OFFICE NEWSLETTER
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“WISHING YOU AND YOUR FAMILIES
A VERY HAPPY AND PROSPEROUS
NEW YEAR”

HAPPY NEW YEAR
2018

“A smile is a curve that sets everything straight.”
-Phyllis Diller
Think of how often you hear the word sleep, day in and day out. When considering an important decision, someone retorts, “Let me sleep on it.” Or you overhear someone in a conversation state, “I was so worried, I couldn’t sleep last night.” Or, looking back to my years in college and dental school, “I was up all night cramming for the test.” Some brag, “I don’t need much sleep.” Others brag about how much they slept last night. Some try to make up for lost sleep on the weekends, but the studies show that “you can’t make up for lost sleep.” Interestingly enough, the CIA’s detention and interrogation program included sleep deprivation as part of their enhanced interrogation techniques. This was classified as “torture” because prolonged sleep deprivation attacks the deep biological functions at the core of a person’s mental and physical health. It was a tactic favored by the KGB and the Japanese in P.O.W. camps in WWII. When a person is deprived of sleep, the immune system becomes unable to function optimally and the negative effects become much more intense when people are sick, injured or traumatized. And, the effects of sleep deprivation, in particular with regarding to sleep apnea go way beyond that.

Many years ago, my old friend, Dr. Robert Martinez was with our families in Destin, Florida on vacation and Bob was studying to become the first board certified physician in Acadiana in Sleep Medicine. He was toting this huge text on sleep with him to the beach one morning and when I inquired about his recent interests in this, he said, “you cannot possibly being to imagine the importance of good sleep” And, he was right, at least up until recently.

After 37 years of practicing dentistry and 62.5 years of circling the sun on this planet, I was pretty convinced that I was “wearing out” and I guess this is what the sixth decade of life brings with it along with an expanding waistline and thinning hair. A local psychologist, Dr. David Legendre was convinced that I was suffering from sleep apnea and I was convinced that I was not. My wife mentioned from time to time that I snored, but at least when I’m with my friends at the fishing camp, hunting camp or otherwise, “everyone snores.” After visiting the Sleep Center at Our Lady of Lourdes and doing a home sleep study, Dr. Roger Steuben contacted me to let me know that I definitely has moderate sleep apnea! Under his direction, I began using a CPAP machine (Continuous Positive Airway Pressure) a few months ago.

I could go on for days about what a difference this had made for me on many levels. I have also discovered that many of our patients and friends have also been diagnosed with sleep apnea and are either using a CPAP machine or an oral appliance and “won’t leave home without it.”

I would hope that you will take the time to review the contents of this newsletter as it relates to sleep for you personally, or any of your loved ones. I am now a advocate and “dental watchdog “ because the profound difference that this has made for me.

-Dr. Smith

You spend 1/3 of your life sleeping and it’s that 1/3 of your life that greatly affects the other 2/3.
Signs, Symptoms and Consequences of Sleep Apnea

The major symptoms of sleep apnea are loud snoring, 10-second (or longer) breathing gaps and labored breathing. The gaps turn to gasps as if you are holding your breath. The gasping can wake you up, interrupting and fragmenting your sleep. People can have breathing pauses from 10-30 times per hour. Other symptoms are associated with severe daytime sleepiness. They include:

1. Awakening un-refreshed in the morning
2. Falling asleep at inappropriate times
3. Possible depression
4. Memory problems
5. Headaches
6. Personality changes
7. Poor concentration
8. Restless sleep
9. Insomnia
10. Hyperactivity

Obesity seems to be a major contributor to sleep apnea. But you don’t have to be obese to have this condition. Please know that I’m not minimizing or trivializing this disease. It’s a horrific feeling to wake up choking and gasping. However, if obesity is the major contributor to sleep apnea, what is being done about that? With 66 percent of the population overweight and obese I don’t believe there are enough attempts by doctors to reduce the obesity factor with diet and lifestyle intervention. And, of course, obesity doesn’t only cause sleep apnea but it’s a major contributor to diabetes, heart disease and hypertension.

Sleep clinics promote CPAP machines and surgeons promote throat and palate surgery. I’ve yet to hear a client with sleep apnea tell me that weight control was the first line of treatment. Often surgery is offered first with no mention of diet.

How many people suffer from sleep apnea? According to the National Heart, Lung and Blood Institute, 18 million people have this condition and probably a similar number go undiagnosed. It’s under-diagnosed because a doctor can’t detect it on a routine examination and there are no blood tests for sleep apnea.

If you have all or some of the following symptoms, you could be experiencing sleep apnea. However, it really struck me that many of these symptoms can be related to stress and overwork and lack of magnesium!

1. Taking more than 30 minutes to fall asleep at night.
2. Waking at night and having trouble falling back to sleep.
3. Feeling sleepy during the day and taking short cat naps.
4. Tingling in your legs when you try to fall asleep.
5. Having vivid, dreamlike experiences while falling asleep or dozing.
6. Episodes of sudden muscle weakness when you’re angry, fearful, laughing.
7. Feeling as though you can’t move when you first wake up.
8. Your legs or arms jerk often during sleep.
9. Needing stimulants, such as caffeine, to stay awake during the day.

When I look at the following list of conditions that can be promoted by untreated sleep apnea, I also think of magnesium deficiency. . . except maybe for MVAs.

With untreated sleep apnea there is an increased risk of:

1. High blood pressure
2. Heart attack
3. Stroke
4. Obesity
5. Diabetes
6. Worsening heart failure
7. Worsening arrhythmias
8. Work-related accidents
9. MVAs
As awareness and diagnostics for obstructive sleep apnea increase, more patients will be diagnosed, and it’s not just up to physicians to treat them. Dental sleep medicine is a developing treatment modality which has garnered increased attention in recent years. And the role of the dentist in screening for and treating sleep-disordered breathing is going to become critical.

There are two ways in which dentists can take a more active role in OSA: they can be instrumental in increasing diagnoses of dental sleep apnea and they can also serve as a resource to patients who are looking for alternatives to the medically prescribed CPAP (continuous positive airway pressure) mask.

The alternative is the mandibular advancement device (MAD), often generally referred to as an oral appliance (OA).

Today, CPAP masks are far more common, but due to increased awareness of oral appliances as an alternative and the lack of patient compliance with CPAP masks, that will likely change.

The future of dental sleep medicine is brightest in the area of children’s health. “Think about a child who turns 13. Their teeth are crooked so they go to the orthodontist. If we can see that child when they’re four or five and recognize that their jaw structure isn’t growing big enough, we can influence that jaw to grow bigger. A side benefit is that the teeth will have room to grow straight, but the major benefit is that the jaw will be big enough to support a bigger airway so they can breathe well.”

Poor breathing, especially in sleep, inhibits children’s brain development and could be connected to low daytime energy and ADHD.

“Only dentists can influence jaw growth with orthodontic appliances that we have available today,” he says. “That’s the most important contribution to population health that dentistry’s ever had: to help these children grow up with an open airway, breathing well 24 hours a day.”

Now sleep apnea is so common that a New York travel agent tried to argue that sleep apnea was the reason she stole $25 million from her clients.
Dr. Craig Landry, a native of Abbeville, LA and graduate of UL and LSU School of Dentistry, has been actively involved in the diagnosis and treatment of sleep apnea in conjunction with other physicians in Acadiana that treat sleep disorders for many years. For those patients that have difficulty with the CPAP machine, Dr. Landry offers an array of MADs or mandibular advancement devices in the management and treatment of sleep apnea. For more information, visit his office website: www.drcraiglandry.com or call his office at 337-981-9242.
Memory

During REM sleep (rapid eye movement) our neural connections convert short term memory into long term memory. People that suffer from sleep apnea (sleep disordered breathing) typically have significantly reduced REM sleep as a result of fragmented sleep. Each episode (apnea event) results in a drop in your oxygen level as well as disruption to your brain wave activity. That brings you from a deeper stage of sleep to a lighter, less restful stage of sleep. The use of CPAP (continuous positive airway pressure) reduces the fragmented sleep and has been shown to increase and restore the amount of REM sleep.

Heart Function

When we rest, our heart rate slows down. The average heart rate while we are awake is 60-100 beats per minute and when we sleep, the average drops down to 40-90 BPM. During normal healthy sleep the heart rate sustains a somewhat steady and level rate and rhythm. A person with obstructive sleep apnea typically will have a chaotic heart rate or arrhythmias during apnea events. When you have an apnea event your heart rate slows down as the blood oxygen levels drop; when air is restored to the lungs after the apnea event has ended, the heart races to catch up and pump more blood throughout the body.

Depression v/s Better Mood

Lack of a good night’s sleep is enough to make us all a little irritable but just imagine what it must feel like to not get a good night’s sleep for 20 or 30 years. That is exactly what has happened to a lot of people that have suffered a long time with undiagnosed sleep apnea. They fail to understand how it could be happening and tell themselves “Hey, I got 8 hours of sleep last night, why do I feel this way?” or “How can I get a good night’s sleep; is something wrong with me?” It’s amazing to see the effect on some people in the sleep clinic the morning after their first full night with CPAP. It makes a world of difference; not only does CPAP save lives, CPAP saves marriages too!

Creativity

It’s not hard to understand that with little sleep or the feeling of fogginess one might have a difficult time being creative or even having the energy to do one’s job. Let’s not even mention the morning headaches or lethargy that also comes with fragmented sleep and untreated sleep apnea.

Weight Loss

It’s quite simple really; without healthy sleep it is hard to get the motivation to exercise or be more active. It’s that motivation and drive the get us to the gym or keeps our activity levels up where we start to burn more calories and lose weight. Decreases in the hormone Leptin from lack of healthy sleep contributes to increased appetite.

Overall Health

Improved mood, a more rested heart, lower blood pressure and decreased risk of stroke and heart attack are really good bullet points to live by when you make the effort for better sleep.

Testing

If you or someone you know suffers from the symptoms listed in this article, you should consider consulting with a physician about conducting a home sleep apnea test. Below is a listing of some local physicians that are experts in our area:

- Dr. Fadi Malek
- Drs. David Foreman and Jimmy White
- Dr. Roger Steuben
- Dr. Matthew Abraham
- Dr. James Hales
The Epworth Sleepiness Scale

How likely are you to doze or fall asleep in the following situations, in contrast to feeling just tired? This refers to your usual way of like in recent times. Even if you have not done some of these this recently try to work out how they would have affected you. Use the following scale to choose the most appropriate number for each situation:

- 0 = would never doze
- 1 = slight chance of dozing
- 2 = moderate chance of dozing
- 3 = high chance of dozing

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<thead>
<tr>
<th>SITUATION</th>
<th>CHANCE OF DOZING</th>
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<tr>
<td>Sitting and Reading</td>
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<td>Watching TV</td>
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<tr>
<td>Sitting, inactive in a public place</td>
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<tr>
<td>As a passenger in a car for an hour without a break</td>
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<tr>
<td>Lying down to rest in the afternoon</td>
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<tr>
<td>Sitting and talking to someone</td>
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<tr>
<td>Sitting quietly after lunch without alcohol</td>
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<tr>
<td>In a car, while stopped for a few minutes in traffic</td>
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Name: ___________________________  Age: ______________

Date: ___________________________  Male/Female

Medications: ____________________________________________

_________________________________________________________________________

_________________________________________________________________________

_________________________________________________________________________

Weight: ___________________________  Height: ______________

The questionnaire score for the 8 questions are added together to obtain a single number. A number in the 0-9 range is considered to be normal, while a number in the 10-24 range indicates that expert medical advice be sought. (e.g. A score of 11-15 would indicate a strong possibility of mild to moderate sleep apnea and a score of 16 or above would indicate a strong possibility of severe sleep apnea or narcolepsy.)
When my granddaughter would spend the night, it was obvious to Germaine and I that she seemed to gasp for air when sleeping and would thrash back and forth while in bed throughout the night. She would also wake up during the night, according to her mother. I had my daughter, Katheryne, bring her to local ENT otolaryngologist, Dr. Jimmy White, who practices with Dr. David Foreman at Camellia ENT for evaluation. Sure enough, he felt that her enlarged adenoids and tonsils were the culprits and he operated on her shortly after.

She now sleeps soundly and is more rested. Although I’m somewhat biased and will tell you that she really is a good child, her behavior is much improved at home as well as at school by admission of her teachers as well as her mother. Dr. White emphasized the emerging facts about sleep apnea in children and the development of ADD and ADHD and associated behavioral issues. She loves “Dr. Jimmy” and now, at age 4 1/2 wants to be a doctor.

If you are over the age of 50, you can probably faintly recall the TV commercial for Sominex from the mid to late 1960’s. Since then, a barrage of sleep aids have come to the forefront as OTC remedies.

“Take Sominex tonight and sleep, safe and restful sleep, sleep, sleep.”
A small sampling of the hundred of sleep aids that are available by prescription of OTC today.
This past November, Drs. Smith and Domingue hosted dentists as well as company reps and lab technicians from around the country for their biannual “Implant Dentistry in Black and White” course. This course has been in existence since 2008 and has attracted dentists from throughout the USA to Acadiana. All proceeds from this course are donated to the Medical/Dental Clinic in Atoyac de Alvarez, Guererro, Mexico which was founded in 1992.
Parting Shots

Dr. Domingue and dental students from LSU School of Dentistry in Atoyac, Mexico June 2017

Drs. Smith and Romano with the Mayor and his secretary March 2017

Drs. Smith, Domingue and Carl J. Breaux—“Home Run Derby with UL Baseball Team”
Post op panorex showing alignment of implants. In the prosthetic phase we digitally designed custom titanium abutments, and temporaries after integration using 3Shape scanning software. The temps were milled in one solid block of PMMA and hand stacked with pink acrylic. After torquing in abutments, patient was now ready to see his dentist for final crowns. If the design of the temporaries and esthetics are acceptable, the final restoration can be milled out of zirconia and delivered without taking final impressions. In this case patient requests modification of temp design before final delivery. The digital work up and design of the guides should make the procedure more predictable, shorter, with less chance of complications in the end.

To be able to view more about this case along with other cases like this one please visit our Facebook group: Implants in Black and White

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