

# Rest for weary: Clinic takes sleep woes seriously

By KATIE KERWIN

Forget the sheep-counting jokes in insomnia inspires, the comedy sketches about sleep-walkers and the gags about the guy who just can't seem to stay awake through a business meeting.

For the many who suffer serious sleep disorders, these symptoms are no laughing matter. Inability to sleep at night or excessive daytime drowsiness can turn their lives into a waking nightmare.

Contrary to long-standing belief, neurosis or laziness is not the cause of sleep problems, according to Dr. Thomas Roth, a sleep disorders specialist. Physiological problems, like muscle, nervous system or respiratory disorders, may be at the root of insomnia or continual sleepiness, he said.

"People have always assumed that sleep problems were trivial," Roth said. "They are not trivial. Potentially, they can be quite serious." Sleep disorders have been associated with a high risk of accidents, chronic disability, drug abuse and death.

Roth is director of the newly established Sleep Disorders Center at Henry Ford Hospital. The regional center in Detroit diagnoses and treats patients with sleep problems and conducts research on the nature of sleep disorders. It also presents seminars and community programs through the hospital's branches, including the Troy Counseling and Therapy Center.

A tremendous number of Americans suffer from sleep-related difficulties, Roth said. "Most of them fall into one of two categories: those who have trouble falling or staying asleep, and people who are sleepy during the day."

The majority of patients seeking help

at the clinic suffer from narcolepsy, a disorder of the nervous system; apnea, a respiratory problem; or nocturnal myoclonus, a twitching disorder of the muscles, according to the director.

Narcoleptics fall asleep quickly and without warning. "They can fall asleep while driving cars," Roth said. Besides the danger of accidents, narcolepsy can interfere with social life, marital relationships, and keeping a job, he added. Students with narcolepsy have a hard time in school, because they may not be able to stay awake in class.

"These people are sleepy all the time," Roth said. "Their life is hell."

Public misunderstanding of the problem doesn't make the narcoleptic's life any easier, he added. "They may be constantly told, 'It's all in your head, so shape up.'"

Sleep disorders — and misunderstanding of the disorders by others — creates a great emotional drain on the sufferer, according to Roth.

"We saw one man whose wife divorced him because of it. Every time she left the house, she told him to watch the kids," the doctor related.

She misinterpreted his continual dozing as a sign of indifference toward herself and the children. "But he could no more stay awake than you could walk on air," Roth explained.

**SLEEPERS SUFFERING** from apnea, another sleep disorder, actually stop breathing up to several hundred times a night. The halts in breathing can be as long as 60 or 70 seconds, Roth said, but the sleeper is unaware of them.

"The thing that's important is that they don't know it's happening," he said. If untreated, apnea can have serious effects upon the heart or even lead to death.

Most physicians don't have the facilities to examine patients while they are sleeping," Roth continued. Since apnea sufferers breathe normally when awake, the disorder is hard to detect in normal medical offices. "It's sort of like examining people long-distance," Roth said.

The Sleep Disorders Center, one of only a dozen in the country, opened last September. The center is located in what was formerly a Howard Johnson's hotel on W. Grand Boulevard in Detroit. The facilities include sleeping areas, where a patient can have respiration, brain waves, heart rate and other vital signs monitored during a regular night's sleep.

"Sleep is amnesia," Roth said. A sleeper suffering from narcolepsy may be unaware of the constant twitching of his limbs while he sleeps. But narcolepsy can cause attacks of muscular weakness, and even paralysis, Roth said.

Insomnia and other sleep disorders can also be caused by high use of certain drugs, Roth said. Alcohol abuse can also lead to sleep disorders, he added.

**THE CENTER ALSO** treats patients experiencing problems with sleep-walking, bed-wetting and nightmares. These patients are usually children, Roth said. "For a long time, it was assumed that these were related to emotional problems," he said, but it now appears that these problems are physiological disorders of an immature nervous system.

In an adult, sleep-walking, bed-wetting and night terror may have other causes, he said, adding that adult sleep walking can be related to epilepsy.

Most people suffer from sleep disorders once in awhile, Roth said. Occasional insomnia or daytime sleepiness is no cause for alarm, and the sufferer can usually identify its cause as stress or a change of sleeping habits or location or illness. Patients seek help at the clinic when their sleep problems start interfering with the quality of their life, Roth said.

"Most of these people tend to have chronic problems. These things don't go away by themselves," he said. Patients are sometimes embarrassed by the symptoms of their sleep disorders Roth added.

A sufferer of apnea is often a very loud snorer. "His wife may give him a hard time about it," he said, or a patient may "get kicked about falling asleep at business meetings."

Many of those suffering sleep disorders have been untreated or misdiagnosed for many years, until the center opened last fall. "For some of them, it's a godsend."

"THE FIELD OF SLEEP is very young," Roth said. Sleep research started in the early 60s and the clinical field is only nine or 10 years old, he added.

The Henry Ford center also conducts research, but Roth stressed that the research aspect is separate from the treatment services. "None of our patients are ever used in experiments," he said.

Insomnia is a major research interest at the center, Roth said. The effects

of drugs on sleep are also being studied there. Apnea and physical functioning in relation to the previous night's sleep are also among the center's research interests, its director said.

Education of physicians and the public are important for the new medical area, Roth said. He lectures widely on the topic, which he said is greeted with interest by medical audiences and laymen.

"(Sleep) is a very attractive topic to people," he said. "Everyone does it and everyone is fascinated by it." Sleep disorders is a field that is beginning to be taught more in medical schools and doctors already in practice seem receptive to learning more about its diagnosis and treatment, Roth said.

A recent seminar at the Renaissance Center on sleep disorders at which Roth spoke attracted 600-700 physicians, he said. "It's a very prevalent problem; there's a lot of need."

**THE TRADITIONAL** treatment for sleep problems has been directed at the symptoms, not the disorder itself, Roth said. A patient complaining of trouble falling asleep would be told, "You have

insomnia," Roth said. "But insomnia is not a diagnosis."

Sleeping pills, the most common remedy offered to patients suffering sleep disorders, can only relieve the symptoms, at best, he said.

In some cases, sleeping pills can even be worse than nothing, he added. The pills slow the breathing rate and can have a bad effect on someone with the respiratory problems of apnea, Roth explained.

But sleeping pills are prescribed extensively, and for a wide variety of problems and complaints, he said. Roth said that about three percent of all visits to a physician result in a prescription for sleeping pills. The purpose of the pills is also frequently misunderstood by the patient, he added.

"People take sleeping pills for two or three months and then when they stop, they say, 'My insomnia's back,'" Roth said. "It was never gone."

Research and better education seems to be the key to improved diagnosis and treatment, and to changing attitudes towards sufferers of sleep disorders, according to Roth. "We spend one-third of our life asleep," he said.

## CITY OF FARMINGTON

### BOARD OF REVIEW

#### NOTICE IS GIVEN TO ALL PERSONS THAT:

AN ASSESSMENT ROLL of all property in the CITY OF FARMINGTON subject to taxation has been prepared by the City Assessor and said Roll will be subject to inspection at the Office of the City Assessor in the Municipal Building, 23500 Liberty Street, Farmington, Michigan, on or after March 5, 1979.

#### THE BOARD OF REVIEW WILL BE IN SESSION AS FOLLOWS:

MONDAY, MARCH 12, 1979

TUESDAY, MARCH 13, 1979

9:00 A.M.-12:00 P.M.  
1:00 P.M.-5:00 P.M.  
2:00 P.M.-3:30 P.M.  
7:00 P.M.-9:00 P.M.

Upon request of any person who is assessed on the Roll, or his Agent, and upon sufficient cause being shown, the Board of Review can adjust the Assessment on such property in such a manner as will in their judgment provide an equitable Assessment. Such Assessment Roll reviewed by said Board of Review shall be the ASSESSMENT ROLL OF THE CITY OF FARMINGTON FOR THE YEAR 1979.

Please call the City Assessor, Mr. John Sailer, 474-5500, for an appointment if you wish to review the Assessment against your property, or if you wish to appear before the Board of Review.

NEDRA VIANE, CITY CLERK

Published: February 26 and March 5, 1979

## Obituaries

### ROSE M. LYNCH

Mrs. Lynch, 82, of Farmington, died Feb. 7 at Detroit Mt. Carmel Hospital. Survivors include a daughter, Doris Lynch of Farmington; son, William C. of Cleveland; two sisters, Mrs. Adella Burkey of Evansburg, Pa. and Mrs. Emily Hess; one brother, Anthony They; and grandson, Kerry Alan Lynch.

Services were held from the Thayer Rock Funeral Home and Our Lady of Sorrows Catholic Church. Burial was in Mt. Olivet Cemetery.

### NATHAN M. LITTLE

Services for Mr. Little, 52, of Farmington Hills, were held from the Heene Sundquist Funeral Home on Feb. 6. He was a truck broker with the

Great Lakes Express. He also served in the army from December, 1944 through August, 1946. He received several commendations for his service. He was a member of the Phoenix No. 531 Masonic Lodge.

Survivors include his wife, Cleo R.; children, James, Joseph, Danny Combs, Mrs. Linda Collins, and Mrs. Becky O'Neill; mother, Lena J. Little; brother, John; and three grandchildren. Burial was at Grand Lawn Cemetery in Detroit.

### MARY D. TAYLOR

A funeral mass for Mary Taylor, an executive secretary at Ford Motor Co., was held Monday at Our Lady of Sorrows Church in Farmington.

Mrs. Taylor, 44, of Farmington Hills, died Friday at Henry Ford Hospital.

Survivors include her husband Fred; son Mark; and daughters Joan, Jane and Patricia. Also surviving are her mother, Gertrude Moore, and brothers Victor, Joseph, William and George. Services were held from the Heene Sundquist Funeral Home and burial was at Holy Sepulchre Cemetery. Contributions in lieu of flowers may be made to Mary D. Taylor Memorial Fund, cancer research at Henry Ford Hospital.

### EDWARD N. ROGGENBUCH

Mr. Roggenbuch, 63, died Feb. 4. He was a resident of Farmington Hills.

Survivors include his wife, Verda; daughter, Mrs. Jeanette Burke, and grandchildren James Jr. and Coleen. Services were held at the Heene Sundquist Funeral Home. Burial was in Holy Sepulchre Cemetery.

## Antioch is tour stop for choir

Golden Valley Lutheran College Choir will perform at 8 p.m. Friday, March 2, in Antioch Lutheran Church of Farmington Hills. The church is located at the corner of Thirteen Mile and Farmington Road.

The 65-voice choir is on a tour now that will take them to about a dozen midwest and southern states from its base in Golden Valley, Minn. Their appearances have met with enthusiastic reviews from critics.

The choir is under the direction of John Seagard, and one of the special features of the concert here will be one of his compositions written and scored for trumpets and choirs.

The concert will include music of Palestrina and Mozart; music from the Russian Orthodox Church, spirituals and American folk songs.

There is no charge for the concert. A free will offering for the choir will be received.

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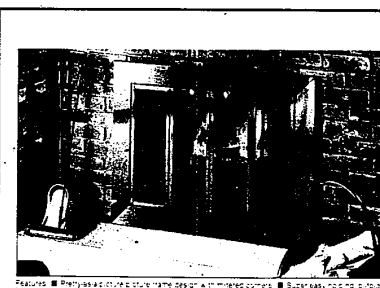
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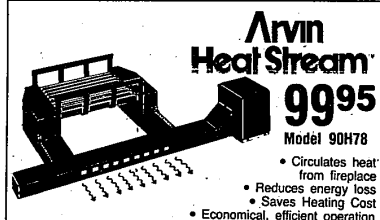
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