

# THE SOUND SLEEPER

The quarterly newsletter of the Sleep Apnea Patient Support Group of Central Contra Costa County  
~ our 17<sup>th</sup> year ~

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## THE SOUND SLEEPER

The "Sound Sleeper" is the newsletter of the Central Contra Costa County Sleep Apnea Patient Support Group founded in 1994. The name "Sound Sleeper" comes from the euphoric sensation of awaking from a sound night's sleep once Sleep Apnea treatment has commenced. It is available as a .pdf document via e-mail. To be placed on the e-mailing list send your request to "Amy" at: [contracostasleepcenter@hotmail.com](mailto:contracostasleepcenter@hotmail.com) To offer editorial comment contact Dick Griffiths at: [r.b.griff@sbcglobal.net](mailto:r.b.griff@sbcglobal.net)

## THE SUPPORT GROUP

The Sleep Apnea support group provides to those diagnosed as having Sleep Apnea, a variety of services in the areas of education and patient support so that the full health benefits of their prescribed individual treatment may be achieved through "compliance" with prescribed treatment. The support group is open to all patients and their families in Central Contra Costa County.

## SUPPORT GROUP MEETINGS

There is no membership fee for participation in the Support Group meetings held in the Ball Auditorium, John Muir Medical Center, 1601 Ygnacio Valley Road, Walnut Creek from 7:00 - 8:30 PM on the 3rd Thursday in January, April, July and October. These meetings are sponsored by: the John Muir Medical Center and the Contra Costa Sleep Center.

## WHAT IS SLEEP APNEA?

Simply stated, Sleep Apnea is a very common physical disorder that causes some people to frequently cease breathing while sleeping. Sleep Apnea is a very serious health problem if left untreated! It has been estimated that 90% of people who have Sleep Apnea don't know they have it!

## YOU COULD SAVE A LIFE!

Do you know someone who you think may have Sleep Apnea? If so, suggest they contact a Respiratory Physician or the American Sleep Apnea Association at: 1424 K Street, NW, Suite 302, Washington, DC 20005 and they will send a packet of information. You may also call them at (202) 293-3650, FAX at (202) 293-3656, or via the internet at: [www.sleepapnea.org](http://www.sleepapnea.org)

## REFITTING YOUR CPAP MASK

(courtesy of cpapman.com)

For any number of reasons your CPAP mask has gradually been getting out of fit. It's pretty normal since people's body and faces change occasionally if not from time to time. This really is nothing to be alarmed about since it is pretty normal for every CPAP mask user. If you are finding that your mask has been too tight or has been slipping as you sleep and by the time you wake up has been removed or become uncomfortable – here are some tips to help you in refitting the mask:

### (1) Readjust the mask straps

The beauty of good CPAP masks is that the straps are always adjustable. All you need to do is adjust and readjust the straps and the buckles when needed. You will find that the more you do this, the better the mask will fit. Since the straps are adjustable, you would not find it difficult to resize the mask itself to make things more comfortable for you.

### (2) Replace the Straps

If you find that the straps are already adjusted to their limit but still has not become the most comfortable that it could be, what you can do is replace the strap for a larger size or a smaller size. Either way, the new straps are going to be adjustable and will fit to your needs more.

You can also opt for another kind or type of strap since there are a lot to choose from. You can choose to replace it with over head straps and the like, choose to your liking!

### (3) Use strap guards

Now, if you find that you have already secured the smallest or largest straps and still find it to be uncomfortable, you can use strap guards to that effect. While the strap guards are used to avoid getting

markings on your face, you can also use it to adjust the fit.

It's all about adjusting, fitting and readjusting again. Be patient and do not be hesitant in asking for assistance!

## NO REST FOR THE AIR TRAFFIC CONTROLLER!



(The National Sleep Foundation President writes on the Air Traffic Controller Sleep issue in an open letter. Those who have experienced sleep apnea and sleep deprivation can agree with his concerns.)

Washington, DC, April 28, 2011— "Americans are justifiably concerned by the recent spate of incidents involving air traffic controllers who fell asleep on duty. But now that the FAA/DOT has outlined the steps it intends to take to address this problem – minor tweaking of the controllers' work/rest schedules combined with a threat of stricter disciplinary action against offending controllers in the future – the public's response ought to escalate from concern to alarm.

This is because the announced changes amount to tokenism – gestures more likely to assuage public anxiety than to meaningfully reduce fatigue in air traffic controllers. For example, although it is true that extending the time off between shifts (from 8 to 9 hours) will probably result in more sleep (which is good) it will not result in adequate sleep (the amount of sleep

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necessary to sustain normal alertness during the night shift). Prior research shows (and common sense dictates) that a significant portion of the 9 hour break will be devoted to commuting, eating, personal hygiene, socializing with family, etc.

If the FAA was truly serious about optimizing alertness in air traffic controllers, and if the policy makers based their decisions on scientific evidence, the time off between shifts would have been extended to at least 12 hours – and scheduled napping would now be encouraged during work shifts, rather than prohibited.

Likewise, prior sleep research (and, again, common sense) suggest that the threat of more severe punishment will have no beneficial effect on alertness. Those air traffic controllers who fell asleep did not do so because they were not properly motivated to maintain wakefulness. They fell asleep because they had a significant, physiological need for sleep. And they probably didn't even realize they were falling asleep – sleep onset can be insidious. (Think about it. If sleep onset was not insidious, would anyone ever fall asleep while driving an automobile?)

Also, it should be pointed out that both the airline industry and the FAA have known about this problem for decades. In 1981 the National Transportation Safety Board (NTSB) published a special investigative report on air traffic controller fatigue. However, the recommendations outlined in that report were essentially ignored – and classified as “Closed—Unacceptable Action” in 1989. Since then, the NTSB (which is the congressionally-mandated special investigative body charged with determining causes of transportation accidents) has issued more than 80 new fatigue-related safety recommendations. Care to guess how many of these have been implemented?

History is replete with accidents resulting in human death and injury caused by sleepy transportation workers, and the NTSB routinely cites air traffic controller fatigue in its findings.

Unfortunately, given the inadequate response to the recent incidents, we can expect more sleep and sleepiness - fatigue related errors and accidents involving air traffic controllers in the future.”

*Signed,*  
Thomas J. Balkin, Ph.D.  
Chairman, Nat'l Sleep Foundation

## A WEARABLE CPAP



“Transcend” is a new, wearable, sleep apnea therapy system manufactured by Somnedics, LLC, a privately held Minnesota-based medical device company. It is FDA/FAA/TSA approved and weighs approximately 0.8 pounds and is about the size of a 12oz. package of coffee beans. It designed to fit comfortably on the head, uses a short hose and is vibration-free. When used with a battery pack, “Transcend” lets the user rise without removing the device. It uses a small, disposable hygienic heat moisture exchanger (HME) in place of a chamber humidifier found with traditional CPAPs. The HME captures moisture from the patient’s exhaled breath, which provides warm, moist air. The use of HME technology instead of a chamber humidifier requires a lower amount of power and provides a full night’s use with humidification — even when using the optional battery pack. Transcend provides the normal range of therapy pressure and all of the features of a full size CPAP machine including; memory, ramp feature and altitude compensation to 8,000 feet..

Transcend and its accessories are available for sale from a number of retailers. More information and dealer names are available at: [www.mytranscend.com/](http://www.mytranscend.com/) You can also see a short “You Tube” film about it at: [www.youtube.com/watch?v=1gOGw\\_b94o](http://www.youtube.com/watch?v=1gOGw_b94o)



## THE PHYSICIAN'S CORNER

by Harry J MacDannald MD

### WEIGHT LOSS & SLEEP APNEA

Recognition, evaluation and treatment of Sleep Apnea Syndrome (SAS) has evolved greatly in the last forty years since first described in the medical literature.

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In the first 17 years the only effective treatments were weight loss and tracheostomy; both were effective, but weight loss has always been difficult to achieve and maintain. Tracheostomy was not acceptable to many patients.

In 1984 the CPAP machine was invented and introduced for patient treatment. CPAP is now the main-stay of effective treatment for SAS and made enormous improvement in the quality of life for patients.

CPAP can provide immediate relief of the symptoms and reduce the dangerous bodily effects of un-treated SAS. However it is important to get beyond the “quick Fix” that CPAP provides. For the majority of patients that is long term weight loss.

Approximately 80% of persons with SAS are substantially overweight and need make long term life style changes to work towards their ideal body weight.

Weight loss and increased physical activity require a commitment to healthy eating and age appropriate exercising.

***Many patients can completely return to normal with substantial weight loss and have no signs of SAS.***

Other benefits of weight loss and increased activity are:

- reduced blood pressure
- reduced heart attacks
- reduced strokes
- reduced diabetes mellitus
- reduced blood clots
- reduced load on bones & joints
- improved energy levels
- improved body image

These are concepts that we all know, yet we choose to rationalize and ignore then through denial. Everyone needs to make these commitments regarding weight loss and exercise. It is not just for someone else!

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