Wayne Barr of Beavercreek, thought he was getting a good night's rest, yet he still felt sleepy and would often doze off while watching TV or riding in the car. "It didn’t matter if I did sleep at night," says Wayne. “I was still tired all the time.”

A 1998 heart transplant patient, Wayne developed congestive heart failure about one and a half years ago. While he was in Miami Valley Hospital getting treated for that illness, his physician, Mazen Dallal, MD, medical director of MVH’s Center for Sleep and Wake Disorders, noticed abnormal sleep patterns and suspected a condition called sleep apnea. A special monitoring device confirmed Wayne’s breathing was pausing during the night — a key indicator of the condition.

Because Wayne’s sleep was being interrupted, his sleep quality was very poor, a situation that can contribute to multiple health problems, according to Kevin Huban, PsyD, clinical director of the sleep center.

People who have sleep apnea are not aware of how often their bodies “wake up” in an attempt to breath properly; that’s why Wayne felt he was sleeping at night even though his sleep was constantly disrupted.

Dr. Huban says there are two kinds of sleep apnea — obstructive sleep apnea (OSA) and central sleep apnea (CSA). The first occurs when the soft tissue at the base of the throat gets loose and vibrates, blocking the airway. The second type is most often found in people who have heart trouble.

“Our brains are regulated by how we accumulate carbon dioxide,” Dr. Huban says about CSA. “In patients with this condition, the drive to breathe has been reduced, and the brain simply doesn’t tell them to breathe.” This can occur because the body has low levels of carbon dioxide, or has a slowed-down circulation rate.

Because of his congestive heart failure, the mechanism in Wayne’s brain that tells him he needs oxygen has become unstable. That means his brain doesn’t recognize the need to breathe like someone without CSA. Further testing showed some serious results: “I stopped breathing 34 times an hour,” says Wayne.

Fortunately there are reliable treatments for people with sleep apnea. The most common is called a Continuous Positive...

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Airway Pressure (CPAP) device, and is used for people who have OSA. However, says Dr. Huban, because the causes of OSA and CSA are so different, the CPAP is not suitable for patients like Wayne.

A relatively new device called a Variable Positive Airway Pressure (VPAP) is now showing great promise for people who have CSA. According to Drew Terry, senior market manager for ResMed Corp., the VPAP is an advanced technology that uses an on-board computer chip to monitor a patient’s breathing. ResMed manufacturers the type of VPAP Wayne’s physicians prescribed for him.

“When a patient’s breathing drops below his or her average ventilation rate, the VPAP Adapt SV delivers additional pressure support and additional breaths,” says Terry. “Finally, there is a treatment for CSA that works simply and effectively.”

Wayne can second that. After several months on the VPAP, he can’t believe how much better he feels. “I’ve noticed a big difference. I feel so much more invigorated. It’s made all the difference in the world.” The computer readout of Wayne’s VPAP indicates his breathing stops only once an hour.

Dr. Huban says addressing Wayne’s sleep apnea is a critical part of his overall cardiac treatment. Without it, not only would he continue to feel bad, but also his congestive heart failure could become worse. Dr. Huban says people who have sleep apnea and don’t treat it are candidates for additional medical problems: high blood pressure, irregular heart rhythms, heart disease, heart attack, stroke and an increased likelihood of driving or work-related accidents.

“We always start with a sleep study first,” says Dr. Huban about diagnosing sleep problems. While patients sleep, sophisticated equipment monitors them for signs of sleep apnea or other sleep disorders. After a diagnosis is made, a comprehensive medical plan is developed for each patient and may include diet and lifestyle changes.

Wayne says the VPAP was not hard to get used to, and he finds he can comfortably wear it every night. He no longer falls asleep in the car and can resume his favorite activities feeling rested and awake: “It’s amazing. I can’t wait for spring so I can go fishing.”

Kevin Huban, PsyD
Since finding relief for his sleep apnea with the new VPAP device, Wayne Barr enjoys activities like fishing without the fear of dozing off in midstream.

Do You Have Sleep Apnea?
Sleep apnea is a serious medical condition that interrupts normal breathing at night. This condition affects more than 20 million adult men and women in the U.S., and many do not even know they have it. Common symptoms of sleep apnea are:

• Excessive daytime sleepiness
• Loud or disruptive snoring
• Gasping or choking during sleep
• Morning headaches
• Depression and irritability
• Frequent urination at night

Obese people, those with heart conditions, those with treatment-resistant hypertension and older adults are more likely to suffer from sleep apnea, but anyone can have it. The first step to treating sleep apnea is a sleep study, available at Miami Valley Hospital’s Center for Sleep and Wake Disorders.

For more information, call (937) 208-2515.