Feedback from international sleep conferences. Research presentations. Case discussions of central and obstructive sleep disorders. A workshop on technical and scoring issues.

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Background Paediatric sleep medicine is an expanding area of clinical practice. A recent report highlighted the heterogeneity in both service provision and training between UK paediatric sleep centres. It was felt that a forum for regular peer review and discussion of cases, as well as “hot topics” in paediatric sleep was lacking, and to this end a UK paediatric sleep videoconferencing (VC) network was proposed. The Australasian and Pacific paediatric sleep centres (Australia, New Zealand and Singapore) have been conversing monthly using a VC network since 2001, and our group was modelled on their experience.

Aims We aimed to set up a multicentre sleep VC network of all interested parties working in the field of UK paediatric sleep medicine. Methods We canvassed all interested nurses, nurse specialists, respiratory/sleep physiologists, EEG technicians, and paediatricians working in the field of paediatric sleep medicine and its related disciplines via group emails using the mailing list of the British Paediatric Respiratory Society, and by posting information on the British Sleep Society website and in its December 2009 newsletter. International videoconferencing is facilitated via the NHS Grampian tele-medicine bridge, based in Aberdeen.

Results To date, a total of 75 individuals, representing 31 UK and four overseas centres have expressed an interest in the network and make up our mailing list. An initial test conference was held in February 2010 between Edinburgh and Great Ormond Street Hospitals, since when a total of 6 meetings at 3-monthly intervals have been held. The meetings have each hosted a median (range) of 9 (5–16) centres participating, with 21 paediatric sleep centres taking part in at least 1 meeting.

Topics covered have included:
► A workshop on technical and scoring issues.
► Case discussions of central and obstructive sleep disorders, behavioural sleep problems, as well as difficult to manage respiratory failure.
► Research presentations.
► Feedback from international sleep conferences.
► Presentations on aspects of quality assurance and sleep database management.

Summary The paediatric sleep videoconference is a forum which has allowed peer review and discussion of scoring rules, technical issues, and difficult cases within the field of paediatric sleep medicine. Furthermore, it has proved an opportunity to present research or research proposals to like-minded doctors, nurses and scientists.

REFERENCE

THE IMPACT OF PATIENT INFORMATION LEAFLETS IN SLEEP CLINIC

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Background Sleep apnoea can result in traffic accidents, and the British Lung Foundation’s (BLF) “Snoring and Sleep Apnoea” and the Driver and Vehicle Licensing Agency’s (DVLA) “Think! Tiredness can kill” leaflets are commonly used to inform patients about this. We wished to assess the impact of such knowledge on the general understanding and motivation of patients undergoing formal assessment for sleep apnoea in a sleep clinic.

Methods In a prospective survey, patients were provided with the above leaflets when they underwent the sleep study, and completed a structured questionnaire when attending the results clinic several weeks later.

Results 125 consecutive patients (92 male) with a mean (SD) age of 51 (14) years, BMI of 33.6 (6.9) and Epworth Sleepiness Scale of 10 (6) completed the questionnaire. 51 (41%) were eventually diagnosed with significant obstructive sleep apnoea/hypopnoea syndrome (OSAHS) requiring referral for continuous positive airway pressure therapy. 105 patients (84%) read the BLF leaflet and 91 (87%) assumed they understood about sleep apnoea from it. 25 (27%) believed they had sleep apnoea, 26 (25%) believed they did not, while the remainder (48%) were unsure. Although 28 (27%) became more worried about themselves, 56 (53%) were more keen on the impact of the information.

REFERENCE