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Diagnosis of sleep-disordered breathing in patients with acute ischemic stroke

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Statement of the Problem & Aim: Sleep-disordered breathing (SDB) is frequent in stroke patients and leads to poorer outcomes and increased risk of mortality and recurrent stroke. In laboratory conventional polysomnography is rather expensive and not routinely practical in acute period of the disease. The aim of the present study was to estimate the prevalence and structure of SDB in patients with acute ischemic stroke using portable sleep testing device.

Methods: In 2017-2018 there were examined 37 patients with ischemic stroke within 72 hours from symptoms onset (24 male, 13 female, average age 60.3±10.4 years). A portable sleep testing device was used to identify SDB. It recorded the following data during the patient's night sleep: respiratory nasal airflow, snoring, blood oxygen saturation, pulse, number of apneas and hypopneas and calculated apnea-hypopnea index (AHI). The study did not require specially trained medical staff and was carried out in patients with motor and speech disorders.

Results: 30 patients (81.1%) were found to have SDB (22 male and 8 female, average age 61.8 ± 10.5 years). The severe SDB (AHI 30.5-42.0) was detected in 5 patients (16.7%), moderate (AHI 17.4-27.0) and mild (AHI 6.5-14.7) in 10(33.3%) and 15(50%) patients respectively. Average sleep duration was 5.7 ± 1.2 hours.

Conclusion: SDB is a widespread pathology among patients with ischemic stroke with a predominance of mild and moderate forms of respiratory disorders. Portable sleep testing device is a simple and convenient screening tool for early diagnosis of SDB in patients with acute ischemic stroke.

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