18 IMPACT OF AN ONLINE SLEEP AND INSOMNIA TRAINING PROGRAMME ACROSS A MENTAL HEALTH TRUST – USE AND BEHAVIOUR CHANGE

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Abstract 20 Figure 1 Correlation between AHI as measured by WatchPAT and Embletta

Aims To validate WP against polygraphy in pre-bariatric surgery patients with clinically suspected OSA and a BMI>35 and to assess patient acceptability of WP.

Method AHI was measured simultaneously with WP and Embletta. Outcome measures were 1) autoscored AHI from WP and 2) manually re-scored AHI from Embletta. Agreement between AHI from Embletta and WP was assessed using intra-class correlation coefficient (ICC), bland Altman and ROC plots.

Results 28 patients (22 female/6 male, mean ± SD age 44.1 ± 11.6, BMI 45.7 ± 7.5) participated. One study failed due to the patient removing the WP probe prematurely. AHI was higher in WP than Embletta (28.1± 17.9 versus 15.0 ±13.4; p<0.05). There was a strong positive correlation between WP and Embletta AHI measurements (ICC 0.876 (95% CI 0.75-0.94; figure 1)). Bland Altman plots revealed a systematic bias; differences diverging at higher AHI values. A ROC plot revealed high sensitivity and specificity for an AHI >15 (Area under the curve 0.917; p<0.05). 97% of respondents reported that WP would be acceptable to them if introduced into the bariatric surgery pathway.

Discussion WP accurately estimates the AHI in pre bariatric surgery patients, has a low failure rate and is clinically acceptable in this group. Further larger scale studies are needed to confirm these findings before incorporating into clinical guidelines.

20 VALIDATION OF WATCHPAT 300 FOR PRE-OPERATIVE OF OSA SCREENING IN PATIENTS UNDERGOING BARIATRIC SURGERY

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Introduction Undiagnosed obstructive sleep apnoea (OSA) is increasingly recognized as a serious post-operative risk with bariatric surgery, hence increasing demand for pre-operative screening and a need for simpler ways for screening than the clinical standard, respiratory polygraphy, to mitigate strain on sleep services. WatchPAT 300 (WP) is a finger-mounted sensor that uses peripheral arterial tonometry to estimate the apnoea hypopnoea index (AHI). While its use is increasing it has not yet been validated in patients with a BMI >35, the target population in bariatric surgery.

Discussion WP is a novel use of the NHS ESR system which allows e-learning for sleep medicine in a format that can be used to validate the effectiveness of training. It allows a complete range of health care professionals in secondary care to access free, online sleep medicine education.
through professional networks and social media. The survey asked CPs to record their perceptions on how often patients sought advice on several common sleep problems, as either ‘very often’ (most days), ‘often’ (1–3 times/week), ‘occasionally’ (1–3 times/month) or ‘rarely’ < once/month).

Other areas included self-rated confidence dealing with requests on sleep problems (1–5 Likert scale: 1 being ‘not confident’ and 5 ‘confident’), estimated proportion of GP-referred requests for advice and the perceived need for community-based sleep-related services. Data analyses were descriptive.

Results Completed responses were obtained from 120 CPs. Results summarised in figures 1 and 2. Combining ‘often’ and ‘very often’, the most common sleep-related problems encountered were insomnia (60%) and sleepiness/tiredness/fatigue (54%).

Half the CPs self-rated their confidence as 3 on the ‘confident - not confident’ scale. Fifty-seven percent reported that they received no undergraduate training on sleep problems. Proposed pharmacist involvement in sleep screening/signposting services or a pharmacy-based intervention/referral programme was supported by 78% and 70% respectively.

Fifty-eight percent of CPs were ‘very often’ or ‘often’ asked about symptoms of OSAS, with the majority (93%) asked ‘occasionally’.

Discussion CPs frequently encounter patients with symptoms of sleep disorders, but their confidence and training in dealing with these is lacking. This study highlights the need for specialist sleep training for pharmacists and the development of pharmacy-based services to support and improve patient outcomes.