

Sleep watching

ASEAN SLEEP TECHNOLOGY NEWSLETTER NEWS / OPINIONS / INSIGHTS



DR. MANGAYARKARASI RAMANATHAN

Consultant in Respiratory Medicine at Taiping Hospital in Malaysia, MD, MRCP, RPSGT, Certified Sleep Physician (WASM)

She passed the RPSGT and Sleep Medicine exam conducted by World Association of Sleep Medicine (WASM) in 2017 and is currently very active in the practice, training and research of Sleep Medicine. She has had the privilege of being trained in Sleep Medicine at the Chulangkorn University in Thailand for 6 months.

Interview with Dr Mangayarkarasi Ramanathan on Sleep lab in Taiping Hospital Malaysia

When was the sleep lab started?

Sleep lab was established in Hospital Taiping on 12th April 2017.

What is the waiting time in your sleep lab?

The average waiting time for a patient to get an appointment in our sleep lab is 60 to 90 days.

Are you doing any home sleep tests? If yes, how many per year?

Yes we are doing home sleep testing, about 20 per year.

How many beds does the sleep lab have for level 1 sleep study?

Our Sleep lab is equipped with One Sleep bed.

What type of diagnostic studies are done in the sleep centre?

We do the following procedures in our Sleep lab- Full night polysomnography, Split Night Study and Multiple sleep latency test.

What type of PAP titration facilities are available at your sleep centre?

Our sleep lab is equipped with facilities for doing CPAP and all types of BIPAP titration.

What are the educational/training opportunities available for doctors and technicians at your sleep centre, especially for candidates from other countries?

We conduct frequent sleep training for all category of staffs including sleep technicians and doctors. We have hands-on training for polysomnography hook-up and interpretation almost daily. We are able to accept trainees from other countries. Applications can be made via MOH Malaysia.

How many sleep techs are employed at the sleep centre? What are their day time and night time duties?

We have 2 Full time sleep technician and 3 part time sleep technicians. The full time sleep technicians conduct sleep studies two nights per week. During the day, they interpret sleep studies, conduct MSLT, assist in sleep clinics or perform desensitization for patients who can't adapt to CPAP. The part time sleep technicians perform sleep study one night per week. During the day they have other core duties.

How many level 1, level 3 studies, PAP titration studies, MSLT and MWT are done in one year?

About 180 cases of full polysomnography, 80 cases of PAP titration studies and about 8 MSLT cases. We have not performed MWT yet.

What are the contact details of your sleep centre- address, phone no., email and website?

ADD: Quater 2271 A SLEEP LAB HOSPITAL TAIPIING

EX-1335

EMAIL: respiratory_unit@yahoo.com

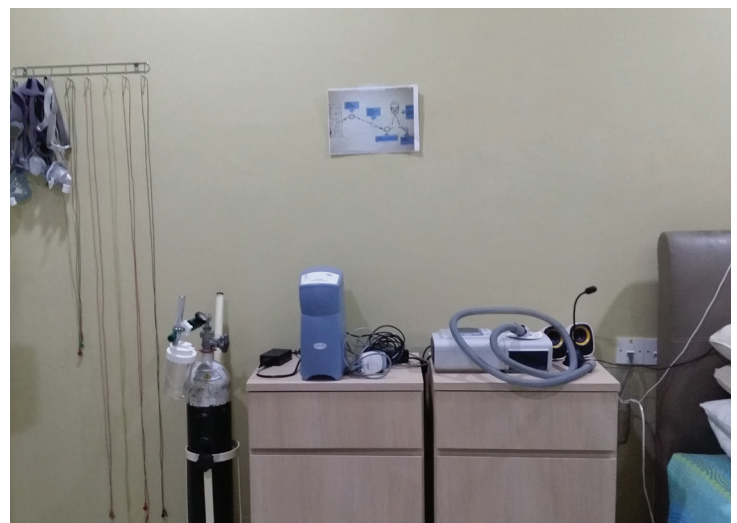


Team photo

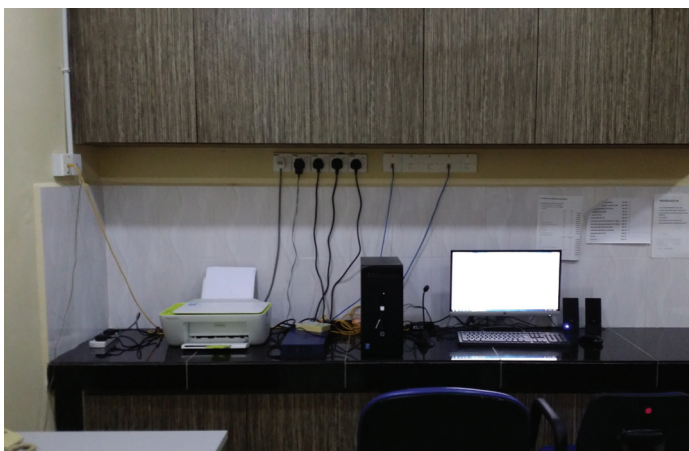
From left to right:

Standing: Sr Loganayagi, Sn Syazwatie, Jm Mariam, Ma Yerekghah,
Jm Nadzirah, En Ridzuan, En Ganesh, En Hamizan

Sitting: Dr. Mangayarkarasi Ramanathan, Dr. UmaDevi



Diagnostic and PAP equipment in Sleep lab



Sleep lab control room



Sleep lab photo



MR. TAWATCHAI PAN-UCHAWAN

Sleep Technician Siriraj Sleep Center Faculty of Medicine Siriraj Hospital, Mahidol University, Thailand

I have been working for Mahidol University since year 2000. I started as a Medical science technician and in 2011 I was posted as Sleep Technician in the Sleep lab. In the sleep lab we have to manage different sleep disorder cases, some of which are challenging cases with multiple disorders. I am glad that we are able to manage most cases successfully with good clinical outcomes. I am very happy and proud of my role in making meaningful change in patients' lives.

Personal Opinions of Sleep Technologist

Why did you decide to become sleep technologist?

I completed my Master's degree in Medical Instrumentation in 2008. At that time one of my friends introduced me to the Sleep Center in Siriraj hospital (Mahidol University). It was a newly set up unit and was looking for professionals to work in the Sleep lab. I joined this Sleep lab as a Sleep technologist.

What is the most challenging aspect of your profession?

In my opinion the most challenging aspect of this profession is choosing the right PAP treatment for different Sleep Apnea patients for a successful treatment. It is very satisfying once the patient is successfully treated with PAP therapy and has a better quality of life. Improving patient's quality of life has become my passion and this drives me to give my best in everyday work. Sleep is very important part of anyone's life and treating Sleep apnea improves quality of sleep.

What is the biggest change in the profession since you began?

Before becoming a Sleep tech I had an impression that snoring is a sign of deep sleep. I did not realize that snoring may be a sign of a medical problem like Sleep

Apnea. One of the biggest changes in my thinking after becoming a sleep technician is that snoring is one of the manifestations of underlying Sleep apnea and treating it not only improves patients' quality of life but also that of bed partners.

What factors do you think affect patient adherence to CPAP?

I think that the following three factors affect patients adherence to CPAP:

1. Lack of awareness that CPAP can cure Sleep apnea
2. Price of CPAP
3. Patient's attitude towards Sleep apnea and CPAP treatment.

What factors tend to influence patient choice of mask?

In my opinion the following factors influence patient choice of mask:

1. Material of the mask. It should be a perfect combination of comfort and durability.
2. Proper sizing of the mask
3. Proper fitting of the mask
4. Mask being light in weight

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DR. DEEPAK SHRIVASTAVA
MD, FAASM, FACP, FCCP, RPSGT, University of New York and University of California, Davis

Professor of Medicine, Sleep, Pulmonary and Critical Care, UC Davis School of Medicine

Deepak Shrivastava is a sleep physician in California. He is devoted to medical education and research. Dr. Shrivastava is board-certified in sleep medicine, pulmonary medicine, critical care medicine, internal medicine and polysomnography technology.

RPSGT Exam Corner – Frequently Asked Questions

- 1 Instructions for MSLT prior to the test are:**
- A. Lie quietly in a comfortable position with your eyes closed
 - B. Try as much as possible to fall asleep
 - C. Try as much as possible to stay awake but don't pinch yourself
 - D. Stay in bed and do not move around

- 2 Common mode rejection requires that electrode impedance be:**
- A. Should be extremely low
 - B. Should be balanced
 - C. Should be lowest at the ground electrode
 - D. Should be at least 200 ohms

- 3 The highest priority in fire safety is:**
- A. Rescue
 - B. Alarm
 - C. Contain
 - D. Evacuate

- 4 The recommended lead for ECG monitoring during Polysomnography is:**
- A. Modified lead II
 - B. Lateral decubitus
 - C. Right arm to left arm
 - D. V12

- 5 Sleep recordings in children must include:**
- A. Pulse transit time
 - B. Peripheral arterial tone
 - C. Masseter EMG recording
 - D. Carbon Dioxide monitoring

ANSWERS

Question 1:

Answer is A. Lie quietly in a comfortable position with your eyes closed

Question 2:

Answer is B. Should be balanced

Question 3:

Answer is A. Rescue

Question 4:

Answer is A. Modified lead II

Question 5:

Answer is D. Carbon Dioxide monitoring

Sleepwatching

Sleep watching past issues

To access the past issues of sleep watching, please go to the below webpage
www.philips.com.sg/healthcare-consumer/sleep-apnea/resources#sleep-physicians-newsletters

Letters to the Editor:

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