

SLEEP MEDICINE IN SLOVENIA

MEDICINA SPAVANJA U SLOVENIJI

Dear editor,

Sleep disorders affect more than 30% of the whole population in the industrialized countries, and World association of sleep medicine (WASM) this year declared March 14, as a first world sleep day. A slogan »Sleep well, live fully alert« was created by Dr. William C. Dement from the Stanford University, discoverer of dream activity in REM sleep and father of sleep medicine. *The event took place in public settings around the world and online with unveiling of a declaration:*

»Whereas, sleepiness and sleeplessness constitute a global epidemic that threatens health and quality of life, whereas, much can be done to prevent and treat sleepiness and sleeplessness, whereas, professional and public awareness are the first steps to action, we hereby declare that the disorders of sleep are preventable and treatable medical conditions in every country of the world«.

Not only in the USA, but also in Central Eastern European countries one third of adults suffer from insomnia, many have sleep apnea, others fall in the grip of shift work circadian disorders, innumerable people complain of restless legs and an excessive number overuse sleeping pills. This is a representative small part of the approximately 80 sleep-related disorders that have been codified so far in the International Classification of Sleep Disorders. The consequences of untreated sleep disorders are frequently the cause of car accidents or may even result as a sudden death during sleep.

In Slovenia, sleep disorders are still undiagnosed. For 2 millions of inhabitants, we have only two sleep laboratories, one situated in the Institute of Neurophysiology, University medical Centre in Ljubljana, where we are dealing with all kinds of sleep disorders, and second sleep center, situated in Pulmology Clinic in Golnik, dealing only with respiratory problems during sleep.

In the last year 2007 about 300 Slovene patients with obstructive sleep apnea (OSAS) received CPAP, which is completely financed by our social security system. However, most of our OSAS patients are severe cases, with very high apnea index, which indicates that moderate cases of

OSAS still remain undiagnosed. In the last few years we started to take special care of our neuromuscular disorder patients in searching the first signs of respiratory failure during the night sleep, and therefore started prescribing non-invasive ventilation during night time, which improved respiratory parameters and quality of life of these patients. Full polysomnography in the sleep laboratory (visually and not just automatically analyzed) remains the golden standard for diagnosis of sleep disorders in our country. However, polygraphy (for OSAS patients), ambulatory polysomnography (for parasomnias, restless legs syndrome, periodic limb movement syndrome, insomnia), and actimetry (for diagnosis of circadian sleep disorders) help us as a first step (shorter waiting time for these procedures) of the evaluation. Patients with excessive daytime sleepiness still remain under diagnosed, and Modafinil (modiodal), drug for stimulating wakefulness was never registered in Slovenia. Fortunately, Xyrem (Na oxybat), a novel drug for treating narcolepsy is now available in our country. Many hypnotic drugs for insomnia are used by our general practitioners, but we try to teach them, to always search the etiological reasons for disrupted sleep and not treat the symptoms first. We are happy, that this year slow release melatonin was registered in European Union, and became available in Slovenia. However, a lot of work has to be done regarding sleepy driver and circadian disorders with sleep debt as a consequence of shift work. There is also a lack of epidemiological studies. The first Croatian study of Pecotic et al. evaluates sleep habits of different medical professionals and opens the field for further epidemiological studies of sleep habits in this part of the world.

Therefore, it is our duty as medical doctors to have knowledge of sleep medicine and to diagnose properly all kinds of sleep disorders. However, government and social security awareness of sleep disorders is inevitable to give us the opportunity to treat our patients effectively.

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