

Rx briefs

Bladder seminar

Oakwood Annapolis Hospital in Wayne will host a free community seminar about incontinence and other bladder problems 5:30-7:30 p.m. Thursday, Nov. 7. "Incontinence: Stop Suffering in Silence" will address the different types of incontinence, their prevalence and new treatment options. Pre-registration is required. Please call (800) 543-WELL to reserve your spot.

Incontinence study

Doctors at Beaumont Hospital in Royal Oak are recruiting women to test an experimental oral medication to determine its effectiveness in reducing the number of stress incontinence episodes. The investigational drug is being tested in women with SUI, or stress urinary incontinence, and MUI, or mixed urinary incontinence. SUI is the involuntary loss of urine that occurs if the muscles that support the bladder are weakened. MUI is the involuntary loss of urine as well as a strong urge to urinate.

Participants will be compensated for their participation. Call (248) 551-0642.

Thank you

The Wayne County Smoking and Tobacco Intervention Coalition wants to publicly thank the more than 1000 families who took the Smoke-Free Home Pledge. These families are to be applauded for their efforts in protecting their children from the effects of second-hand smoke, such as bronchitis, asthma, pneumonia and frequent ear infections.

"Because you cared enough about your families' good health, we salute you and wish you and your family the best in continued good health. We further encourage you to promote the same to your friends and other family members," said Valeria Revels, Coalition coordinator.

Choosing not to smoke in homes and not allowing others to do so is a mission that must be addressed as often as possible by health professionals and the media, said ReVels.

Cancer walk

More than 6,000 survivors, families, friends and coworkers made the American Cancer Society's "Making Strides Against Breast Cancer" walk on Oct. 12 at Detroit's Belle Isle Park a success. The event raised over \$550,000 for breast cancer research, and local education and support programs.

This national walking event has quickly become the largest community event in support of breast cancer research in the United States with 80 cities participating in 2002. Since its inception, the event has raised over \$104 million, helping to make the American Cancer Society the largest private source of funding for breast cancer research in the world.

Diabetes

Beaumont Hospital's Division of Preventive and Nutritional Medicine in Royal Oak need people with diabetes for research studies testing new oral medications to help lower their blood sugar levels. Volunteers will receive study-related health care without charge and will be compensated for their time and travel. Call toll-free (888) 807-8839.

Sleep apnea, a threat to life and well-being

BY LAURA COLVIN
CORRESPONDENT

Ken Cook of Novi knew his life was in danger when he sought medical help nearly three years ago.

Every morning, during the commute to his job as a business analyst at Ford Motor Co., Cook wrestled with a beast called sleepiness—a beast that threatened to crash his car and, perhaps, steal his life. As an added annoyance, he found himself dozing at his desk during lunch and falling asleep in front of the television every evening.

"Not only was I falling asleep all the time, but my wife noticed that I often stopped breathing during the night," he said. "I knew I had to do something."

After Cook spent two nights in Novi sleep lab, the physicians handed him a straightforward diagnosis: Sleep apnea.

A condition as common in adults as diabetes, sleep apnea is the temporary suspension of breathing caused when soft tissues in the rear of the throat relax, blocking the airway. The sleeping person stops breathing for a period of time that can last from 10 to 60 seconds—or longer.

When the body senses the low oxygen and elevated carbon dioxide levels that result from not breathing, the person is aroused and breathing begins again with a loud snort.

The cycle continues during the night, and most people with the condition stop breathing, wake up, and start breathing again more than 20 times per hour, sometimes hundreds of times per night. Although they are usually not aware of the arousals, sleep apnea victims suffer from fragmented, non-restful sleep. The immediate result is often severe daytime sleepiness.

RISKS

"Driving while tired can be as hazardous as driving while drunk," said Darrel Drobnich, the National Sleep Foundation senior director of Government and Transportation Affairs. Drobnich noted that persons with untreated sleep disorders such as sleep apnea are among those groups most at risk for automobile accidents.

Although it can occur in all age groups and in both genders, sleep apnea appears to exist predominantly in males over the age of 40 who are considerably overweight. The cardinal symptoms of sleep apnea are excessive daytime sleepiness and heavy snoring at night.

"While most people think of snoring as simply an annoyance, (it) may indicate sleep disordered breathing which should be evaluated by a doctor or sleep specialist," said Dr. Safwan Badr, president of the American Sleep Apnea Association. "Untreated, sleep apnea can cause much harm. Treatment can save lives."

According to the ASAA, sleep apnea can have dangerous consequences, including high blood pressure and other cardiovascular disease, memory problems, impotency, headaches and additional weight gain.

And the number of people affected with the condition is growing.

Experts estimate that between 12 million and 20 million Americans suffer from sleep apnea, with perhaps as many as an additional 10 million undiagnosed.



Ken Cook of Novi keeps his sleep apnea in check with a BIPAP sleep device, which he wears every night.

"As our population gets more obese, sleep apnea becomes more prevalent," said Dr. David Hugel, section head of Sleep Disorders Medicine in the Pulmonary Division at Henry Ford Hospital. "We're not totally sure of the exact cause of that relationship, but breathing and sleep is surely affected by body weight."

DIAGNOSIS

To properly diagnose sleep apnea and determine its severity, most experts recommend a polysomnography, also known as a sleep study.

The patient spends one or two nights in a sleep laboratory so that physicians can monitor body functions. Some of these include brain activity, eye movement, heart rate, respiratory effort and airflow.

Based on results of the sleep study and the patient's medical history, physicians can make a recommendation for treatment.

"The biggest cure for sleep apnea is weight loss, so we try to encourage

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president, American Sleep Apnea Association

(patients) to enter an exercise program," said Hugel. "One reason that obesity is so prevalent, obviously, is our sedentary lifestyle."

But significant weight loss takes time, and patients often require immediate care. The most common form of treatment is a portable device called the nasal continuous positive airway pressure, or CPAP.

With this treatment, the patient wears

SLEEP APNEA FACTS

■ The Greek word "apnea" literally means "without breath."

■ Sleep apnea is as common as adult diabetes, affecting an estimated 18 million Americans, according to the National Institutes of Health, yet the vast majority of cases go undiagnosed.

■ Obstructive apnea is the most common type of apnea in children, and occurs when the child's airway is blocked or partially collapses during sleep.

■ In addition to attention problems, sleep apnea can cause high blood pressure, cardiovascular diseases, memory problems, weight gain and headaches.

■ The most common treatment for pediatric sleep apnea is surgery on the tonsils and adenoids, though the condition can also be treated with the use of a CPAP machine.

a mask over the nose during sleep, and pressure from the CPAP machine keeps the airway open.

"It works," said Hugel. "If you wear it most of the night, it will eliminate the apneas, improve your sleep quality and almost totally eliminate daytime sleepiness."

The problem, he said, is one of compliance. Some patients complain of nasal stuffiness, facial skin irritation, inconvenience in being attached to a machine, or discomfort with the constant pressure of the machine.

There are solutions to most of the discomforts, however, and experts agree that the benefits outweigh any inconvenience.

Surgery is sometimes an option, depending on the individual, but effective only about 50 percent of the time. Medications have had only very minor success.

IMPROVED LIFE

Ken Cook now uses a BIPAP every night, and he no longer worries about falling asleep at the wheel. The BIPAP is a variation of the CPAP, designed to follow the breathing pattern of its user. The pressure is lowered during exhalation, so breathing feels more natural.

"I had immediate results from using this machine, like night and day," said Cook. "And the good side effect is that I don't snore anymore, so my wife sleeps much better, too."

For further information visit the American Sleep Apnea Association Web site at www.sleepapnea.org, or the National Sleep Foundation at www.sleepfoundation.org.

The Sleep Disorders and Research Center at the Henry Ford Health System can be reached at (313) 916-5147. A physician's referral is required for an appointment.

Book informs cancer survivors about use of supplements

'This book helps survivors become better informed about the wealth of options now being investigated and then go back to their physicians with concrete questions.'

Dr. Richard Rivlin
American Health Foundation

GUIDANCE

Cancer experts at the American Institute for Cancer Research are concerned that survivors who are turning to specific foods, supplements or regimens for protection may be doing themselves more harm than good. Many of the substances and techniques in question are showing powerful effects—for good and for ill—in laboratories and clinics. These effects come with real risks that could have a serious impact on health.

"These people need some guidance," said Glen Weldon, editor of a new book published by AICR called *Dietary Options for Cancer Survivors*, and they need it today. We can no longer ignore

the fact that millions of them are already taking things into their own hands. This late in the game, simply telling survivors to 'wait and see'—and expecting them to do so—is absurd."

"Dietary Options for Cancer Survivors" is ultimately a book that survivors and their doctors should use together," added Dr. Richard Rivlin, senior vice president for Medical Affairs at the American Health Foundation and professor of medicine at Weill Medical College of Cornell University.

"This book helps survivors become better informed about the wealth of options now being investigated and then go back to their physicians with concrete questions," Rivlin continued. "It may even encourage more physicians to provide dietary guidance tailored to the specific needs and medical histories of their survivor patients."

INFORMATION

Dietary Options for Cancer Survivors helps cancer survivors navigate the limited but no less confusing mass of scientific information on how diet, supplements and complementary/alternative therapies impact the chances that cancer may return.

The book lists 48 popular foods, phyto-

chemicals, vitamins, minerals, herbs and dietary regimens that are currently being studied in regard to cancer survival, and presents pertinent research results in an easy-to-understand format. Containing over 540 reference citations that direct interested readers to the original research, *Dietary Options for Cancer Survivors* was compiled and reviewed by a team of researchers, nutritionists and clinicians.

Dietary Options for Cancer Survivors is a book for survivors to use as a reference, not a "laundry list" of foods to eat to prevent recurrence. The book does not endorse any particular food, supplement, or regimen. Instead, it simply and clearly lays out the published laboratory and clinical research that has investigated the interplay of diet and survivorship.

The book's introductory chapters, however, offer a thorough overview of the kind of diet and lifestyle changes that have been shown to help prevent first cancers. The wealth of research on primary prevention provides a sharp contrast to the small amount of survivor-related research, and helps to illustrate how much more work needs to be done. The book can be ordered through the AICR Web Site, www.aicr.org, or by calling AICR toll-free at (800) 843-8114, Ext. 75.