOTE Confidence: 0.861929275

 $00:26:41.430 \longrightarrow 00:26:45.294$  but also with a noticeable impact on

NOTE Confidence: 0.861929275

 $00{:}26{:}45.294 \to 00{:}26{:}48.351$  the frequency of the fibrillation

NOTE Confidence: 0.861929275

 $00:26:48.351 \longrightarrow 00:26:53.130$  which you know we seem to think in

NOTE Confidence: 0.861929275

00:26:53.130 --> 00:26:56.392 our practice has one of the higher

NOTE Confidence: 0.861929275

 $00:26:56.392 \longrightarrow 00:26:58.257$  correlations with the developing with

NOTE Confidence: 0.861929275

 $00{:}26{:}58.257 \dashrightarrow 00{:}27{:}00.099$  having pH left side heart disease.

NOTE Confidence: 0.861929275

 $00:27:00.100 \longrightarrow 00:27:02.548$  So now I'm going to segue to the

NOTE Confidence: 0.861929275

00:27:02.548 --> 00:27:03.509 obesity Hyperventilation syndrome

NOTE Confidence: 0.861929275

 $00:27:03.509 \longrightarrow 00:27:05.255$  because this is a little bit.

 $00:27:07.430 \longrightarrow 00:27:08.798$  Some of the same,

NOTE Confidence: 0.82619464777778

 $00{:}27{:}08.798 \dashrightarrow 00{:}27{:}10.508$  but some things are different.

NOTE Confidence: 0.82619464777778

 $00:27:10.510 \longrightarrow 00:27:11.626$  This is not the audience to

NOTE Confidence: 0.82619464777778

 $00:27:11.626 \longrightarrow 00:27:12.730$  sort of redefine the disease,

NOTE Confidence: 0.826194647777778

 $00:27:12.730 \longrightarrow 00:27:16.027$  but for those that are not providers,

NOTE Confidence: 0.826194647777778

00:27:16.030 --> 00:27:18.298 you know, obesity is defined as a

NOTE Confidence: 0.826194647777778

 $00:27:18.298 \longrightarrow 00:27:21.061$  BMI of greater than or 30 or more

NOTE Confidence: 0.826194647777778

 $00{:}27{:}21.061 \dashrightarrow 00{:}27{:}23.146$  kilogram meter squared with the

NOTE Confidence: 0.82619464777778

 $00{:}27{:}23.146 \dashrightarrow 00{:}27{:}24.943$  presence of daytime hypercapnia

NOTE Confidence: 0.82619464777778

 $00{:}27{:}24.943 \dashrightarrow 00{:}27{:}28.463$  defined as a PCO two of greater than,

NOTE Confidence: 0.826194647777778

 $00:27:28.470 \longrightarrow 00:27:31.530$  equal to 49 millimeters mercury,

NOTE Confidence: 0.826194647777778

 $00:27:31.530 \longrightarrow 00:27:33.086$  without other causes of

NOTE Confidence: 0.826194647777778

 $00{:}27{:}33.086 \dashrightarrow 00{:}27{:}35.031$  hypoventilation and with the known

NOTE Confidence: 0.82619464777778

 $00{:}27{:}35.031 \dashrightarrow 00{:}27{:}36.509$  diagnosis of sleep disorder.

NOTE Confidence: 0.826194647777778 00:27:36.510 --> 00:27:38.640 Anything. NOTE Confidence: 0.826194647777778  $00:27:38.640 \longrightarrow 00:27:40.528$  It's oftentimes diagnosed during

NOTE Confidence: 0.82619464777778

00:27:40.528 --> 00:27:42.888 an acute on chronic episode

NOTE Confidence: 0.82619464777778

00:27:42.888 --> 00:27:45.458 of Hypercapnic grocery failure

NOTE Confidence: 0.826194647777778

 $00:27:45.460 \longrightarrow 00:27:48.124$  and with the presence of the

NOTE Confidence: 0.826194647777778

 $00:27:48.124 \longrightarrow 00:27:49.900$  classic constellation of symptoms

NOTE Confidence: 0.826194647777778

 $00:27:49.979 \longrightarrow 00:27:53.216$  and findings of sleep apnea.

NOTE Confidence: 0.82619464777778 00:27:53.216 --> 00:27:54.800 And then.

NOTE Confidence: 0.770920345

 $00:27:57.190 \longrightarrow 00:28:00.879$  In the case, I'll show this is

NOTE Confidence: 0.770920345

 $00{:}28{:}00.879 \dashrightarrow 00{:}28{:}03.360$  an inpatient diagnosis as well.

NOTE Confidence: 0.770920345

 $00:28:03.360 \longrightarrow 00:28:05.280$  Ohh, just diagnosis are costly.

NOTE Confidence: 0.770920345

 $00:28:05.280 \longrightarrow 00:28:06.410$  They're delayed,

NOTE Confidence: 0.770920345

 $00:28:06.410 \longrightarrow 00:28:09.800$  they're oftentimes made fairly late and.

NOTE Confidence: 0.770920345

00:28:09.800 --> 00:28:12.240 Probably in the, you know,

NOTE Confidence: 0.770920345

 $00{:}28{:}12.240 \dashrightarrow 00{:}28{:}15.208$  in the same age structure as OSA,

NOTE Confidence: 0.770920345

 $00:28:15.210 \longrightarrow 00:28:17.436$  but during that period of time

NOTE Confidence: 0.770920345

 $00:28:17.440 \longrightarrow 00:28:20.737$  patients with OHS will use a lot

 $00:28:20.737 \longrightarrow 00:28:23.159$  of healthcare resources compared to

NOTE Confidence: 0.770920345

 $00{:}28{:}23.160 \to 00{:}28{:}25.730$  comparably obese you catnic subjects.

NOTE Confidence: 0.769427687272727

00:28:27.960 --> 00:28:30.576 The Physiology would be city sort

NOTE Confidence: 0.769427687272727

 $00:28:30.576 \longrightarrow 00:28:32.780$  of like well delineated here.

NOTE Confidence: 0.769427687272727

 $00:28:32.780 \longrightarrow 00:28:34.120$  The impacts on you know,

NOTE Confidence: 0.769427687272727

00:28:34.120 --> 00:28:37.416 pulmonary mechanics on airway

NOTE Confidence: 0.769427687272727

 $00:28:37.416 \longrightarrow 00:28:39.720$  diameter are fairly obvious.

NOTE Confidence: 0.948041538

 $00:28:41.950 \longrightarrow 00:28:44.684$  The big difference is that in

NOTE Confidence: 0.948041538

 $00:28:44.684 \longrightarrow 00:28:47.162$  addition to all the sort of burns

NOTE Confidence: 0.948041538

 $00:28:47.162 \longrightarrow 00:28:49.559$  that we talked about before,

NOTE Confidence: 0.948041538

 $00:28:49.560 \longrightarrow 00:28:51.594$  the metabolic syndrome,

NOTE Confidence: 0.948041538

 $00:28:51.594 \longrightarrow 00:28:54.006$  diastolic dysfunction, atrial fibrillation,

NOTE Confidence: 0.948041538

 $00{:}28{:}54.006 \dashrightarrow 00{:}28{:}55.062$  echocardiographic findings,

NOTE Confidence: 0.948041538

 $00:28:55.062 \longrightarrow 00:28:59.130$  there is the added burden of hypercapnia.

NOTE Confidence: 0.948041538

 $00:28:59.130 \longrightarrow 00:29:00.670$  We often times talk about the

00:29:00.670 --> 00:29:01.902 impact of hypercapnia on,

NOTE Confidence: 0.948041538

 $00{:}29{:}01.910 \dashrightarrow 00{:}29{:}03.790$  on on the pulmonary vasculature.

NOTE Confidence: 0.948041538

 $00:29:03.790 \longrightarrow 00:29:06.760$  The the data on it is is good,

NOTE Confidence: 0.948041538

 $00:29:06.760 \longrightarrow 00:29:08.260$  but there's less human based data

NOTE Confidence: 0.948041538

 $00:29:08.260 \longrightarrow 00:29:10.145$  that's high quality than you would like.

NOTE Confidence: 0.948041538

 $00:29:10.150 \longrightarrow 00:29:11.905$  So a lot of it comes from animal based.

NOTE Confidence: 0.948041538

00:29:11.910 --> 00:29:13.392 Um studies,

NOTE Confidence: 0.948041538

 $00:29:13.392 \longrightarrow 00:29:17.838$  but in the setting of hypercapnia,

NOTE Confidence: 0.948041538

 $00{:}29{:}17.840 \to 00{:}29{:}21.578$  often times with concurrent hypoxia as well,

NOTE Confidence: 0.948041538

 $00:29:21.580 \longrightarrow 00:29:24.046$  the impact of hypercapnia on right

NOTE Confidence: 0.948041538

 $00{:}29{:}24.046 \to 00{:}29{:}26.199$  ventricular size relative to left

NOTE Confidence: 0.948041538

 $00{:}29{:}26.199 \dashrightarrow 00{:}29{:}28.821$  ventricular size and then also right

NOTE Confidence: 0.948041538

 $00:29:28.821 \longrightarrow 00:29:31.282$  ventricular size relative to the body

NOTE Confidence: 0.948041538

 $00:29:31.282 \longrightarrow 00:29:35.860$  weight in general is significant and.

NOTE Confidence: 0.948041538

 $00:29:35.860 \longrightarrow 00:29:39.094$  We know is a driver of increased

NOTE Confidence: 0.948041538

00:29:39.094 --> 00:29:41.117 pulmonary vascular tone and

00:29:41.117 --> 00:29:43.297 right for circular afterload.

NOTE Confidence: 0.948041538

00:29:43.300 --> 00:29:45.100 Based on cartographic data,

NOTE Confidence: 0.948041538

 $00:29:45.100 \longrightarrow 00:29:47.350$  we think the prevalence of

NOTE Confidence: 0.948041538

 $00:29:47.350 \longrightarrow 00:29:49.617$  pH and OHS is almost 70%.

NOTE Confidence: 0.948041538

 $00:29:49.620 \longrightarrow 00:29:52.602$  At the higher end and on

NOTE Confidence: 0.948041538

00:29:52.602 --> 00:29:54.093 prospective observational data,

NOTE Confidence: 0.948041538

00:29:54.100 --> 00:29:59.180 we know that patients with OHS are highly

NOTE Confidence: 0.948041538

00:29:59.180 --> 00:30:01.180 at risk for diastolic dysfunction,

NOTE Confidence: 0.948041538

 $00:30:01.180 \longrightarrow 00:30:03.280$  even the absence of their OSA

NOTE Confidence: 0.948041538

 $00:30:03.280 \longrightarrow 00:30:04.330$  being particularly severe.

NOTE Confidence: 0.7711788412

 $00:30:08.570 \dashrightarrow 00:30:10.858$  This is a study based on 18 subjects

NOTE Confidence: 0.7711788412

 $00:30:10.858 \dashrightarrow 00:30:13.856$  that had OHSU without any risk factors

NOTE Confidence: 0.7711788412

00:30:13.856 --> 00:30:15.740 for precapillary pulmonary arteriopathy

NOTE Confidence: 0.7711788412

 $00:30:15.740 \dashrightarrow 00:30:18.000$  that we would associate with pH.

NOTE Confidence: 0.7711788412

00:30:18.000 --> 00:30:21.126 So no HIV, no portal pulmonary,

 $00:30:21.130 \longrightarrow 00:30:23.926$  no portal hypertension.

NOTE Confidence: 0.7711788412

00:30:23.926 --> 00:30:27.470 Um, no anorexigenic use and so on.

NOTE Confidence: 0.7711788412

 $00:30:27.470 \longrightarrow 00:30:31.763$  And and you can see that there's a decent

NOTE Confidence: 0.7711788412

 $00:30:31.763 \longrightarrow 00:30:35.114$  correlation between BMI and me and keep

NOTE Confidence: 0.7711788412

 $00:30:35.114 \longrightarrow 00:30:39.380$  pressure on right heart catheterization.

NOTE Confidence: 0.7711788412

00:30:39.380 --> 00:30:43.548 And then also on the degree of hypercapnia,

NOTE Confidence: 0.7711788412

 $00:30:43.550 \longrightarrow 00:30:46.440$  in this case nocturnal hypercapnia

NOTE Confidence: 0.7711788412

 $00:30:46.440 \longrightarrow 00:30:50.219$  and the mean PA pressure as well.

NOTE Confidence: 0.7711788412

 $00:30:50.220 \longrightarrow 00:30:52.890$  In these subjects.

NOTE Confidence: 0.7711788412

00:30:52.890 --> 00:30:56.754 They underwent 3 months of titrated Bipap

NOTE Confidence: 0.7711788412

 $00{:}30{:}56.754 \dashrightarrow 00{:}30{:}59.840$  the rapy with a follow-up right heart

NOTE Confidence: 0.7711788412

 $00:30:59.840 \longrightarrow 00:31:02.735$  catheterization and they were able to

NOTE Confidence: 0.7711788412

 $00:31:02.735 \longrightarrow 00:31:05.120$  demonstrate a significant reduction in

NOTE Confidence: 0.7711788412

00:31:05.207 --> 00:31:08.790 the mean PA pressure from a mean of 49 to 31,

NOTE Confidence: 0.7711788412

00:31:08.790 --> 00:31:10.854 which is fairly dramatic,

NOTE Confidence: 0.7711788412

 $00:31:10.854 \longrightarrow 00:31:13.434$  a significant reduction in the

 $00:31:13.434 \longrightarrow 00:31:15.766$  PVR from 491 dines to 292.

NOTE Confidence: 0.7711788412

 $00{:}31{:}15.766 \dashrightarrow 00{:}31{:}19.330$  And so this is roughly, you know.

NOTE Confidence: 0.7711788412

 $00:31:19.330 \longrightarrow 00:31:21.010$  Between 5:00 and six wood units,

NOTE Confidence: 0.7711788412

 $00:31:21.010 \longrightarrow 00:31:22.348$  all the way down to between

NOTE Confidence: 0.7711788412

 $00:31:22.348 \longrightarrow 00:31:23.580$  three and four good units,

NOTE Confidence: 0.7711788412

 $00:31:23.580 \longrightarrow 00:31:26.808$  so fairly significant.

NOTE Confidence: 0.7711788412

00:31:26.810 --> 00:31:29.894 And not necessarily a particularly huge

NOTE Confidence: 0.7711788412

 $00:31:29.894 \longrightarrow 00:31:32.336$  difference in in the cardiac index.

NOTE Confidence: 0.71856858888889

 $00{:}31{:}36.600 \dashrightarrow 00{:}31{:}38.650$  But that's still a significant

NOTE Confidence: 0.71856858888889

 $00:31:38.650 \longrightarrow 00:31:41.260$  reduction in the PR. Um, these?

NOTE Confidence: 0.71856858888889

 $00:31:41.260 \longrightarrow 00:31:43.200$  This intervention was also

NOTE Confidence: 0.71856858888889

 $00:31:43.200 \longrightarrow 00:31:44.655$  associated with significant

NOTE Confidence: 0.71856858888889

 $00{:}31{:}44.655 \dashrightarrow 00{:}31{:}46.509$  improvements in functional status,

NOTE Confidence: 0.71856858888889

 $00:31:46.510 \longrightarrow 00:31:49.780$  with improvement 6 minute walk distance.

NOTE Confidence: 0.71856858888889

 $00:31:49.780 \longrightarrow 00:31:51.485$  And functionality based on CPET

00:31:51.485 --> 00:31:54.346 study and then lastly on a you know

NOTE Confidence: 0.71856858888889

 $00:31:54.346 \longrightarrow 00:31:56.171$  commonly obtained parameter for the

NOTE Confidence: 0.71856858888889

00:31:56.171 --> 00:31:57.895 management of heart failure which

NOTE Confidence: 0.71856858888889

 $00:31:57.895 \longrightarrow 00:32:00.065$  is your anti probie NP as well.

NOTE Confidence: 0.71856858888889

 $00:32:00.070 \longrightarrow 00:32:04.284$  So dramatic reduction from 2500 down to

NOTE Confidence: 0.71856858888889

 $00:32:04.290 \longrightarrow 00:32:07.058$  377 in this case is there was probably

NOTE Confidence: 0.71856858888889

 $00:32:07.058 \longrightarrow 00:32:09.280$  diuresis that was happening as well.

NOTE Confidence: 0.870205343333333

 $00:32:11.500 \longrightarrow 00:32:13.768$  Which is a bit of a.

NOTE Confidence: 0.870205343333333

00:32:13.770 --> 00:32:18.898 Confounder, but I think the sort of.

NOTE Confidence: 0.870205343333333

 $00:32:18.900 \longrightarrow 00:32:22.050$  Very strong data for what Bipap can

NOTE Confidence: 0.870205343333333

 $00:32:22.050 \dashrightarrow 00:32:25.900$  can do in this patient population.

NOTE Confidence: 0.870205343333333

 $00:32:25.900 \longrightarrow 00:32:28.504$  More recently, I'm sure you guys are

NOTE Confidence: 0.870205343333333

 $00:32:28.504 \longrightarrow 00:32:30.859$  familiar with the Pickwick project.

NOTE Confidence: 0.870205343333333

 $00:32:30.860 \longrightarrow 00:32:32.869$  So the Pickwick study was a multi

NOTE Confidence: 0.870205343333333

 $00:32:32.869 \longrightarrow 00:32:34.080$  center randomized control trial.

NOTE Confidence: 0.870205343333333

 $00:32:34.080 \dashrightarrow 00:32:37.699$  They looked at just over 220 subjects.

 $00:32:37.700 \longrightarrow 00:32:39.506$  It was done in the late aughts

NOTE Confidence: 0.870205343333333

 $00:32:39.506 \longrightarrow 00:32:41.628$  to the mid 2000 tens and to

NOTE Confidence: 0.870205343333333

00:32:41.628 --> 00:32:43.233 compare the efficacy of CPAP,

NOTE Confidence: 0.870205343333333

 $00:32:43.240 \longrightarrow 00:32:45.556$  non invasive ventilation,

NOTE Confidence: 0.870205343333333

 $00:32:45.556 \longrightarrow 00:32:48.548$  lifestyle modifications on symptoms

NOTE Confidence: 0.870205343333333

 $00:32:48.548 \longrightarrow 00:32:50.720$  and polysomnographic parameters.

NOTE Confidence: 0.870205343333333

 $00:32:50.720 \longrightarrow 00:32:52.976$  The lifestyle modification was

NOTE Confidence: 0.870205343333333

 $00{:}32{:}52.976 \longrightarrow 00{:}32{:}56.360$  primarily entailed a low calorie diet.

NOTE Confidence: 0.870205343333333

 $00:32:56.360 \longrightarrow 00:32:58.535$  With a good sleep hygiene

NOTE Confidence: 0.870205343333333

 $00:32:58.535 \longrightarrow 00:33:01.100$  and then appropriately used

NOTE Confidence: 0.870205343333333

 $00{:}33{:}01.100 \dashrightarrow 00{:}33{:}04.480$  supplemental oxygen as well.

NOTE Confidence: 0.870205343333333

 $00{:}33{:}04.480 \dashrightarrow 00{:}33{:}06.867$  The study was designed to sort of

NOTE Confidence: 0.870205343333333

 $00:33:06.867 \longrightarrow 00:33:08.326$  determine the comparative efficacy

NOTE Confidence: 0.870205343333333

00:33:08.326 --> 00:33:10.186 of non invasive ventilation and

NOTE Confidence: 0.870205343333333

 $00:33:10.186 \longrightarrow 00:33:13.389$  cpap and lifestyle modification.

00:33:13.390 --> 00:33:14.014 And uh,

NOTE Confidence: 0.870205343333333

 $00:33:14.014 \longrightarrow 00:33:15.574$  there was an initial two-month

NOTE Confidence: 0.870205343333333

 $00:33:15.574 \longrightarrow 00:33:19.940$  follow up with the baseline and.

NOTE Confidence: 0.870205343333333

 $00:33:19.940 \longrightarrow 00:33:21.888$  Subsequent echocardiograms and then

NOTE Confidence: 0.870205343333333

 $00:33:21.888 \longrightarrow 00:33:24.810$  there was a subsequent long term

NOTE Confidence: 0.870205343333333

00:33:24.882 --> 00:33:27.456 study which I'll get to momentarily.

NOTE Confidence: 0.8702053433333333 00:33:27.460 --> 00:33:29.690 Umm.

NOTE Confidence: 0.870205343333333

 $00:33:29.690 \longrightarrow 00:33:32.615$  There was a significant improvement

NOTE Confidence: 0.870205343333333

 $00:33:32.615 \longrightarrow 00:33:34.482$  in Echocardiographic systolic

NOTE Confidence: 0.870205343333333

00:33:34.482 --> 00:33:37.942 PA pressure estimates and then

NOTE Confidence: 0.870205343333333

 $00{:}33{:}37.942 \dashrightarrow 00{:}33{:}40.710$  also significant improvement in.

NOTE Confidence: 0.870205343333333

00:33:40.710 --> 00:33:43.290 6 minute walk distance using

NOTE Confidence: 0.870205343333333

 $00:33:43.290 \longrightarrow 00:33:45.354$  non invasive positive pressure

NOTE Confidence: 0.870205343333333

 $00{:}33{:}45.354 \dashrightarrow 00{:}33{:}47.016$  ventilation in these subjects.

NOTE Confidence: 0.870205343333333

 $00:33:47.016 \longrightarrow 00:33:50.108$  So the main results we can summarize is

NOTE Confidence: 0.870205343333333

 $00:33:50.108 \longrightarrow 00:33:52.828$  more than half the patients that had OHS.

 $00:33:52.830 \longrightarrow 00:33:54.840$  First off they had echocardiographic

NOTE Confidence: 0.870205343333333

00:33:54.840 --> 00:33:56.448 evidence of pH,

NOTE Confidence: 0.870205343333333

 $00:33:56.450 \longrightarrow 00:33:58.482$  they had echocardiographic evidence

NOTE Confidence: 0.870205343333333

00:33:58.482 --> 00:34:01.117 of diastolic dysfunction and the non

NOTE Confidence: 0.870205343333333

 $00:34:01.117 \longrightarrow 00:34:02.962$  invasive ventilation was more effective

NOTE Confidence: 0.870205343333333

00:34:02.962 --> 00:34:04.999 in improving the LV hypertrophy

NOTE Confidence: 0.870205343333333

 $00:34:04.999 \longrightarrow 00:34:06.647$  parameters compared to control.

NOTE Confidence: 0.870205343333333

 $00{:}34{:}06.650 \dashrightarrow 00{:}34{:}11.200$  Maybe CPAP was was decent at it.

NOTE Confidence: 0.870205343333333

 $00:34:11.200 \longrightarrow 00:34:13.405$  That but it was only the non

NOTE Confidence: 0.870205343333333

 $00{:}34{:}13.405 \dashrightarrow 00{:}34{:}15.054$  invasive ventilation that led to

NOTE Confidence: 0.870205343333333

 $00:34:15.054 \longrightarrow 00:34:16.980$  a significant reduction in this

NOTE Confidence: 0.870205343333333

 $00:34:16.980 \longrightarrow 00:34:18.910$  peer pressure estimate and the

NOTE Confidence: 0.870205343333333

 $00{:}34{:}18.910 \dashrightarrow 00{:}34{:}20.430$  significant improvement in the

NOTE Confidence: 0.870205343333333

 $00:34:20.430 \longrightarrow 00:34:22.499$  six minute walk distance as well.

NOTE Confidence: 0.870205343333333

 $00:34:22.500 \longrightarrow 00:34:22.924 \text{ So},$ 

 $00:34:22.924 \longrightarrow 00:34:26.316$  so big impacts of of non invasive

NOTE Confidence: 0.870205343333333

 $00{:}34{:}26.316 \dashrightarrow 00{:}34{:}28.155$  positive pressure ventilation

NOTE Confidence: 0.870205343333333

00:34:28.155 --> 00:34:30.152 on structural parameters but

NOTE Confidence: 0.870205343333333

 $00:34:30.152 \longrightarrow 00:34:32.372$  also on estimated peer pressures

NOTE Confidence: 0.870205343333333

 $00:34:32.372 \longrightarrow 00:34:34.270$  and and functionality.

NOTE Confidence: 0.677453076

00:34:36.560 --> 00:34:39.240 The Pickwick Project was continued

NOTE Confidence: 0.677453076

 $00{:}34{:}39.240 \dashrightarrow 00{:}34{:}42.390$  over three years with the evaluations

NOTE Confidence: 0.677453076

 $00:34:42.390 \longrightarrow 00:34:45.269$  done during that period of time.

NOTE Confidence: 0.677453076

 $00:34:45.270 \longrightarrow 00:34:49.220$  And the results were sort

NOTE Confidence: 0.677453076

 $00:34:49.220 \longrightarrow 00:34:52.380$  of like further compelling.

NOTE Confidence: 0.677453076

 $00:34:52.380 \longrightarrow 00:34:55.103$  Here we see both CPAP and noninvasive

NOTE Confidence: 0.677453076

 $00:34:55.103 \longrightarrow 00:34:57.208$  ventilation having a significant impact

NOTE Confidence: 0.677453076

 $00:34:57.208 \longrightarrow 00:35:00.232$  on the estimated PA pressure over time.

NOTE Confidence: 0.677453076

 $00:35:00.240 \longrightarrow 00:35:02.240$  You got the, it seemed like there were

NOTE Confidence: 0.677453076

00:35:02.240 --> 00:35:04.360 still big returns happening at one year,

NOTE Confidence: 0.677453076

 $00:35:04.360 \longrightarrow 00:35:05.384$  but beyond one year,

 $00:35:05.384 \longrightarrow 00:35:06.920$  there wasn't really much in the

NOTE Confidence: 0.677453076

 $00{:}35{:}06.979 \dashrightarrow 00{:}35{:}08.559$  way of significant reductions in

NOTE Confidence: 0.677453076

 $00:35:08.560 \longrightarrow 00:35:10.710$  for the reductions in pressure.

NOTE Confidence: 0.677453076

 $00:35:10.710 \longrightarrow 00:35:11.670$  And so in all likelihood,

NOTE Confidence: 0.677453076

 $00:35:11.670 \longrightarrow 00:35:13.140$  the study by hell that looked at

NOTE Confidence: 0.677453076

 $00:35:13.140 \longrightarrow 00:35:14.331$  those initial 18 subjects phase

NOTE Confidence: 0.677453076

 $00:35:14.331 \longrightarrow 00:35:15.616$  the cutoff of three months,

NOTE Confidence: 0.677453076

00:35:15.620 --> 00:35:19.337 there's probably more benefit to be had

NOTE Confidence: 0.677453076

 $00:35:19.337 \longrightarrow 00:35:24.400$  with additional time on therapy and then.

NOTE Confidence: 0.677453076

 $00:35:24.400 \dashrightarrow 00:35:26.850$  Parameters of reticular function also

NOTE Confidence: 0.677453076

 $00{:}35{:}26.850 \dashrightarrow 00{:}35{:}29.300$  were significantly improved as well,

NOTE Confidence: 0.677453076

 $00:35:29.300 \longrightarrow 00:35:31.756$  with both noninvasive ventilation

NOTE Confidence: 0.677453076

 $00:35:31.756 \longrightarrow 00:35:33.598$  and CPAP therapy.

NOTE Confidence: 0.677453076

 $00:35:33.600 \longrightarrow 00:35:35.256$  Again, if there was improvement to be had,

NOTE Confidence: 0.677453076

 $00:35:35.260 \longrightarrow 00:35:38.795$  it was usually happening by one year.

 $00:35:38.800 \longrightarrow 00:35:41.375$  And then these are parameters

NOTE Confidence: 0.677453076

 $00:35:41.375 \longrightarrow 00:35:42.920$  of diastolic function.

NOTE Confidence: 0.677453076

00:35:42.920 --> 00:35:43.754 And again,

NOTE Confidence: 0.677453076

 $00:35:43.754 \longrightarrow 00:35:44.588$  same thing.

NOTE Confidence: 0.677453076

 $00:35:44.588 \longrightarrow 00:35:46.673$  Whatever improvement was to be

NOTE Confidence: 0.677453076

 $00{:}35{:}46.673 \dashrightarrow 00{:}35{:}49.215$  had seemed to happen in one year

NOTE Confidence: 0.677453076

 $00{:}35{:}49.220 \dashrightarrow 00{:}35{:}51.975$  on both of these parameters and

NOTE Confidence: 0.677453076

 $00:35:51.975 \longrightarrow 00:35:54.460$  there was less of an impact on

NOTE Confidence: 0.677453076

 $00{:}35{:}54.460 \dashrightarrow 00{:}35{:}56.176$  actual left atrial morphology,

NOTE Confidence: 0.677453076

 $00{:}35{:}56.176 \dashrightarrow 00{:}36{:}00.280$  but but maybe a little bit of a signal

NOTE Confidence: 0.677453076

 $00{:}36{:}00.375 \dashrightarrow 00{:}36{:}03.338$  here as well at one year's time.

NOTE Confidence: 0.677453076

00:36:03.340 --> 00:36:06.217 And so to sort of illustrate this,

NOTE Confidence: 0.677453076

 $00:36:06.220 \longrightarrow 00:36:09.028$  I'm going to go through a case that.

NOTE Confidence: 0.677453076

 $00{:}36{:}09.030 {\:{\circ}{\circ}{\circ}}>00{:}36{:}11.590$  I came across just a couple years ago.

NOTE Confidence: 0.677453076

 $00:36:11.590 \longrightarrow 00:36:13.270$  He was a 67 year old female.

NOTE Confidence: 0.677453076

 $00:36:13.270 \longrightarrow 00:36:15.550$  She had a medical history

 $00:36:15.550 \longrightarrow 00:36:18.100$  for OSA that was not treated.

NOTE Confidence: 0.677453076

 $00:36:18.100 \longrightarrow 00:36:19.660$  Her chart set.

NOTE Confidence: 0.677453076

 $00:36:19.660 \longrightarrow 00:36:21.220$  She had COPD.

NOTE Confidence: 0.677453076

 $00:36:21.220 \longrightarrow 00:36:23.540$  She had his own hypertension,

NOTE Confidence: 0.677453076

 $00:36:23.540 \longrightarrow 00:36:24.298$  diabetes mellitus,

NOTE Confidence: 0.677453076

 $00:36:24.298 \longrightarrow 00:36:27.800$  and then a history of a Tia as well.

NOTE Confidence: 0.677453076

 $00:36:27.800 \longrightarrow 00:36:29.885$  She presented to the hospital

NOTE Confidence: 0.677453076

 $00:36:29.885 \longrightarrow 00:36:31.136$  with progressive waking,

NOTE Confidence: 0.677453076

 $00:36:31.140 \longrightarrow 00:36:32.360$  hypoxemic failure,

NOTE Confidence: 0.677453076

 $00:36:32.360 \longrightarrow 00:36:36.020$  and concern for right ventricular failure.

NOTE Confidence: 0.677453076

 $00:36:36.020 \longrightarrow 00:36:37.720$  At the time of presentation,

NOTE Confidence: 0.677453076

 $00:36:37.720 \longrightarrow 00:36:40.102$  vital signs were not typically worrisome

NOTE Confidence: 0.677453076

 $00{:}36{:}40.102 \dashrightarrow 00{:}36{:}42.876$  except for the degree of hypoxemia that

NOTE Confidence: 0.677453076

 $00:36:42.876 \longrightarrow 00:36:45.480$  she had reporting 15 liters of oxidizer,

NOTE Confidence: 0.677453076

 $00:36:45.480 \longrightarrow 00:36:47.472$  no Earth or cytosis.

 $00:36:47.472 \longrightarrow 00:36:48.966$  Renal function was

NOTE Confidence: 0.677453076

00:36:48.966 --> 00:36:50.460 probably largely preserved,

NOTE Confidence: 0.677453076

 $00:36:50.460 \longrightarrow 00:36:55.094$  but notably had a significant and chronically

NOTE Confidence: 0.677453076

00:36:55.094 --> 00:36:59.096 elevated PCO 2 on blood gas analysis,

NOTE Confidence: 0.677453076

 $00:36:59.100 \longrightarrow 00:37:00.148$  chest X-ray,

NOTE Confidence: 0.677453076

00:37:00.148 --> 00:37:01.720 nothing shocking here,

NOTE Confidence: 0.677453076

 $00:37:01.720 \dashrightarrow 00:37:03.622$ a little bit of pulmonary vascular

NOTE Confidence: 0.677453076

 $00:37:03.622 \longrightarrow 00:37:04.573$  congestion and cephalization,

NOTE Confidence: 0.677453076

 $00{:}37{:}04.580 \dashrightarrow 00{:}37{:}05.768$  lung volumes not.

NOTE Confidence: 0.859708812

 $00:37:08.750 \longrightarrow 00:37:10.390$  Too high, not too low.

NOTE Confidence: 0.859708812

00:37:10.390 --> 00:37:11.318 And echocardiography,

NOTE Confidence: 0.859708812

 $00{:}37{:}11.318 --> 00{:}37{:}14.566$  here's a picture of a TR jet,

NOTE Confidence: 0.859708812

 $00:37:14.570 \longrightarrow 00:37:15.950$  you know, high value.

NOTE Confidence: 0.859708812

 $00:37:15.950 \longrightarrow 00:37:19.070$  So estimates in the low 60s, high,

NOTE Confidence: 0.859708812

 $00:37:19.070 \longrightarrow 00:37:21.130$  low 70s without the addition

NOTE Confidence: 0.859708812

 $00:37:21.130 \longrightarrow 00:37:22.630$  of the right atrial pressure.

00:37:22.630 --> 00:37:24.494 And then an echocardiography,

NOTE Confidence: 0.859708812

 $00{:}37{:}24.494 \dashrightarrow 00{:}37{:}27.760$  we've got our apical 4 chamber view.

NOTE Confidence: 0.859708812

 $00:37:27.760 \longrightarrow 00:37:29.356$  We've got a very large right atrium.

NOTE Confidence: 0.859708812

00:37:29.360 --> 00:37:31.894 We've got a very large right ventricle

NOTE Confidence: 0.859708812

 $00{:}37{:}31.894 \dashrightarrow 00{:}37{:}34.558$  that exceeds the size of left ventricle.

NOTE Confidence: 0.859708812

 $00:37:34.560 \longrightarrow 00:37:37.234$  With signs of right for truly dysfunction.

NOTE Confidence: 0.859708812

 $00:37:37.240 \longrightarrow 00:37:38.920$  So probably a moderately enlarged

NOTE Confidence: 0.859708812

 $00{:}37{:}38.920 \dashrightarrow 00{:}37{:}41.000$  right ventricle to say at least,

NOTE Confidence: 0.859708812

 $00:37:41.000 \longrightarrow 00:37:44.227$  maybe like 5 centimeters with I would

NOTE Confidence: 0.859708812

 $00:37:44.227 \longrightarrow 00:37:46.279$  say moderate dysfunction as well.

NOTE Confidence: 0.859708812

 $00:37:46.280 \longrightarrow 00:37:49.064$  Her clinical evaluation looked

NOTE Confidence: 0.859708812

 $00:37:49.064 \longrightarrow 00:37:52.544$  for secondary causes of PAH.

NOTE Confidence: 0.859708812

 $00:37:52.550 \dashrightarrow 00:37:55.586$  Her antibody panels were strictly negative.

NOTE Confidence: 0.859708812

00:37:55.590 --> 00:37:57.414 There was no evidence of portal

NOTE Confidence: 0.859708812

 $00:37:57.414 \longrightarrow 00:37:59.210$  hypertension based on ultrasonic optic data.

00:37:59.210 --> 00:38:01.448 She had no history of stimulant

NOTE Confidence: 0.859708812

 $00:38:01.448 \longrightarrow 00:38:02.940$  use and or exigen use.

NOTE Confidence: 0.859708812

 $00:38:02.940 \longrightarrow 00:38:04.836$  And then lastly on a spirometry

NOTE Confidence: 0.859708812

 $00:38:04.836 \longrightarrow 00:38:06.495$  didn't have any evidence of

NOTE Confidence: 0.859708812

 $00:38:06.495 \longrightarrow 00:38:07.847$  actual obstruction as well,

NOTE Confidence: 0.859708812

 $00:38:07.850 \longrightarrow 00:38:09.265$  just a suggestion of a

NOTE Confidence: 0.859708812

 $00:38:09.265 \longrightarrow 00:38:10.114$  restrictive ventilatory defect.

NOTE Confidence: 0.661694761666667

 $00:38:12.440 \dashrightarrow 00:38:15.218$  She had to write her catheterization.

NOTE Confidence: 0.661694761666667

 $00:38:15.220 \longrightarrow 00:38:17.760$  Notably our subject was £317.00,

NOTE Confidence: 0.661694761666667

00:38:17.760 --> 00:38:20.376 pretty high PSA as you can see here.

NOTE Confidence: 0.661694761666667

 $00:38:20.380 \longrightarrow 00:38:23.218$  This is our PA pressure tracing.

NOTE Confidence: 0.661694761666667

00:38:23.220 --> 00:38:25.980 I reported here as a papers of

NOTE Confidence: 0.661694761666667

 $00:38:25.980 \longrightarrow 00:38:28.140$  84 or 34 of the mean of 53.

NOTE Confidence: 0.661694761666667

 $00:38:28.140 \longrightarrow 00:38:29.845$  And then importantly, her wedge

NOTE Confidence: 0.661694761666667

 $00:38:29.845 \longrightarrow 00:38:31.550$  pressure wasn't all that impressive.

NOTE Confidence: 0.661694761666667

 $00:38:31.550 \longrightarrow 00:38:35.033$  This is again after a little bit of diuresis.

 $00:38:35.040 \longrightarrow 00:38:38.628$  But. If you were to sort of

NOTE Confidence: 0.661694761666667

 $00:38:38.630 \longrightarrow 00:38:40.408$  calculate this out and if I were

NOTE Confidence: 0.661694761666667

 $00:38:40.408 \longrightarrow 00:38:42.541$  to sort of like hide this data,

NOTE Confidence: 0.661694761666667

 $00:38:42.541 \longrightarrow 00:38:46.285$  this would look very much like a subject that

NOTE Confidence: 0.661694761666667

 $00:38:46.285 \longrightarrow 00:38:49.205$  had frank pulmonary arterial hypertension.

NOTE Confidence: 0.661694761666667

 $00:38:49.210 \longrightarrow 00:38:50.578$  And here you can see her

NOTE Confidence: 0.661694761666667

 $00:38:50.578 \longrightarrow 00:38:51.262$  peer pressure tracing.

NOTE Confidence: 0.661694761666667

 $00{:}38{:}51.270 \dashrightarrow 00{:}38{:}52.542$  So you can probably if you

NOTE Confidence: 0.661694761666667

 $00:38:52.542 \longrightarrow 00:38:53.909$  can try and commit to memory.

NOTE Confidence: 0.661694761666667

 $00:38:53.910 \longrightarrow 00:38:56.860$  This is a fairly broad.

NOTE Confidence: 0.661694761666667

 $00:38:56.860 \dashrightarrow 00:38:58.870$  About pulmonary artery pulse pressure,

NOTE Confidence: 0.661694761666667

00:38:58.870 --> 00:39:01.410 you know, 50 points.

NOTE Confidence: 0.661694761666667 00:39:01.410 --> 00:39:02.550 With the. NOTE Confidence: 0.821993723846154

 $00:39:05.690 \longrightarrow 00:39:09.281$  Index of 2.51 so just at the

NOTE Confidence: 0.821993723846154

 $00:39:09.281 \longrightarrow 00:39:12.380$  very lower end of a normal.

 $00:39:12.380 \longrightarrow 00:39:14.684$  Her diagnostic polysomnogram was

NOTE Confidence: 0.821993723846154

00:39:14.684 --> 00:39:18.140 significant for a fairly high HIV

NOTE Confidence: 0.821993723846154

00:39:18.140 --> 00:39:22.319 using the 3% criteria and then notably

NOTE Confidence: 0.821993723846154

 $00:39:22.319 \longrightarrow 00:39:25.154$  significant amount of nocturnal

NOTE Confidence: 0.821993723846154

 $00:39:25.154 \longrightarrow 00:39:28.057$  hypoxemia with the nature of a 58%

NOTE Confidence: 0.821993723846154

00:39:28.057 --> 00:39:30.276 and then I can't quite figure out

NOTE Confidence: 0.821993723846154

 $00:39:30.276 \longrightarrow 00:39:32.905$  how this got calculated, but I am.

NOTE Confidence: 0.821993723846154

 $00:39:32.905 \longrightarrow 00:39:34.675$  I am not a sleep doctor.

NOTE Confidence: 0.821993723846154

 $00:39:34.680 \longrightarrow 00:39:37.872$  I just guessed that sometimes T88 can

NOTE Confidence: 0.821993723846154

 $00:39:37.872 \longrightarrow 00:39:42.037$  get above 100% with and then lastly.

NOTE Confidence: 0.821993723846154

 $00{:}39{:}42.037 \dashrightarrow 00{:}39{:}44.900$  I think here we have some transcutaneous

NOTE Confidence: 0.821993723846154

 $00:39:44.900 \longrightarrow 00:39:47.260$  carbon dioxide monitoring as well.

NOTE Confidence: 0.821993723846154

 $00:39:47.260 \longrightarrow 00:39:49.560$  So definitely has pretty significant

NOTE Confidence: 0.821993723846154

00:39:49.560 --> 00:39:52.505 sleep apnea with both hypercapnia

NOTE Confidence: 0.821993723846154

 $00:39:52.505 \longrightarrow 00:39:55.205$  suggested by the transcutaneous

NOTE Confidence: 0.821993723846154

 $00:39:55.205 \dashrightarrow 00:39:58.488$  monitoring and hypoxemia as well.

00:39:58.488 --> 00:40:01.078 So we got to Sleep Medicine consultation,

NOTE Confidence: 0.821993723846154

 $00:40:01.080 \longrightarrow 00:40:03.336$  she was put on Bipap therapy.

NOTE Confidence: 0.821993723846154

 $00:40:03.340 \longrightarrow 00:40:05.865$  Everybody that saw those hemodynamics

NOTE Confidence: 0.821993723846154

 $00:40:05.865 \longrightarrow 00:40:08.708$  thought I was committing a mild form

NOTE Confidence: 0.821993723846154

00:40:08.708 --> 00:40:10.700 of malpractice by not treating her

NOTE Confidence: 0.821993723846154

 $00:40:10.763 \longrightarrow 00:40:12.629$  pH with a basic dilator therapy.

NOTE Confidence: 0.821993723846154

00:40:12.630 --> 00:40:15.708 Her outpatients Bipap was a ultimately

NOTE Confidence: 0.821993723846154

00:40:15.708 --> 00:40:19.860 titrated up to 20 / 16 and then we

NOTE Confidence: 0.821993723846154

 $00:40:19.860 \longrightarrow 00:40:22.600$  subsequently got a blood gas that.

NOTE Confidence: 0.821993723846154

00:40:22.600 --> 00:40:23.467 Sort of the,

NOTE Confidence: 0.821993723846154

 $00:40:23.467 \longrightarrow 00:40:26.960$  the best one we got had a PCO two of a 46.

NOTE Confidence: 0.78219253555556

 $00:40:29.070 \longrightarrow 00:40:30.129$  Her subsequent echocardiogram,

NOTE Confidence: 0.78219253555556

00:40:30.129 --> 00:40:32.247 this is her new TR jet.

NOTE Confidence: 0.78219253555556

 $00{:}40{:}32.250 \dashrightarrow 00{:}40{:}35.050$  So you can see that they were

NOTE Confidence: 0.78219253555556

 $00:40:35.050 \longrightarrow 00:40:37.269$  divining the envelope around here,

 $00:40:37.270 \longrightarrow 00:40:39.947$  honestly not the worst placement.

NOTE Confidence: 0.78219253555556

 $00{:}40{:}39.947 \dashrightarrow 00{:}40{:}42.089$  So just not a very good

NOTE Confidence: 0.78219253555556

00:40:42.089 --> 00:40:44.189 quality TR jet to work with.

NOTE Confidence: 0.78219253555556

00:40:44.190 --> 00:40:46.248 But you can see that echocardiogram is,

NOTE Confidence: 0.78219253555556

 $00:40:46.250 \longrightarrow 00:40:47.975$  is, is dramatically improved and

NOTE Confidence: 0.78219253555556

00:40:47.975 --> 00:40:50.158 this was strictly with BIPAP therapy

NOTE Confidence: 0.78219253555556

00:40:50.158 --> 00:40:52.018 alone and maintenance of her

NOTE Confidence: 0.78219253555556

 $00:40:52.018 \longrightarrow 00:40:54.193$  diuretic therapy when she had that

NOTE Confidence: 0.78219253555556

 $00:40:54.193 \longrightarrow 00:40:55.938$  catheterization that was a diuretic

NOTE Confidence: 0.78219253555556

 $00:40:55.997 \longrightarrow 00:40:57.999$  therapy that that she went home on.

NOTE Confidence: 0.78219253555556

00:40:58.000 --> 00:40:59.540 And so you can see an improvement

NOTE Confidence: 0.78219253555556

 $00:40:59.540 \longrightarrow 00:41:00.480$  in right atrial size,

NOTE Confidence: 0.78219253555556

 $00:41:00.480 \longrightarrow 00:41:02.615$  you can see an improvement in right

NOTE Confidence: 0.78219253555556

 $00:41:02.615 \longrightarrow 00:41:04.576$  ventricular size and then also

NOTE Confidence: 0.78219253555556

00:41:04.576 --> 00:41:06.646 right ventricular function as well.

NOTE Confidence: 0.78219253555556

 $00{:}41{:}06.650 \dashrightarrow 00{:}41{:}08.022$  We repeated the catheterization,

 $00:41:08.022 \longrightarrow 00:41:10.969$  a lot of weight reduction and happened right.

NOTE Confidence: 0.78219253555556

 $00:41:10.970 \longrightarrow 00:41:14.474$  She was over 300 pounds the first time.

NOTE Confidence: 0.78219253555556

00:41:14.480 --> 00:41:17.010 But we've seen improvement in

NOTE Confidence: 0.78219253555556

 $00:41:17.010 \longrightarrow 00:41:19.034$  significant improvement or pressure.

NOTE Confidence: 0.78219253555556 00:41:19.040 --> 00:41:20.720 Oops. NOTE Confidence: 0.782192535555556

00:41:20.720 --> 00:41:22.760 Umm.

NOTE Confidence: 0.78219253555556

00:41:22.760 --> 00:41:25.214 Countermine value of 31 and you

NOTE Confidence: 0.78219253555556

 $00{:}41{:}25.214 \dashrightarrow 00{:}41{:}28.068$  can see that that PA pulse pressure

NOTE Confidence: 0.78219253555556

 $00:41:28.068 \longrightarrow 00:41:31.002$  went from 50 to 20 and she did have

NOTE Confidence: 0.78219253555556

 $00:41:31.002 \longrightarrow 00:41:32.580$  a little bit of an improvement

NOTE Confidence: 0.78219253555556

 $00:41:32.643 \longrightarrow 00:41:34.269$  in her cardiac index as well.

NOTE Confidence: 0.78219253555556

 $00:41:34.270 \longrightarrow 00:41:37.202$  The clinical significance of

NOTE Confidence: 0.78219253555556

 $00:41:37.202 \longrightarrow 00:41:40.134$  this is that your.

NOTE Confidence: 0.78219253555556

00:41:40.140 --> 00:41:41.925 Pulmonary compliance is going to

NOTE Confidence: 0.78219253555556

00:41:41.925 --> 00:41:44.174 be determined by your PA pulse

 $00{:}41{:}44.174 \dashrightarrow 00{:}41{:}46.159$  pressure and your stroke volume.

NOTE Confidence: 0.78219253555556

 $00:41:46.160 \longrightarrow 00:41:49.112$  And so it's going to be pulse

NOTE Confidence: 0.78219253555556

 $00:41:49.112 \longrightarrow 00:41:50.472$  pressure divided by stroke volume

NOTE Confidence: 0.78219253555556

 $00:41:50.472 \longrightarrow 00:41:52.667$  is going to be the determinant

NOTE Confidence: 0.78219253555556

00:41:52.667 --> 00:41:54.075 of your pulmonary compliance.

NOTE Confidence: 0.78219253555556

 $00:41:54.080 \longrightarrow 00:41:56.150$  And so in this case we have a PA

NOTE Confidence: 0.78219253555556

 $00:41:56.150 \longrightarrow 00:41:57.888$  compliant all special that went

NOTE Confidence: 0.78219253555556

00:41:57.888 --> 00:42:01.300 from 50 down to 30 or 20 rather and

NOTE Confidence: 0.78219253555556

00:42:01.300 --> 00:42:03.200 her stroke volume increase given

NOTE Confidence: 0.78219253555556

 $00:42:03.200 \longrightarrow 00:42:05.478$  this increase in cardiac index.

NOTE Confidence: 0.78219253555556

 $00{:}42{:}05.480 {\:{\mbox{--}}}{\:{\mbox{--}}}\xspace 00{:}42{:}07.804$  And so this is a dramatic improvement

NOTE Confidence: 0.78219253555556

 $00:42:07.804 \longrightarrow 00:42:10.047$  in take compliance which is again best.

NOTE Confidence: 0.78219253555556

 $00:42:10.050 \longrightarrow 00:42:13.248$  Explained by a change in vascular

NOTE Confidence: 0.78219253555556

00:42:13.248 --> 00:42:16.990 tone and possibly a change in Frank

NOTE Confidence: 0.78219253555556

00:42:16.990 --> 00:42:20.850 Arteriopathy and Venography as well.

NOTE Confidence: 0.78219253555556

 $00:42:20.850 \longrightarrow 00:42:21.176$  Um.

 $00:42:21.176 \longrightarrow 00:42:23.458$  And so one of the better examples

NOTE Confidence: 0.78219253555556

00:42:23.458 --> 00:42:25.876 I have of just how significant

NOTE Confidence: 0.78219253555556

00:42:25.876 --> 00:42:28.408 an impact BIPAP therapy by itself

NOTE Confidence: 0.78219253555556

 $00:42:28.491 \longrightarrow 00:42:31.081$  can have on patients with OHS and

NOTE Confidence: 0.78219253555556

 $00:42:31.081 \longrightarrow 00:42:33.392$  this really does differentiate the

NOTE Confidence: 0.78219253555556

00:42:33.392 --> 00:42:37.720 OHS phenotype from this? Umm.

NOTE Confidence: 0.78219253555556

 $00:42:37.720 \longrightarrow 00:42:41.920$  O SAPH phenotype as well.

NOTE Confidence: 0.78219253555556

00:42:41.920 --> 00:42:43.540 And so summary points,

NOTE Confidence: 0.78219253555556

 $00{:}42{:}43.540 \dashrightarrow 00{:}42{:}46.414$  you know the the current rubric we

NOTE Confidence: 0.78219253555556

00:42:46.414 --> 00:42:48.616 have for pH phenotypes does lack

NOTE Confidence: 0.78219253555556

 $00{:}42{:}48.616 \dashrightarrow 00{:}42{:}50.699$  a clear space for for OSA.

NOTE Confidence: 0.78219253555556

 $00:42:50.700 \longrightarrow 00:42:53.670$  But based on what we know about pH

NOTE Confidence: 0.78219253555556

 $00{:}42{:}53.670 \dashrightarrow 00{:}42{:}55.840$  and secondary left side of heart disease,

NOTE Confidence: 0.78219253555556

 $00:42:55.840 \longrightarrow 00:42:58.448$  I think we can use that to sort

NOTE Confidence: 0.78219253555556

 $00:42:58.448 \longrightarrow 00:43:00.850$  of create a phenotype for for for

 $00:43:00.850 \longrightarrow 00:43:03.032$  pH OS and to guide the rapeutic

NOTE Confidence: 0.78219253555556

 $00:43:03.032 \longrightarrow 00:43:05.080$  approaches for those patients.

NOTE Confidence: 0.78219253555556

 $00:43:05.080 \longrightarrow 00:43:08.290$  And then lastly CPAP and non

NOTE Confidence: 0.78219253555556

00:43:08.290 --> 00:43:10.010 invasive positive pressure therapy

NOTE Confidence: 0.78219253555556

 $00:43:10.010 \longrightarrow 00:43:12.160$  can have significant if not.

NOTE Confidence: 0.78219253555556

00:43:12.160 --> 00:43:14.024 Dramatic positive impacts on

NOTE Confidence: 0.78219253555556

 $00{:}43{:}14.024 \dashrightarrow 00{:}43{:}16.354$  pulmonary hemodynamics and I would

NOTE Confidence: 0.78219253555556

00:43:16.354 --> 00:43:18.598 suspect outcomes as well in subjects

NOTE Confidence: 0.78219253555556

 $00{:}43{:}18.598 \dashrightarrow 00{:}43{:}21.035$  with a variety of sleep disorder

NOTE Confidence: 0.78219253555556

 $00:43:21.035 \longrightarrow 00:43:22.349$  breathing conditions.

NOTE Confidence: 0.78219253555556

00:43:22.350 --> 00:43:25.829 So I ran through that pretty quickly.

NOTE Confidence: 0.78219253555556

 $00:43:25.830 \longrightarrow 00:43:28.038$  But there is plenty of time

NOTE Confidence: 0.78219253555556

00:43:28.038 --> 00:43:29.889 for questions and I'm happy

NOTE Confidence: 0.78219253555556

 $00:43:29.889 \longrightarrow 00:43:31.260$  to chat about any of this.

NOTE Confidence: 0.769572228

00:43:35.250 --> 00:43:36.380 Hey, Sarah, it's very good.

NOTE Confidence: 0.769572228

00:43:36.380 --> 00:43:38.788 Thank you so much. A great talk.

00:43:38.790 --> 00:43:41.694 So everybody, please feel free to

NOTE Confidence: 0.769572228

 $00{:}43{:}41.694 \dashrightarrow 00{:}43{:}44.350$  leave your questions in the chat

NOTE Confidence: 0.769572228

 $00:43:44.350 \longrightarrow 00:43:46.746$  or if you want to be unmuted,

NOTE Confidence: 0.769572228

00:43:46.746 --> 00:43:50.690 raise your hand and I'll be happy to oblige.

NOTE Confidence: 0.769572228

 $00:43:50.690 \longrightarrow 00:43:51.300$  Doctor mossanen.

NOTE Confidence: 0.769572228

 $00:43:51.300 \longrightarrow 00:43:52.825$  All right, here we go.

NOTE Confidence: 0.6242726

00:43:56.830 --> 00:44:01.670 Hello, Cyrus. Good to see you likewise

NOTE Confidence: 0.6242726

 $00:44:01.670 \longrightarrow 00:44:04.510$  and I was glad that you brought some

NOTE Confidence: 0.6242726

00:44:04.510 --> 00:44:07.083 clarity to this confusing areas and

NOTE Confidence: 0.6242726

 $00{:}44{:}07.083 \dashrightarrow 00{:}44{:}09.759$  I was somewhat disappointed by the

NOTE Confidence: 0.6242726

00:44:09.836 --> 00:44:13.302 latest 2022 International Conference

NOTE Confidence: 0.6242726

00:44:13.302 --> 00:44:17.825 on H2 Remove sleep apnea or sleep

NOTE Confidence: 0.6242726

00:44:17.825 --> 00:44:20.340 disordered breathing and it only

NOTE Confidence: 0.6242726

 $00:44:20.428 \longrightarrow 00:44:23.668$  include the OS and as as you know

NOTE Confidence: 0.6242726

 $00:44:23.668 \longrightarrow 00:44:27.015$  there are several case studies that

 $00:44:27.015 \longrightarrow 00:44:29.910$  showed sleep apnea without necessarily.

NOTE Confidence: 0.6242726

 $00:44:29.910 \longrightarrow 00:44:33.080$  Having hypercapnia during the daytime

NOTE Confidence: 0.6242726

 $00:44:33.080 \longrightarrow 00:44:36.260$  they had the hypertension either

NOTE Confidence: 0.6242726

 $00:44:36.260 \longrightarrow 00:44:39.460$  a pre capillary type pulmonary

NOTE Confidence: 0.6242726

 $00:44:39.460 \longrightarrow 00:44:43.070$  hypertension or or post or mixed.

NOTE Confidence: 0.6242726

00:44:43.070 --> 00:44:45.938 I think what they're not considering

NOTE Confidence: 0.6242726

 $00:44:45.938 \longrightarrow 00:44:47.850$  is the phenotypic expression,

NOTE Confidence: 0.6242726

 $00:44:47.850 \longrightarrow 00:44:50.938$  or rather the individual

NOTE Confidence: 0.6242726

00:44:50.938 --> 00:44:54.026 susceptibility to sleep disorder,

NOTE Confidence: 0.6242726

 $00:44:54.030 \longrightarrow 00:44:55.304$  breathing consequences,

NOTE Confidence: 0.6242726

 $00{:}44{:}55.304 \dashrightarrow 00{:}44{:}58.489$ hypoxia plus or minus hypercapnia,

NOTE Confidence: 0.6242726

00:44:58.490 --> 00:45:01.628 plus their own perhaps genetic component

NOTE Confidence: 0.6242726

 $00{:}45{:}01.628 \dashrightarrow 00{:}45{:}05.670$  that will set the reactions to a

NOTE Confidence: 0.6242726

 $00:45:05.670 \longrightarrow 00:45:08.770$  remodeling of the pulmonary vasculature.

NOTE Confidence: 0.6242726

00:45:08.770 --> 00:45:12.260 The data on hyper responsiveness,

NOTE Confidence: 0.6242726

 $00{:}45{:}12.260 \dashrightarrow 00{:}45{:}14.462$  so high altitude hypoxia size is

 $00:45:14.462 \longrightarrow 00:45:16.759$  really telling that there are some

NOTE Confidence: 0.6242726

 $00:45:16.759 \longrightarrow 00:45:19.039$  subset of individuals at high altitude

NOTE Confidence: 0.6242726

00:45:19.039 --> 00:45:21.136 they develop on their hypertension

NOTE Confidence: 0.6242726

 $00{:}45{:}21.136 \to 00{:}45{:}23.256$  and others don't with therefore

NOTE Confidence: 0.6242726

 $00:45:23.256 \longrightarrow 00:45:25.397$  they're given exposure to hypoxia.

NOTE Confidence: 0.6242726

00:45:25.397 --> 00:45:27.971 So if you just lump everything

NOTE Confidence: 0.6242726

00:45:27.971 --> 00:45:30.681 into an OHSU is going to eliminate

NOTE Confidence: 0.6242726

 $00:45:30.681 \longrightarrow 00:45:34.103$  lots of folks that they may have a

NOTE Confidence: 0.6242726

 $00:45:34.103 \longrightarrow 00:45:36.438$  lingering pH through sleep disorder

NOTE Confidence: 0.6242726

 $00:45:36.438 \longrightarrow 00:45:39.710$  breathing undiagnosed or or or not.

NOTE Confidence: 0.6242726

 $00:45:39.710 \longrightarrow 00:45:42.194$  Consider it to be a worthwhile

NOTE Confidence: 0.6242726

 $00:45:42.194 \longrightarrow 00:45:44.279$  to investigate either by doing

NOTE Confidence: 0.6242726

 $00{:}45{:}44.279 \dashrightarrow 00{:}45{:}46.750$  an echo or or follow up actually

NOTE Confidence: 0.6242726

 $00{:}45{:}46.750 \dashrightarrow 00{:}45{:}48.820$  with the echocardiography.

NOTE Confidence: 0.6242726

00:45:48.820 --> 00:45:52.285 So would you in your practice continue

 $00:45:52.285 \longrightarrow 00:45:55.300$  perhaps to look more carefully into

NOTE Confidence: 0.6242726

 $00{:}45{:}55{.}300 \dashrightarrow 00{:}45{:}58.639$  the presence or absence of pH in

NOTE Confidence: 0.6242726

 $00:45:58.735 \longrightarrow 00:46:02.035$  those individuals that they may have

NOTE Confidence: 0.6242726

 $00:46:02.040 \longrightarrow 00:46:06.405$  non hypercapnic during the daytime

NOTE Confidence: 0.6242726

00:46:06.405 --> 00:46:08.840 hypoxia and they may have actually

NOTE Confidence: 0.6242726

00:46:08.840 --> 00:46:10.088 hypercapnia during the night?

NOTE Confidence: 0.6242726

 $00:46:10.090 \longrightarrow 00:46:12.764$  But not during the daytime and and

NOTE Confidence: 0.6242726

 $00:46:12.764 \longrightarrow 00:46:14.838$  pursue whether they may have pH.

NOTE Confidence: 0.7585127

00:46:15.690 --> 00:46:18.320 Yeah. So. So great points

NOTE Confidence: 0.7585127

 $00:46:18.320 \longrightarrow 00:46:20.424$  and then great question.

NOTE Confidence: 0.7585127

 $00{:}46{:}20.430 \dashrightarrow 00{:}46{:}23.638$  So just the first part you said about

NOTE Confidence: 0.7585127

00:46:23.638 --> 00:46:27.484 the ERS and ESC conferences in 2022,

NOTE Confidence: 0.7585127

 $00:46:27.484 \longrightarrow 00:46:33.360$  I went to ER S and you know there really was.

NOTE Confidence: 0.7585127

 $00:46:33.360 \longrightarrow 00:46:36.352$  No mention of it at all except for

NOTE Confidence: 0.7585127

 $00:46:36.352 \longrightarrow 00:46:38.940$  one comment that Marius Hooper made

NOTE Confidence: 0.7585127

 $00{:}46{:}38.940 \dashrightarrow 00{:}46{:}42.066$  and one comment that that Mark

00:46:42.066 --> 00:46:44.050 Huber made during one of the sessions

NOTE Confidence: 0.7585127

 $00{:}46{:}44.050 \dashrightarrow 00{:}46{:}45.497$  about just it being removed because

NOTE Confidence: 0.7585127

 $00:46:45.497 \longrightarrow 00:46:46.853$  it wasn't a factor separately on

NOTE Confidence: 0.7585127

00:46:46.853 --> 00:46:48.599 the side of the Marius would would

NOTE Confidence: 0.7585127

 $00:46:48.599 \longrightarrow 00:46:50.135$  agree that there is something there.

NOTE Confidence: 0.7585127

 $00:46:50.140 \longrightarrow 00:46:52.660$  It's just it's such a difficult

NOTE Confidence: 0.7585127

 $00:46:52.660 \longrightarrow 00:46:54.312$  thing to study. Definitively,

NOTE Confidence: 0.7585127

00:46:54.312 --> 00:46:57.448 you know, So what we would need to

NOTE Confidence: 0.7585127

 $00:46:57.448 \longrightarrow 00:47:00.418$  really create a link in order to

NOTE Confidence: 0.7585127

 $00:47:00.418 \longrightarrow 00:47:03.048$  sort of phenotype these patients.

NOTE Confidence: 0.7585127

 $00:47:03.050 \longrightarrow 00:47:05.276$  Would be a complicated site that

NOTE Confidence: 0.7585127

 $00:47:05.276 \longrightarrow 00:47:07.550$  would require a lot of people,

NOTE Confidence: 0.7585127

 $00:47:07.550 \longrightarrow 00:47:09.951$  and it would be a fairly big

NOTE Confidence: 0.7585127

 $00:47:09.951 \longrightarrow 00:47:12.000$  diversion from routine clinical care.

NOTE Confidence: 0.7585127

 $00:47:12.000 \longrightarrow 00:47:16.304$  Now to your point about how well are we

00:47:16.304 --> 00:47:18.572 surveilling these subjects that we're

NOTE Confidence: 0.7585127

00:47:18.572 --> 00:47:20.837 getting during routine clinical care,

NOTE Confidence: 0.7585127

 $00:47:20.840 \longrightarrow 00:47:24.989$  one of the challenges that I have is that.

NOTE Confidence: 0.7585127

 $00:47:24.990 \longrightarrow 00:47:28.800$  Monitoring for nocturnal hypercapnia is not

NOTE Confidence: 0.7585127

 $00:47:28.800 \longrightarrow 00:47:32.150$  particularly straightforward in our practice.

NOTE Confidence: 0.7585127

 $00:47:32.150 \longrightarrow 00:47:35.084$  Those sleep studies get delayed because

NOTE Confidence: 0.7585127

 $00:47:35.084 \longrightarrow 00:47:38.329$  there's only one site that does them.

NOTE Confidence: 0.7585127

 $00{:}47{:}38.330 \dashrightarrow 00{:}47{:}41.210$  And a lot of times I'm more compelled

NOTE Confidence: 0.7585127

 $00{:}47{:}41.210 \dashrightarrow 00{:}47{:}44.569$  to just get a sleep study and establish

NOTE Confidence: 0.7585127

 $00:47:44.569 \longrightarrow 00:47:47.131$  somebody with a sleep doctor and

NOTE Confidence: 0.7585127

 $00:47:47.131 \longrightarrow 00:47:49.238$  and sort of have them make sure

NOTE Confidence: 0.7585127

 $00:47:49.238 \longrightarrow 00:47:51.377$  that the therapy is most tailored

NOTE Confidence: 0.7585127

 $00:47:51.377 \longrightarrow 00:47:53.202$  for them as opposed to.

NOTE Confidence: 0.7585127

00:47:53.210 --> 00:47:54.900 Getting that additional layer of

NOTE Confidence: 0.7585127

 $00:47:54.900 \longrightarrow 00:47:56.590$  information that I think would

NOTE Confidence: 0.7585127

 $00:47:56.646 \longrightarrow 00:47:58.608$  be really useful to know to

00:47:58.608 --> 00:47:59.916 actually properly phenotype them.

NOTE Confidence: 0.834250916666667

 $00:48:03.300 \longrightarrow 00:48:05.022$  You know, I have a colleague here

NOTE Confidence: 0.834250916666667

 $00:48:05.022 \longrightarrow 00:48:07.754$  that has a a lot of interest in in

NOTE Confidence: 0.834250916666667

00:48:07.754 --> 00:48:09.440 diastolic dysfunction, you know,

NOTE Confidence: 0.834250916666667

00:48:09.440 --> 00:48:11.520 through the cardiology practice

NOTE Confidence: 0.834250916666667

00:48:11.520 --> 00:48:13.750 who you know would be interested in

NOTE Confidence: 0.834250916666667

 $00:48:13.750 \longrightarrow 00:48:15.879$  trying to tease this out a little bit.

NOTE Confidence: 0.834250916666667

 $00:48:15.880 \longrightarrow 00:48:17.888$  It would just be.

NOTE Confidence: 0.834250916666667

 $00{:}48{:}17.890 \dashrightarrow 00{:}48{:}23.189$  Difficult to do using routine clinical care.

NOTE Confidence: 0.834250916666667

 $00:48:23.190 \longrightarrow 00:48:30.355$  Uh. And I I don't foresee any.

NOTE Confidence: 0.834250916666667

 $00:48:30.355 \longrightarrow 00:48:32.830$  I'm not aware of any.

NOTE Confidence: 0.834250916666667

 $00:48:32.830 \longrightarrow 00:48:34.735$  Developing or ongoing studies that

NOTE Confidence: 0.834250916666667

 $00:48:34.735 \longrightarrow 00:48:37.448$  are trying to tease us out at all,

NOTE Confidence: 0.834250916666667

 $00:48:37.450 \longrightarrow 00:48:43.240$  but that is the goal to to be able to

NOTE Confidence: 0.834250916666667

 $00:48:43.240 \longrightarrow 00:48:48.120$  sort of establish a clear phenotype of of.

 $00:48:48.120 \longrightarrow 00:48:50.348$  Hypoxic and hypercapnic intermittently.

NOTE Confidence: 0.834250916666667

00:48:50.348 --> 00:48:52.576 Hypoxic intermittently hypercapnic OSA

NOTE Confidence: 0.834250916666667

 $00:48:52.576 \longrightarrow 00:48:55.670$  patient and seeing what the risk is for pH.

NOTE Confidence: 0.86696047

00:48:58.670 --> 00:49:01.270 Great. Thank you. Thank you, Cyrus.

NOTE Confidence: 0.77664826

 $00:49:01.270 \longrightarrow 00:49:02.740$  Claudia, you have the next question.

NOTE Confidence: 0.795783178

00:49:03.070 --> 00:49:04.038 Thank you, Andre. Cyrus,

NOTE Confidence: 0.795783178

 $00:49:04.038 \longrightarrow 00:49:05.490$  it's so good to see you.

NOTE Confidence: 0.795783178

00:49:05.490 --> 00:49:07.782 Thank you for an excellent and

NOTE Confidence: 0.795783178

 $00{:}49{:}07.782 \dashrightarrow 00{:}49{:}08.928$  very thoughtful presentation.

NOTE Confidence: 0.841242545

 $00:49:11.510 \longrightarrow 00:49:13.520$  SO22 questions, two comments, one is.

NOTE Confidence: 0.8414785325

 $00:49:15.710 \longrightarrow 00:49:18.230$  We in the field of Sleep Medicine too,

NOTE Confidence: 0.8414785325

 $00:49:18.230 \longrightarrow 00:49:20.854$  we are starting to better phenotype

NOTE Confidence: 0.8414785325

 $00:49:20.854 \longrightarrow 00:49:23.446$  our patients both with respect to

NOTE Confidence: 0.8414785325

00:49:23.446 --> 00:49:25.760 the physiologic sequelae of sleep

NOTE Confidence: 0.8414785325

 $00:49:25.760 \longrightarrow 00:49:28.055$  apnea and better understanding more

NOTE Confidence: 0.8414785325

 $00:49:28.055 \longrightarrow 00:49:30.278$  precise measures that may impact

 $00:49:30.278 \longrightarrow 00:49:32.343$  adverse health outcomes and for

NOTE Confidence: 0.8414785325

 $00{:}49{:}32.343 \dashrightarrow 00{:}49{:}34.236$  the development of sleep apnea.

NOTE Confidence: 0.8414785325

 $00:49:34.236 \longrightarrow 00:49:35.758$  And so one of those measures that

NOTE Confidence: 0.8414785325

 $00:49:35.758 \longrightarrow 00:49:38.166$  has risen to the top with respect

NOTE Confidence: 0.8414785325

 $00:49:38.166 \longrightarrow 00:49:40.597$  to the physiologic sequels as a

NOTE Confidence: 0.8414785325

 $00:49:40.597 \longrightarrow 00:49:42.668$  metric called the hypoxic burden.

NOTE Confidence: 0.8414785325

 $00:49:42.670 \longrightarrow 00:49:46.225$  So unlike the frequency or the T-90 this is.

NOTE Confidence: 0.8414785325

00:49:46.230 --> 00:49:49.550 A measure of hypoxia that is very specific

NOTE Confidence: 0.8414785325

 $00:49:49.550 \longrightarrow 00:49:56.560$  to that related to applic events and.

NOTE Confidence: 0.8414785325

 $00:49:56.560 \longrightarrow 00:49:58.632$  There have been a number of publications

NOTE Confidence: 0.8414785325

 $00:49:58.632 \longrightarrow 00:50:00.577$  now showing that this is a much

NOTE Confidence: 0.8414785325

 $00{:}50{:}00.577 \dashrightarrow 00{:}50{:}02.673$  better measure of cardiovascular risk.

NOTE Confidence: 0.8414785325

 $00{:}50{:}02.673 \dashrightarrow 00{:}50{:}05.040$  I was curious if one is it to your

NOTE Confidence: 0.8414785325

 $00{:}50{:}05.115 \dashrightarrow 00{:}50{:}06.933$  knowledge as it's been looked at

NOTE Confidence: 0.8414785325

 $00:50:06.933 \longrightarrow 00:50:09.873$  or is this at play in the field

00:50:09.873 --> 00:50:11.115 of pulmonary hypertension?

NOTE Confidence: 0.857057246666667

 $00:50:13.140 \longrightarrow 00:50:14.336$  Not to my knowledge.

NOTE Confidence: 0.857057246666667

 $00:50:14.336 \longrightarrow 00:50:16.700$  So you know I I think the the

NOTE Confidence: 0.857057246666667

00:50:16.700 --> 00:50:20.053 long term pick study is the best

NOTE Confidence: 0.857057246666667

 $00:50:20.053 \longrightarrow 00:50:23.890$  one of late that's. You know.

NOTE Confidence: 0.857057246666667

00:50:23.890 --> 00:50:25.954 Tried to tease this out and I don't

NOTE Confidence: 0.857057246666667

00:50:25.954 --> 00:50:27.709 think I've come across anything,

NOTE Confidence: 0.857057246666667

 $00{:}50{:}27.710 \dashrightarrow 00{:}50{:}30.504$  at least up until the end of 2022 when I

NOTE Confidence: 0.857057246666667

 $00:50:30.504 \dashrightarrow 00:50:33.770$  was doing my last searches that looked at.

NOTE Confidence: 0.857057246666667 00:50:33.770 --> 00:50:34.308 Predictive. NOTE Confidence: 0.857057246666667

 $00:50:34.308 \longrightarrow 00:50:38.612$  Parameters that are predictive of pH in OSA,

NOTE Confidence: 0.857057246666667

00:50:38.620 --> 00:50:40.748 apart from the study that I showed that

NOTE Confidence: 0.857057246666667

 $00:50:40.748 \longrightarrow 00:50:42.809$  looked at the Cleveland Clinic cohort

NOTE Confidence: 0.693623045

 $00{:}50{:}43.280 \dashrightarrow 00{:}50{:}48.350$ 90 and the exactly, exactly so.

NOTE Confidence: 0.78468576375

00:50:48.350 --> 00:50:53.262 Uh, but but a really good point now, is this

NOTE Confidence: 0.78468576375

 $00:50:53.262 \longrightarrow 00:50:56.118$  a parameter that is derived or measured?

 $00:50:57.210 \longrightarrow 00:50:58.434$  It is both.

NOTE Confidence: 0.865116868666667

 $00{:}50{:}58.434 \dashrightarrow 00{:}51{:}00.474$  It requires some sophistication and

NOTE Confidence: 0.865116868666667

 $00:51:00.474 \longrightarrow 00:51:03.098$  there's not ready for for prime time.

NOTE Confidence: 0.865116868666667

 $00:51:03.100 \longrightarrow 00:51:05.392$  It's not something we can automatically

NOTE Confidence: 0.865116868666667

 $00:51:05.392 \longrightarrow 00:51:07.190$  download on our clinical studies.

NOTE Confidence: 0.865116868666667

 $00:51:07.190 \longrightarrow 00:51:08.800$  So we can get proxy of that.

NOTE Confidence: 0.865116868666667

00:51:08.800 --> 00:51:11.194 But it's something actually the Harvard

NOTE Confidence: 0.865116868666667

 $00{:}51{:}11.194 \dashrightarrow 00{:}51{:}13.478$  group has developed and looked at

NOTE Confidence: 0.865116868666667

00:51:13.478 --> 00:51:15.648 it in a number of cohorts including

NOTE Confidence: 0.865116868666667

 $00:51:15.648 \longrightarrow 00:51:18.614$  the Maza cohorts and some other sort

NOTE Confidence: 0.865116868666667

 $00:51:18.614 \longrightarrow 00:51:20.338$  of national cardiovascular cohorts.

NOTE Confidence: 0.865116868666667

 $00:51:20.340 \longrightarrow 00:51:24.060$  It'd be interesting to examine that in the

NOTE Confidence: 0.865116868666667

 $00{:}51{:}24.060 \dashrightarrow 00{:}51{:}27.120$  context of pH because I think you know.

NOTE Confidence: 0.865116868666667

00:51:27.120 --> 00:51:30.802 Measures like the AI and T-90 may

NOTE Confidence: 0.865116868666667

 $00:51:30.802 \longrightarrow 00:51:33.266$  not be deriving some of the risk

 $00:51:33.266 \longrightarrow 00:51:35.510$  and we obviously hypoxemia is

NOTE Confidence: 0.865116868666667

00:51:35.510 --> 00:51:38.408 a maybe a central driver here.

NOTE Confidence: 0.865116868666667

00:51:38.410 --> 00:51:40.198 Yeah, yeah, absolutely have potential.

NOTE Confidence: 0.865116868666667

00:51:40.198 --> 00:51:42.382 The other comment question is that

NOTE Confidence: 0.865116868666667

 $00:51:42.382 \longrightarrow 00:51:45.203$  one of the things that our group has

NOTE Confidence: 0.865116868666667

00:51:45.203 --> 00:51:47.200 been interested in more recently.

NOTE Confidence: 0.865116868666667

 $00:51:47.200 \longrightarrow 00:51:49.438$  And and we've started to establish

NOTE Confidence: 0.865116868666667

 $00:51:49.438 \longrightarrow 00:51:51.300$  this link by the way,

NOTE Confidence: 0.865116868666667

00:51:51.300 --> 00:51:53.598 diabetology is my new favorite word.

NOTE Confidence: 0.865116868666667

00:51:53.600 --> 00:51:55.576 I haven't heard for your present day

NOTE Confidence: 0.865116868666667

 $00{:}51{:}55.576 \dashrightarrow 00{:}51{:}57.904$  is it diabetology or diastole a pathy?

NOTE Confidence: 0.6200703198

 $00:51:58.240 \longrightarrow 00:51:59.920$  I use diabetology just

NOTE Confidence: 0.6200703198

 $00:51:59.920 \longrightarrow 00:52:02.440$  and I it's now a reflex.

NOTE Confidence: 0.6200703198

 $00:52:02.440 \longrightarrow 00:52:04.520$  So I try not to do it when

NOTE Confidence: 0.6200703198

00:52:04.520 --> 00:52:07.100 I'm in you know informally,

NOTE Confidence: 0.6200703198

 $00:52:07.100 \longrightarrow 00:52:09.968$  but it's yeah. Anyway

 $00:52:10.060 \longrightarrow 00:52:12.932$  love the word and but one of the

NOTE Confidence: 0.853887991

 $00{:}52{:}12.932 \dashrightarrow 00{:}52{:}15.490$  mechanisms that we've been looking at

NOTE Confidence: 0.853887991

 $00:52:15.490 \longrightarrow 00:52:18.136$  and this link between sleep disorder.

NOTE Confidence: 0.853887991

 $00:52:18.140 \longrightarrow 00:52:20.021$  Breathing and die.

NOTE Confidence: 0.853887991

00:52:20.021 --> 00:52:23.156 Astrology or diastole apathy is

NOTE Confidence: 0.853887991

 $00:52:23.156 \longrightarrow 00:52:25.281$  through coronary microvascular

NOTE Confidence: 0.853887991

00:52:25.281 --> 00:52:28.336 dysfunction and which is something

NOTE Confidence: 0.853887991

00:52:28.336 --> 00:52:32.777 we can look at now with pet imaging

NOTE Confidence: 0.853887991

 $00:52:32.777 \longrightarrow 00:52:35.627$  or at least proxies of that.

NOTE Confidence: 0.853887991

 $00:52:35.630 \longrightarrow 00:52:38.000$  And so beyond just the left

NOTE Confidence: 0.853887991

 $00:52:38.000 \longrightarrow 00:52:39.580$  atrial enlargement and atrial

NOTE Confidence: 0.853887991

 $00:52:39.653 \longrightarrow 00:52:42.218$  fibrillation that you were measuring,

NOTE Confidence: 0.853887991

 $00{:}52{:}42.220 \dashrightarrow 00{:}52{:}44.770$  this could be another plausible

NOTE Confidence: 0.853887991

 $00:52:44.770 \longrightarrow 00:52:48.556$  mechanistic way between sleep apnea and.

NOTE Confidence: 0.853887991

 $00:52:48.560 \longrightarrow 00:52:49.300$  And diastolic.

00:52:49.310 --> 00:52:52.556 Yeah, that I'm more familiar with.

NOTE Confidence: 0.782576298333333

00:52:52.560 --> 00:52:54.378 There's sort of like a, you know,

NOTE Confidence: 0.782576298333333

 $00:52:54.378 \longrightarrow 00:52:56.052$  there's a just like there's a

NOTE Confidence: 0.782576298333333

 $00:52:56.052 \longrightarrow 00:52:57.551$  fractal pattern that we see

NOTE Confidence: 0.782576298333333

 $00:52:57.551 \longrightarrow 00:52:58.739$  in the pulmonary circulation,

NOTE Confidence: 0.782576298333333

 $00:52:58.740 \longrightarrow 00:53:00.876$  there's a fractal pattern in the

NOTE Confidence: 0.782576298333333

 $00:53:00.876 \longrightarrow 00:53:02.300$  myocardial circulation that gets

NOTE Confidence: 0.782576298333333

 $00:53:02.364 \longrightarrow 00:53:04.449$  obliterated in certain disease states.

NOTE Confidence: 0.782576298333333

00:53:04.450 --> 00:53:06.774 And I wouldn't be surprised if that

NOTE Confidence: 0.782576298333333

 $00:53:06.774 \longrightarrow 00:53:09.536$  happened in in the in the setting of

NOTE Confidence: 0.782576298333333

00:53:09.536 --> 00:53:11.830 OSA like you're implying that it does.

NOTE Confidence: 0.782576298333333

 $00:53:11.830 \longrightarrow 00:53:13.174$  Sounds good. Great talk.

NOTE Confidence: 0.782576298333333

 $00:53:13.174 \longrightarrow 00:53:13.846$  Thank you.

NOTE Confidence: 0.825643748333333

 $00:53:14.670 \longrightarrow 00:53:16.290$  Yeah, this is, this is great.

NOTE Confidence: 0.825643748333333

 $00:53:16.290 \longrightarrow 00:53:18.486$  Thanks for the good questions Clark.

NOTE Confidence: 0.825643748333333

 $00{:}53{:}18.490 \dashrightarrow 00{:}53{:}20.162$  So I might I wanted to ask a

 $00{:}53{:}20.162 \dashrightarrow 00{:}53{:}21.918$  question you know are are there

NOTE Confidence: 0.825643748333333

 $00{:}53{:}21.918 \dashrightarrow 00{:}53{:}23.202$  physiological studies looking at

NOTE Confidence: 0.825643748333333

00:53:23.202 --> 00:53:25.125 people with pH and sleep apnea and

NOTE Confidence: 0.825643748333333

 $00:53:25.125 \longrightarrow 00:53:26.850$  what happens to them when they're on,

NOTE Confidence: 0.825643748333333

 $00:53:26.850 \longrightarrow 00:53:29.485$  when they get pap like in the lab with a

NOTE Confidence: 0.825643748333333

00:53:29.485 --> 00:53:31.480 catheter in place that you're aware of?

NOTE Confidence: 0.32607538

 $00:53:32.890 \longrightarrow 00:53:39.020$  Umm. And I I've looked so.

NOTE Confidence: 0.32607538

 $00:53:39.020 \longrightarrow 00:53:42.156$  And I would love to that would be great.

NOTE Confidence: 0.32607538

 $00:53:42.156 \longrightarrow 00:53:44.787$  But the that one in the 70s

NOTE Confidence: 0.32607538

00:53:44.787 --> 00:53:46.917 I I wish they had applied.

NOTE Confidence: 0.32607538

 $00:53:46.920 \longrightarrow 00:53:48.910$  Yeah at the time like that. Well

NOTE Confidence: 0.776556739

 $00:53:48.950 \longrightarrow 00:53:51.726$  you know because we do have a new

NOTE Confidence: 0.776556739

 $00:53:51.726 \longrightarrow 00:53:54.475$  biobehavioral lab that Clare Clare

NOTE Confidence: 0.776556739

 $00{:}53{:}54.475 \dashrightarrow 00{:}53{:}57.335$  has has Co leading and so this might

NOTE Confidence: 0.776556739

 $00:53:57.335 \longrightarrow 00:53:59.600$  be a nice nice way to actually have

 $00:53:59.600 \longrightarrow 00:54:01.436$  some some you know our pulmonary

NOTE Confidence: 0.776556739

 $00:54:01.436 \longrightarrow 00:54:02.660$  hypertension group folks right

NOTE Confidence: 0.802660767

00:54:03.620 --> 00:54:04.456 that's low hanging fruit

NOTE Confidence: 0.802660767

 $00:54:04.456 \longrightarrow 00:54:05.710$  if you guys can do that.

NOTE Confidence: 0.846810849411765

 $00:54:06.440 \longrightarrow 00:54:08.320$  Yeah. And and so it might be a

NOTE Confidence: 0.846810849411765

 $00:54:08.320 \longrightarrow 00:54:09.745$  a very interesting mechanistic

NOTE Confidence: 0.846810849411765

 $00:54:09.745 \longrightarrow 00:54:11.970$  study to look at because.

NOTE Confidence: 0.846810849411765

00:54:11.970 --> 00:54:13.978 You know, there's nothing,

NOTE Confidence: 0.846810849411765

 $00{:}54{:}13.978 \dashrightarrow 00{:}54{:}15.795$  nothing better than looking

NOTE Confidence: 0.846810849411765

 $00:54:15.795 \longrightarrow 00:54:17.625$  at what happens in real time

NOTE Confidence: 0.846810849411765

 $00:54:17.625 \longrightarrow 00:54:18.540$  for these physiological

NOTE Confidence: 0.767272578263158

00:54:18.550 --> 00:54:20.026 studies, especially if you're

NOTE Confidence: 0.767272578263158

 $00{:}54{:}20.026 \dashrightarrow 00{:}54{:}21.502$  getting a relatively clean

NOTE Confidence: 0.767272578263158

 $00:54:21.502 \longrightarrow 00:54:23.467$  patient that doesn't have a lot

NOTE Confidence: 0.767272578263158

 $00:54:23.467 \longrightarrow 00:54:24.922$  of combat conditions that are,

NOTE Confidence: 0.767272578263158

 $00{:}54{:}24.930 \dashrightarrow 00{:}54{:}28.430$  you know, have frankly developed.

 $00:54:28.430 \longrightarrow 00:54:29.822$  Um, that'd be fantastic.

NOTE Confidence: 0.767272578263158

 $00:54:29.822 \longrightarrow 00:54:32.210$  But it it would just be it.

NOTE Confidence: 0.767272578263158

 $00:54:32.210 \longrightarrow 00:54:33.298$  It'd be, you know.

NOTE Confidence: 0.877763865

 $00:54:36.240 \longrightarrow 00:54:38.136$  I mean, yeah, go ahead.

NOTE Confidence: 0.877763865

 $00{:}54{:}38.136 \dashrightarrow 00{:}54{:}39.620$  I mean even even for those with

NOTE Confidence: 0.851992766923077

00:54:39.670 --> 00:54:41.380 diastolic dysfunction or, you know,

NOTE Confidence: 0.851992766923077

00:54:41.380 --> 00:54:43.072 have that, for example, you know,

NOTE Confidence: 0.851992766923077

 $00:54:43.072 \longrightarrow 00:54:44.740$  you have an acute change in.

NOTE Confidence: 0.851992766923077

 $00{:}54{:}44.740 \dashrightarrow 00{:}54{:}47.332$  Absolutely. And and treatment and

NOTE Confidence: 0.851992766923077

 $00:54:47.332 \longrightarrow 00:54:48.820$  so that that's just one thought.

NOTE Confidence: 0.851992766923077

 $00:54:48.820 \longrightarrow 00:54:50.205 \text{ I}$  was wondering whether that's

NOTE Confidence: 0.851992766923077

 $00:54:50.205 \longrightarrow 00:54:52.146$  happened before and so and also for

NOTE Confidence: 0.851992766923077

 $00{:}54{:}52.146 \to 00{:}54{:}54.470$  the case that you presented kudos for

NOTE Confidence: 0.851992766923077

 $00:54:54.470 \longrightarrow 00:54:58.215$  for sticking to your guns and not.

NOTE Confidence: 0.851992766923077

 $00:54:58.220 \longrightarrow 00:55:00.089$  Now get back to phase dilator therapy.

 $00:55:02.370 \longrightarrow 00:55:03.552$  That it's a it's interesting I

NOTE Confidence: 0.7420131935

00:55:03.552 --> 00:55:05.118 mean it's sort of hard you may not

NOTE Confidence: 0.7420131935

 $00:55:05.118 \longrightarrow 00:55:06.300$  for a lot of these patients. I

NOTE Confidence: 0.911725923636364

 $00:55:06.310 \longrightarrow 00:55:07.696$  wonder if we may not be

NOTE Confidence: 0.911725923636364

00:55:07.696 --> 00:55:08.890 able to dissect you know

NOTE Confidence: 0.95451569

 $00:55:08.900 \longrightarrow 00:55:12.392$  how much of this is sleep apnea how

NOTE Confidence: 0.95451569

00:55:12.392 --> 00:55:14.524 much of this is you know obesity and

NOTE Confidence: 0.95451569

 $00:55:14.524 \longrightarrow 00:55:16.390$  diastolic and have death type situation

NOTE Confidence: 0.95451569

 $00:55:16.390 \longrightarrow 00:55:19.195$  because often times I mean they they

NOTE Confidence: 0.95451569

 $00:55:19.195 \longrightarrow 00:55:21.020$  just comes this together right.

NOTE Confidence: 0.84862763

 $00:55:21.030 \longrightarrow 00:55:24.018$  Yeah you know in that case what I was

NOTE Confidence: 0.84862763

 $00:55:24.018 \longrightarrow 00:55:26.246$  able to do with risk calculators for pH

NOTE Confidence: 0.84862763

 $00:55:26.246 \longrightarrow 00:55:28.259$  and I was able to demonstrate that her,

NOTE Confidence: 0.84862763

00:55:28.260 --> 00:55:30.030 her risk wasn't dramatically high

NOTE Confidence: 0.84862763

 $00:55:30.030 \longrightarrow 00:55:32.580$  and you know with her functional.

NOTE Confidence: 0.84862763

 $00:55:32.580 \longrightarrow 00:55:34.502$  At us being what it was. Yeah.

 $00:55:34.502 \longrightarrow 00:55:35.830$  People felt comfortable discharged

NOTE Confidence: 0.84862763

 $00:55:35.830 \longrightarrow 00:55:37.801$  because I was a consultant, right.

NOTE Confidence: 0.84862763

00:55:37.801 --> 00:55:39.978 Like they they I wasn't making the

NOTE Confidence: 0.84862763

 $00:55:39.978 \longrightarrow 00:55:42.507$  call on her leaving the medical ward.

NOTE Confidence: 0.84862763

 $00:55:42.510 \longrightarrow 00:55:46.848$  But I think people saw her walking around and

NOTE Confidence: 0.84862763

00:55:46.850 --> 00:55:49.050 lots of very good and they said OK you know,

NOTE Confidence: 0.84862763

 $00:55:49.050 \longrightarrow 00:55:51.570$  as long as she's got follow up and uses the

NOTE Confidence: 0.84862763

00:55:51.635 --> 00:55:54.054 mask and it's on you then then go right

NOTE Confidence: 0.787100874

00:55:54.070 --> 00:55:57.490 ahead. So. So all right, sounds good.

NOTE Confidence: 0.787100874

 $00:55:57.490 \longrightarrow 00:55:59.835$  And so here's a clinical question unless

NOTE Confidence: 0.787100874

 $00:55:59.835 \longrightarrow 00:56:01.651$  let's see are there any questions

NOTE Confidence: 0.787100874

 $00:56:01.651 \longrightarrow 00:56:03.609$  down in the chat? Not quite yet.

NOTE Confidence: 0.787100874

 $00{:}56{:}03.609 \dashrightarrow 00{:}56{:}05.246$  And so I guess the clinical

NOTE Confidence: 0.787100874

 $00:56:05.246 \longrightarrow 00:56:06.990$  question is when you see patients

NOTE Confidence: 0.787100874

 $00.56.06.990 \longrightarrow 00.56.09.389$  with pH who are at risk for OSA,

 $00:56:09.390 \longrightarrow 00:56:11.196$  do you send them to sleep docs in

NOTE Confidence: 0.787100874

 $00{:}56{:}11.196 {\:{\circ}{\circ}{\circ}}>00{:}56{:}12.700$  hopes of improving their pH or you

NOTE Confidence: 0.787100874

 $00:56:12.700 \longrightarrow 00:56:14.329$  just send them to sleep docs because

NOTE Confidence: 0.787100874

00:56:14.329 --> 00:56:15.799 they should see a sleep period?

NOTE Confidence: 0.84508714

00:56:17.700 --> 00:56:20.176 Mostly the latter. I mean, I just,

NOTE Confidence: 0.84508714

00:56:20.176 --> 00:56:25.420 you know, I care most about. Uh.

NOTE Confidence: 0.84508714

00:56:25.420 --> 00:56:27.394 The data would suggest that the big

NOTE Confidence: 0.84508714

00:56:27.394 --> 00:56:28.946 drivers are the nocturnal hypoxemia

NOTE Confidence: 0.84508714

 $00:56:28.946 \longrightarrow 00:56:31.514$  and so as long as that gets addressed,

NOTE Confidence: 0.84508714

 $00:56:31.520 \longrightarrow 00:56:36.984$  I feel good. But there's no way that.

NOTE Confidence: 0.84508714

 $00:56:36.990 \longrightarrow 00:56:39.202$  Apnic and obstructive episodes

NOTE Confidence: 0.84508714

 $00:56:39.202 \longrightarrow 00:56:44.318$  are good, and so I.

NOTE Confidence: 0.84508714

 $00{:}56{:}44.320 \dashrightarrow 00{:}56{:}47.880$  I sent them for for both reasons.

NOTE Confidence: 0.84508714

 $00:56:47.880 \longrightarrow 00:56:49.760$  And I feel fairly comfortable

NOTE Confidence: 0.84508714

 $00:56:49.760 \longrightarrow 00:56:51.640$  reading them the riot act.

NOTE Confidence: 0.84508714

 $00:56:51.640 \longrightarrow 00:56:53.020$  And if they, you know,

00:56:53.020 --> 00:56:54.964 trust you when it comes to managing their pH,

NOTE Confidence: 0.84508714

 $00{:}56{:}54.970 \dashrightarrow 00{:}56{:}55.978$  then they'll, they'll listen to you.

NOTE Confidence: 0.84508714

 $00:56:55.980 \longrightarrow 00:56:58.206$  When it comes to sort of the

NOTE Confidence: 0.84508714

00:56:58.206 --> 00:56:59.460 consequences of untreated OSA,

NOTE Confidence: 0.84508714

 $00:56:59.460 \longrightarrow 00:57:01.540$  I do have a handful of patients that

NOTE Confidence: 0.84508714

00:57:01.540 --> 00:57:03.288 just can't tolerate PAP therapy,

NOTE Confidence: 0.84508714

 $00:57:03.290 \longrightarrow 00:57:04.616$  but they've all made an effort.

NOTE Confidence: 0.809980507

 $00:57:08.660 \longrightarrow 00:57:11.850$  And I I I hold the record for a for.

NOTE Confidence: 0.809980507

 $00{:}57{:}11.850 \dashrightarrow 00{:}57{:}13.770$  The highest fraction of patients

NOTE Confidence: 0.809980507

 $00{:}57{:}13.770 \dashrightarrow 00{:}57{:}16.025$  referred to the Sleep Lab with

NOTE Confidence: 0.809980507

 $00:57:16.025 \longrightarrow 00:57:17.960$  BMI is less than 30 because of.

NOTE Confidence: 0.935295006

 $00:57:21.100 \longrightarrow 00:57:22.356$  Very good, very good.

NOTE Confidence: 0.935295006

 $00{:}57{:}22.356 \dashrightarrow 00{:}57{:}23.720$  Alright, well, thank you so much.

NOTE Confidence: 0.935295006

 $00:57:23.720 \longrightarrow 00:57:28.580$  Great talk, very important area and.

NOTE Confidence: 0.935295006

 $00:57:28.580 \longrightarrow 00:57:29.270$  Good discussion.

 $00:57:29.270 \longrightarrow 00:57:30.995$  Good to see you everybody.

NOTE Confidence: 0.935295006

 $00:57:31.000 \longrightarrow 00:57:31.864$  And we are gonna,

NOTE Confidence: 0.935295006

00:57:31.864 --> 00:57:33.527 most of us are going to head

NOTE Confidence: 0.935295006

00:57:33.527 --> 00:57:35.057 over to the pulmonary critical

NOTE Confidence: 0.935295006

 $00{:}57{:}35.057 \dashrightarrow 00{:}57{:}36.710$  care and sleep messing around.

NOTE Confidence: 0.935295006

 $00:57:36.710 \longrightarrow 00:57:38.230$  And so we'll see you next week everyone.

NOTE Confidence: 0.935295006

 $00:57:38.230 \longrightarrow 00:57:39.610$  Thanks very much for participating.

NOTE Confidence: 0.935295006

 $00:57:39.800 \longrightarrow 00:57:40.650$  Take care.