

Hypertension and Sleep

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High Blood Pressure: The Silent Killer

High blood pressure (medically known as Hypertension) earned its nickname as the silent killer because there are no symptoms. According to the American Heart Association, over 50 million Americans have high blood pressure. Many people go about their daily activities not knowing they have it.

Although there are no symptoms for high blood pressure, there is a strong correlation between drug resistant hypertension (requiring two or more prescriptions to manage) and obstructive sleep apnea. On average, out of 100 people with drug resistant hypertension, 80 will have obstructive sleep apnea. Even patients who are diagnosed with new onset hypertension should be screened for sleep apnea (see Dr Whitney's article below).

If you are someone (or know someone) with high blood pressure, please take a minute to take the seven question screening test at the bottom of this page. If you are a candidate to be further evaluated for a sleep disorder, talk with your healthcare provider who can refer you to be seen locally by a sleep specialist.

A Message From Dr. Whitney By Dr Courtney Whitney, Board Certified Sleep Physician, Owner, Medical Director WSDC

Hypertension affects over 50 million Americans. Effective treatment of hypertension reduces the risk of stroke by 45%, heart attack by 25% and congestive heart failure by 50%. It is dangerous to ignore elevations in blood pressure. Historically, those with a high blood pressure would be prescribed just medications. Many of them would take multiple medications in attempts to control blood pressure elevations. Now many of my patients are appreciating a better night's sleep and reduction in blood pressure with CPAP therapy. The Joint National Committee on prevention, detection, evaluation and treatment of hypertension, declared in the most recent report that sleep apnea causes high blood pressure. The committee has recommended that all patients with high blood pressure should be evaluated for possible sleep apnea. Your blood pressure is considered normal if it is less than 120/80. Your blood pressure is considered in the borderline range if it is between 120-139/80-89. You have full-blown high blood pressure if you're greater than 139/89.

If your blood pressure is elevated and you snore, there is a good chance you have sleep apnea. In conjunction with medication treatment it is wise to seek an evaluation of your sleep to rule out obstructive sleep apnea. In doing so it is likely that with treatment you will have a reduction in blood pressure, and subsequently appreciate a reduction in vascular disease, renal failure and congestive heart failure. When CPAP is chosen as a treatment option, studies have shown that the best results occur after an average of 5-1/2 hours a night on CPAP. The majority of the patient's I see with obstructive sleep apnea have already suffered from these adverse outcomes (vascular disease, kidney disease, stroke or heart disease). Don't wait, be proactive and discuss your sleep with your Doctor.

Do you Think You Might Have A Sleep Disorder?

Yes No

- Do you snore?
- Are you excessively tired during the day?
- Have you been told you stop breathing during sleep?
- Do you have a history of hypertension?
- Is your neck size > 17 inches (male) or > 16 inches (female)?
- Do you wake up to use the bathroom more than twice a night?
- Have you ever fallen asleep while driving?

Answering "yes" to two (or more) of these questions may be a positive screen for Obstructive Sleep Apnea. Patient should consider talking with their Health Care Provider about a referral for a sleep evaluation.

We Can Help!

Discover real solutions to your sleep problems by talking with your Health Care Provider about a sleep study at:

Hypertension and Sleep

Will a New Mattress or Pillow Help?

Seems like every day we hear of a new mattress or pillow that can help with snoring and sleep apnea. Is that all it takes to cure sleep apnea? Hardly. Let's take a look at what happens to cause an apnea (as it applies to Obstructive Sleep Apnea). During an apnea, the muscles in the airway relax to the point where air cannot pass. Even though the sleeper is attempting to breathe, the airway is blocked. While not breathing, the sleeper's heart rate and blood oxygen level decline to the point where the body must react and arouse the sleeper from the apnea. It is after these arousals that the heart has to work harder than it should during sleep to bring the blood oxygen level back to normal (thus putting the sleeper at a higher risk for heart related conditions like hypertension). So, while a pillow that helps keep the neck / airway straight and not kinked or a mattress that elevates the sleeper's head can improve the quality of sleep and possibly help quiet snoring or reduce some apneas; it is the muscles in the throat that determine whether the airway can remain open during sleep.

CPAP Talk By Susan Gunwall, LPN, WSDC Clinical Coordinator and Director of Operations

How Often Should I Replace My Supplies?

Item	HCPSC Code	Replacement Schedule
Full Face Mask	A7030	90 days
Full Face Cushion	A7031	30 days
Nasal Cushion	A7032	30 days
Replacement Pillow	A7033	30 days
CPAP Mask	A7034	90 days
CPAP Headgear	A7035	180 days
CPAP Chinstrap	A7036	180 days
CPAP Tubing	A7037	30 days
Disposable Filter	A7038	30 days
Filters	A7039	180 days
Oral Interface	A7044	90 days
Heated Humidifier	E0562	5 Years
CPAP Machine	E0601	5 Years

We are asked this question by patients every day! How long various CPAP supplies should last isn't always apparent to the CPAP user. The table on the left outlines the replacement schedule as put forth by the Centers for Medicare and Medicaid Services. This is a guideline only--your replacement level will vary depending on the care of your CPAP accessories and other variables. If you have further questions or supply needs please contact one of our clinical specialists at (877) 844-6150.

Continuous
Positive
Airway
Pressure
CPAP therapy is a painless, non-invasive way to treat Obstructive Sleep Apnea (OSA)

Sleep Fact:

It is estimated that one in five adults have sleep disordered breathing. Up to 80% of these are unaware of their condition and remain undiagnosed and untreated

About Whitney Sleep Diagnostics & Consultants

Founded in 2008, Whitney Sleep Diagnostics & Consultants (WSDC) was created to serve patients living in areas where access to comprehensive sleep medicine has not been available. WSDC is owned and operated by Dr. Courtney Whitney, who is Board Certified in Sleep Medicine.

Instead of making patients drive to the next larger town, or settling for diagnostic-only sleep testing services, we partner with hospitals in smaller towns to provide the same level of sleep medicine care that would be found in a major metro market.

Hospitals that partner with WSDC, are able to offer a high quality, AASM accredited sleep medicine program to their patients right at their home town hospital. WSDC diagnoses and treats all 84 known sleep disorders. **If you are reading this in a waiting room or clinic lobby, your hospital partners with WSDC.**

Patients who feel they may have a sleep disorder are encouraged to talk to their healthcare provider about their symptoms. A simple one page screening form can often help determine the need for an overnight sleep study.

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