A QUALITATIVE STUDY OF PUBLIC ONLINE DISCUSSION FORUMS: EXPLORING PARENTS' CONCERNS ABOUT CHILDREN'S SLEEP PROBLEMS AND VIEWS ABOUT ONLINE, COMMUNITY AND PRIMARY CARE SUPPORT

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Introduction Chronic insomnia is common in children. Behavioural interventions are effective.1 A systematic review (pending publication) revealed UK research about primary healthcare (PC) management is limited. Parents seek advice online,2 however, no published research to date has explored parents’ discussions online about PC management. This qualitative study explored (in online discussions) parents’ concerns/expectations about children’s sleep problems, awareness of online, PC, and community management resources, and perceptions of management within PC.

Methods Two public online discussion forums were searched for parents’ discussions about children’s sleep problems. Eligible threads were analysed with Braun and Clarke’s reflexive thematic analysis.

Results Ninety-three threads were included.

Five main themes were developed. Parents had many ‘concerns about children’s sleep problems’ and were emotional/practical support for one another; ‘parents experiences or sharing advice online as a resource’. Parents expressed little regarding PC but had ‘mixed experiences and perceptions of community-based PC professionals’ and ‘limited experiences and perceptions of general practice’. They often discussed ‘other resources for supporting parents with child sleep problems’ (e.g. apps, private sleep consultants).

Discussion Parents may have unmet management needs, act as resources for one another, and use non-healthcare resources, however the accuracy of these resources must be explored. The management of chronic insomnia within PC specifically must be further explored.

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REFERENCES


A SINGLE CENTRE, RETROSPECTIVE STUDY

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COVID-19 pandemic changed the mode of service delivery for Obstructive sleep apnoea (OSA) patients. Decisions related to the interventions, including Continuous Positive Airway Pressure (CPAP) were taken in telephone clinics compared to conventional face to face appointments.

Aim To look at the impact of new service mode delivery on OSA syndrome management.

Study Population and Methods Patients were randomly selected from all newly diagnosed OSA cases attending sleep and ventilation clinic. One hundred ten patients were selected in the Pre-COVID group (June 2019 to February 2020) and 98 in the Post-COVID (June 2020 to January 2021).

Compliance reports were generated 30 days post CPAP trial. Demographic and clinical data were analysed. Mann-Whitney U and ANOVA tests were used for nonparametric data, and chi-square test for parametric data.

Results CPAP compliance (measured as% of CPAP usage >4 hours/night) on 30 days data were slightly higher in post-COVID group (median 57.0, IQR 85) compared to pre-COVID group (median 38.5, IQR 69); p = 0.141. Average hours of CPAP usage were significantly higher in the post-COVID group (median 4.46, IQR 5.40) than the pre-COVID group (median 3.02, IQR 5.06); p-value 0.034 (table 1). There were trends supporting better compliance among female...
Pseudo-obstructive events in spinal muscular atrophy as a potential marker for disease progression

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Introduction Sleep disordered breathing (SDB) is common in children with spinal muscular atrophy (SMA) as a result of respiratory muscle weakness. However, SDB events are currently scored according to criteria created for healthy children.

This study aims to add to previous evidence 1,2 that SMA type II patients have respiratory events (we defined them as ‘pseudo-obstruction’) which do not conform to the current AASM guidelines for obstructive or central events. They are the result of paradoxical breathing and REM-related shallow breathing.

Methods Respiratory events were defined as either ‘obstructive apnoea’ (OA), ‘central apnoea’ (CA), ‘central hypopnoea’ (CH), ‘obstructive hypopnoea’ (OH) as per AASM guidelines. We additionally defined the criteria for ‘pseudo-obstruction’ (PO) based on previous publications (figure 1).1

Trained sleep physiologists were provided 8 ‘test’ epochs randomly chosen from either SMA II or other patients. Physiologists were asked to designate the respiratory events they deemed most appropriate for each epoch, blind to diagnosis of the patient. Interscorer reliability tests were performed against the gold standard for each event.

Results The average concordance with the gold standard was 75% overall. It was mildly reduced to 67% when looking specifically at POs.

We are currently evaluating whether disease progression is associated with an increase in POs by looking at subsequent yearly sleep studies of 10 SMA II and 1 SMA I patient, self-ventilating in room air, across a 3-year period.

Discussion Future efforts will aim to look more closely at interscorer reliability. Recognising these pseudo-obstructive events may influence treatment.2 Additionally, if these events correlate along the motor and respiratory deterioration, they can be used as markers of response to overnight ventilation and, more importantly, to new available treatments.

REFERENCES

54 Sleep spindles as a biomarker for alpha-synucleinopathies in rapid eye movement (REM) behaviour disorder (RBD)

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Introduction Idiopathic rapid eye movement behaviour disorder (iRBD) is a strong predictor for the development of alpha-synucleinopathies. Electroencephalographic (EEG) oscillations known as sleep spindles are found during non-rapid eye movement sleep. These bursts of neural oscillatory activity are...