

## Sleep apnea linked to sleepwalking, hallucinations and other 'parasomnias'

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Nearly 1 in 10 patients with obstructive sleep apnea also experience "parasomnia" symptoms such as sleepwalking, hallucinations and acting out their dreams, a Loyola University Chicago Stritch School of Medicine study has found.

Researchers examined records of 537 adult <u>sleep apnea</u> patients who were evaluated at the Loyola Center for Sleep Disorders in Maywood and Oak Brook Terrace. Fifty-one patients, or 9.5 percent of the total, reported one or more types of parasomnia symptoms.

Parasomnia complaints included sleep paralysis (21 patients), sleeprelated hallucinations (16 patients), acting out dreams (11 patients), sleepwalking (5 patients) and eating while asleep (one patient).

Results were reported at Sleep 2009, the annual meeting of the Associated Professional Sleep Societies, held this year in Seattle.

Obstructive sleep apnea is caused by a partial or complete blockage of the airway. Each time this happens, the brain becomes aroused, in order to resume breathing. This is disruptive to sleep, and the patient can feel chronically tired during the day.

Earlier studies found that <u>obstructive sleep</u> apnea is associated with a higher risk of high blood pressure, heart attacks, stroke, obesity, diabetes, heart failure and irregular heartbeats. The new study suggests that apnea also is linked to increased parasomnia symptoms.



Parasomnia disorders include sleep paralysis (brief episodes of being unable to move), hallucinations during the state between waking and sleeping, acting-out dreams (punching, kicking, crying out, etc.) and walking, eating or even driving while asleep.

Because it interrupts sleep, apnea can set a person up for parasomnia, said Dr. Nidhi S. Undevia, principal investigator of the study. "If you have a predisposition to parasomnia, apnea could make it worse," Undevia said. Undevia is medical director of the Loyola Center for Sleep Disorders and an assistant professor in the Department of Critical Care Medicine at Loyola University Chicago Stritch School of Medicine.

Undevia said doctors should ask apnea patients if they have parasomnia symptoms. "We need to start asking, because we might be missing potentially dangerous or harmful behaviors," she said.

Other co-authors are Loyola sleep specialist Dr. Sunita Kumar, an assistant professor in the Department of Critical Care Medicine at Stritch School of Medicine and lead author Dr. Mari Viola-Saltzman, a sleep medicine fellow at the University of Washington. During the course of the study, Viola-Saltzman was a neurology resident at Loyola University Hospital.

Viola-Saltzman said that, in addition to screening patients for snoring, apneic spells, disrupted sleep and daytime somnolence, physicians "may also consider asking about parasomnia symptoms as another tool to indicate whether the patient may be suffering from obstructive <u>sleep</u> apnea."

Source: Loyola University Health System (<u>news</u> : <u>web</u>)



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