

Stroke and Sleep

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May is National Stroke Awareness Month

Each year nearly 800,000 Americans will suffer a stroke. Of these, nearly 140,000 will die.

A stroke, which is sometimes called a "brain attack" occurs when a blood clot blocks an artery or when a blood vessel breaks and interrupts blood flow to an area of the brain. When either of these things happen, brain cells begin to die and brain damage occurs.

So what do stroke awareness and sleep disorders have in common? It turns out two of the main risk factors for stroke are also risk factors for obstructive sleep apnea. High Blood Pressure and Atrial Fibrillation (AF) are two of the leading causes for stroke. These two conditions are also prevalent in people with sleep apnea. In fact, stroke itself is one of the leading indicators that a person has sleep apnea (statistically, nearly 50% of people who have a stroke will have sleep apnea).

Researchers from the Sleep Heart Health Study (SHHS) report that the risk of stroke appears in men with mild sleep apnea and rises with the severity of sleep apnea. Men with moderate to severe sleep apnea were nearly three times more likely to have a stroke than men without sleep apnea or with mild sleep apnea. The risk from sleep apnea is independent of other risk factors such as weight, high blood pressure, race, smoking, and diabetes.

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

Studies have shown much higher rates of stroke in patients with obstructive sleep apnea. It has been reported that 50% of those suffering from stroke have sleep apnea. In 2006, 795,000 Americans suffered a stroke which resulted in 137,000 deaths--making stroke the third leading cause of death in the U.S. Those who survive are often compromised by disability. We need to be proactive in identifying and treating risk factors for stroke. Many of the readers are aware of high blood pressure, smoking and high cholesterol as risk factors. However, many are not aware of obstructive sleep apnea as an important risk factor as well. We know obstructive sleep apnea increases blood pressure, vascular inflammation and blood clotting, with an associated decrease in blood flow to the brain. Repeated insults in the presence of sleep apnea over time lead to permanent changes that may lead to the formation of a blood clot or a blood vessel rupture, and this compromise in blood flow can lead to brain injury that results in death or impairment. If you or someone you know has suffered a stroke or a TIA (a brief, reversible stroke), be sure they discuss their sleep history with their physician. Classic symptoms of sleep apnea include fragmented sleep, snoring, and daytime sleepiness. Most patients suffering from sleep apnea are not aware of these compromises in their breathing during sleep. On occasion, an overnight oximetry may be an excellent and inexpensive obstructive sleep apnea screening tool. An overnight sleep study is necessary for the diagnosis.

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

The Whitney Wire

The Quarterly Sleep Medicine Newsletter From Your Friends at Whitney Sleep Diagnostics & Consultants (WSDC)

Roger's Story

Roger is a 72 year old Minnesota man. When he was 68, he was enjoying a trip to Texas with his wife, when he suffered a stroke. The resulting effects of his stroke include greatly reduced vision, dizziness and loss of balance, as well as memory impairment. He receives in home care most days and attends an adult day care four days a week.

A little over a year after his stroke, Roger had a sleep study. His snoring had always been a nuisance, but was not thought to be a real health threat. During his sleep study, it was determined that Roger had obstructive sleep apnea (he stopped breathing an average of 27 times an hour). He is now on CPAP therapy, which has helped him (and his wife) get more restful sleep, but has not reversed the effects of his stroke. No one can know if his stroke would have been avoided if he had his sleep apnea treated years earlier, but with the information available on the connection between sleep apnea and stroke, it sure does make one wonder.

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

CPAP Compliance the Key to Better Health

So you or someone you know has been diagnosed with sleep apnea—now what? One of the most important factors for a person just starting on CPAP therapy is understanding how CPAP therapy works, and the potential benefits to a person's quality of life. Unfortunately, many new CPAP patients are not provided quality information about the relevance of sleep apnea as it applies to their overall health profile, or why successful treatment of their sleep apnea is so important. Moreover, CPAP patients are often unsure of the expectation for their treatment, how CPAP equipment works, and where to turn with their questions. With knowledgeable providers spotty within the industry, it is understandable why some CPAP patients become frustrated and stop using CPAP therapy. But overall understanding and knowledge are the keys to success. When in doubt, CPAP patients should ask their doctors and health care providers, or contact their hospital's sleep medicine partner, Whitney Sleep, for answers. While information alone will not necessarily provide a better experience, it will provide a better understanding which leads to better compliance / outcomes. Whitney Sleep Therapeutic's team of clinical experts is available to assist you with your CPAP therapy. Our goal is to raise your compliance levels by resolving your CPAP or supply issues, providing ongoing education, and addressing questions or concerns relative to your therapy. One of our clinical specialists will be available 8 a.m. – 5:00 p.m. Monday – Friday or by special appointment, contact us 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

Whitney Sleep Diagnostics & Consultants

119 Graystone Plaza Suite 102
Detroit Lakes, MN 56501

877-844-6150

info@whitneysleepcenter.com

www.whitneysleep.com

About Whitney Sleep Diagnostics & Consultants

Created by Dr. Courtney Whitney of the Whitney Sleep Center in Plymouth, MN, Whitney Sleep Diagnostics & Consultants (WSDC) serves the sleep medicine needs of Hospitals in less populated areas.

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

Partnering hospitals will soon provide quarterly CPAP clinics where CPAP users can bring their equipment to be inspected and obtain replacement CPAP accessories as needed. If you are in need of CPAP accessories, give us a call at 877-844-6150.