
Preface

In 2007, at the time of the first edition of this book, sleep medicine was a discipline that had only just attained AMA subspecialty status. The epidemiological data current to that time had revealed obstructive sleep apnea (OSA) to be a risk factor, perhaps the primary risk factor, for cardiovascular disease. It was therefore just being appreciated that OSA was a dangerous and incredibly common condition. As this information slowly filtered out to physicians and the general public, sleep labs were being opened at an exponential rate. Unprecedented levels of applications for training and board certification in sleep medicine were made by physicians in numerous outside specialties. The first edition of *Primary Care Sleep Medicine* addressed the need for a general text in sleep medicine oriented to the primary care physician that was of sufficient complexity to be of value for physicians who were working towards board certification in sleep. It was very successful in achieving that goal. In its attempt to be a broad and comprehensive summary of the entire field of sleep medicine the first edition was both widely accepted and positively reviewed, and consequently it underwent a number of re-printings [1, 2].

Given the prevalence of sleep disorders, today, the field of sleep medicine has entered into a new era of care and concern. Sleep disorders are treatable causes of morbidity and mortality. OSA is still extremely common and is markedly underdiagnosed and undertreated. It continues to be an important cause of hypertension and heart disease as well as cardiac arrhythmias, waking cognitive impairment, metabolic disorders, and obesity. Chronic insomnia negatively affects the quality of life of nearly a third of the population. The societal cost of sleep disorders is simply enormous [4] (Wade 2011). This includes fall-asleep crashes and loss of lives [3] (Papp et al. 2002).

The field of sleep medicine has been successfully offered solutions to these serious healthcare needs, but nevertheless continues to face challenges. The failure of some sectors of the general and medical community to appreciate the broader significance of sleep difficulties has been compounded by growing restrictions in reimbursement for sleep medicine treatment. Despite the scientific evidence that sleep medicine produces long-term health benefits, payers have expressed increasing dismay at the cost of sleep studies. New protocols for evaluation and treatment have been developed that utilize less expensive, and lower quality, screening systems, envisioning the primary care physician as the conveyor of both diagnosis and treatment for the common sleep medicine diagnoses of sleep apnea and insomnia. Today, sleep labs are closing, and many sleep medicine physicians are returning to their primary

specialties of care. The primary care physician and the primary care health extenders are envisioned as the new primary specialists for the diagnosis and treatment of the sleep disorders. The consequence of these developments is that the field of sleep medicine has been consigned to the primary physician's growing roster of responsibilities. Unfortunately, sleep medicine is rarely included in the curricula of medical schools or in non-sleep medicine residency training. These developments reinforce the urgency of having a comprehensive text, which can assist the primary care physician with up-to-date information on the sleep medicine field.

This new edition of Primary Care Sleep Medicine strives to fulfill this need. This updated volume represents the cutting edge of knowledge for the field, with summaries of the latest research on new diagnostic tests, medications, and therapies. At the same time it is written with the clinician rather than the researcher in mind, with clear figures, tables, and screening tools for clinical practice. Its chapter authors are among the leaders in the field of sleep medicine, and yet to the greatest extent possible they are clinicians with a primary care focus. Obviously we are biased, but we genuinely believe that the current volume is the ideal text. It strikes a vital balance of being fairly short and yet being comprehensive while first and foremost providing the key information needed by the new specialists in primary care sleep medicine.

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Primary Care Sleep Medicine

A Practical Guide

Pagel, J.F.; Pandi-Perumal, S.R. (Eds.)

2014, XVI, 372 p. 73 illus., 41 illus. in color., Softcover

ISBN: 978-1-4939-1184-4