



Narcolepsy - Sleep Disorder

Narcolepsy is a chronic neurological sleep disorder characterized by episodes of uncontrolled sleep. The specialists at the Diagnostic Sleep Center of LaPorte Regional Health System are experienced in the diagnosis and treatment of this rare sleep disorder.

The central nervous system has “centers” or groups of nerve cells that control the body’s organs. In people with narcolepsy, some of the centers related to the wake-sleep cycle malfunction, resulting in the occurrence of sleep phases during wakefulness. A person who has narcolepsy may fall asleep while eating dinner or engaged in social activities, or at times when he or she wants to be awake.

This disorder affects both men and women. For most people, the first symptoms appear between ages 15 and 30. Recent discoveries indicate that people with narcolepsy lack a chemical in the brain called hypocretin, which stimulates arousal and helps regulate sleep. In addition, there is a reduction in the number of hert cells or neurons that secrete hypocretin.

Symptoms of Narcolepsy

- ▶ **Sleep Attacks**—Characterized by an overwhelming and recurring need to sleep at times when you want to be awake.
- ▶ **Cataplexy**—A sudden loss of muscle tone ranging from slight weakness (head droop, facial sagging, jaw drop, slurred speech, buckling of the knees) to total collapse. It is commonly triggered by intense emotion (laughter, anger, surprising, fear) or strenuous athletic activity. Most people with narcolepsy have some degree of cataplexy.
- ▶ **Sleep paralysis***—The inability to move for a brief period when falling asleep or waking up. People with narcolepsy are affected by short-lasting partial or complete sleep paralysis.
- ▶ **Hypnagogic hallucinations***—Vivid and often scary dreams and sounds reported when falling asleep.
- ▶ **Automatic behavior**—Repetitive movements or actions performed during sleep attacks without full awareness or later memory of them.
- ▶ People not affected by narcolepsy may experience hypnagogic hallucinations and sleep paralysis as well.

Diagnosis And Treatment Procedures

Though symptoms and behaviors are recognizable, diagnosing narcolepsy is not simple—even for specialist trained in sleep disorders. Diagnostic tests available at the Diagnostic Sleep Center include:

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- ▶ Polysomnography—Records a variety of body functions during sleep. It is used to diagnose sleep apnea and determine its severity.
- ▶ Multiple Sleep Latency Test (MSLT)—Measures the speed of falling asleep. Individuals who fall asleep in less than five minutes are likely to require some type of treatment for sleep disorders.

An individual's medical history and a physical examination aid in diagnosing narcolepsy. Personal treatment plans are developed based on the individual's specific needs. Medication is used to help an individual approach normal alertness while minimizing disruptions to daily activities.

Changes in behavior to encourage good nighttime sleep combined with drug treatment have helped most people with narcolepsy enjoy an active lifestyle. Behavior changes can include:

- * Avoiding caffeine, nicotine and alcohol in the late afternoon or evening.
- * Exercising regularly, but at least three hours before bedtime.
- * Using bed only for sleep or relaxing activities.
- * Establishing a routine bedtime and wake time.
- * Getting enough nighttime sleep—about eight hours.

Frequently patients can schedule short naps during the day to decrease the likelihood of unexpected sleep attacks.

For more information, contact the Diagnostic Sleep Center of La Porte Regional Health System at (219) 326-2377 or visit www.laportehhealth.org.



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