## COMMENTARY: SENIORS SLEEP CAMPAIGN

By Laura Linley, CRT, RST, RPSGT, Director at Large AAST

t least 12-18 million Americans with obstructive sleep Aapnea (OSA) remaining untreated. This is in part due to the lack of patient awareness and lack of sleep illness screening. This is concerning as untreated OSA puts our senior population as risk of having hypertension, heart disease, type 2 diabetes and stroke.

Adopted in 2003, the Welcome to Medicare benefit allows individuals entering the Medicare program to receive an initial preventive physical examination and other screening services without a copayment. Essentially these seniors receive a complimentary evaluation and management (E/M) appointment. This E/M will include history, examination, counseling and screenings. This is a perfect opportunity to add OSA risk assessment to this appointment. The American Academy of Sleep Medicine (AASM) supports a bill to congress to add OSA screening to this Welcome to Medicare benefit. Information on this campaign can be found on the Seniors Sleep Campaign page of the AASM website.

Sleep assessment is easy. By simply recognizing the indicators and using a clinically validated questionnaire, such as STOP-Bang or Berlin, you can be confident that screening for OSA is appropriate. A yes to two or more of these questions then the patient is ranked as being at high risk for obstructive sleep apnea (OSA)

S: Do you *snore* loudly?

T: Do you often feel *tired*, fatigued or sleepy during daytime?

O: Has anyone *observed* you stop breathing during sleep?

P: Do you have or are you being treated for high blood *pressure?* 

Indications to look for when obtaining the history include family history of OSA, smoking, depression and/or complaints of daytime sleepiness and a sleep history. If the examination shows obesity and high blood pressure, a sleep evaluation is indicated. According to research done by the National Institutes of Health (NIH), 80 percent of adults who do not respond to blood pressure medications have OSA. Finally if a senior is being screened for diabetes it is imperative to take the conversation further and ask about their sleep. OSA has been shown to be



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independently associated with glucose intolerance and insulin resistance. Seventy-five percent of adults with type 2 diabetes have OSA. It is also important to screen for OSA in patients both diagnosed with and suspected of having heart disease. OSA increases an individual's overall risk of cardiovascular morality by five times.

Sleep is a cornerstone to our senior's overall wellness and quality of life. It affects everything from weight, health complications, energy and mood. Managing health concerns in patients will become easier if underlying OSA is recognized and treated. The AASM's Seniors Sleep Pledge is a national program that helps sleep professionals build relationships with legislators and strengthen the awareness of the Seniors Sleep bill. The program includes over 10 ways to get involved. Through the Pledge, the AASM secured a Senator to sponsor the bill. Your involvement will build congressional support for the legislation and help the AASM recruit additional sponsors. Join the Seniors Sleep Campaign and sign the Seniors Sleep Pledge today. ❖



The role of technologists is expanding and becoming more clinical

The role of PGST's is expanding. Many clinical tasks such as DME disbursement, compliance monitoring, sleep hygiene training, patient education, and much more, are now being shifted to experienced technologists. Technologists in other fields such as Neurodiagnostics, Nursing, and Respiratory Care also work with sleep disorder patients and fulfill these duties.

Oregon Tech is again in the forefront of providing online academic programs to meet the required educational preparation for the field of sleep. Contact us to learn how you can become a Certified Clinical Sleep Health (CCSH) professional.

Certificate and Associate degree programs available Fall 2014, and students can start programs any term.

Current licensure in a medically related field and employment in a facility that treats patients with sleep disorders is required for entrance into the Clinical Sleep Health professional program.

## For more information:

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