

Sleep medicine: Present and future

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Submission: 17-05-12

Accepted: 17-05-12

Although sleep medicine is a relatively new specialty, it has evolved greatly over the past three decades. The introduction of positive airway pressure therapy as a noninvasive method to treat obstructive sleep apnea (OSA) in 1981 resulted in a significant increase in interest in sleep apnea and all sleep disorders in general.^[1] Since then, the professional makeup of sleep medicine has grown significantly enough to justify the recognition of sleep medicine as an independent specialty. As a new specialty, sleep medicine encounters several challenges that evolve as the recognition of and demand for the service increase. Recently, the American Academy of Sleep Medicine (AASM) issued a task force report titled "The Future of Sleep Medicine" that aimed to define a strategy and vision for the field of sleep medicine for the future.^[2] However, such recommendations may not suit developing countries such as Saudi Arabia, in which the specialty is not well recognized or established. Therefore, we need to develop strategies and a vision that will increase the recognition of the specialty in Saudi Arabia and improve the education and practice of sleep medicine. However, the available local data and experience must be considered.

Although sleep medicine services and the number of practicing specialists in Saudi Arabia have increased over the past few years, the specialty still faces major challenges. A discussion of all of the challenges facing the specialty in Saudi Arabia is beyond the scope of this editorial, but the reader can refer to a recent review that discussed most of the challenges that face the specialty in detail.^[3] In this editorial, we address the obstacles that hinder the establishment of sleep medicine as an organized, distinct medical specialty in Saudi Arabia and other countries in the region. In my view, the following two issues must be addressed at this stage: (A) accreditation of the specialty and (B) providing specialty education to lead to the graduation of qualified sleep medicine specialists and sleep technicians.

Accreditation of Sleep Medicine Practitioners and Technicians

The practice of sleep medicine is expanding in Saudi Arabia. However, because the specialty is not well recognized by local health authorities, there are no current regulations or standards

for organizing this practice or accrediting qualified practitioners and technicians. The institution of regulations and policies to ascertain the competency of practicing sleep medicine physicians and technicians in this field of medicine is essential. In general, accreditation ensures that practicing physicians and technicians meet the highest competency levels. Therefore, a national licensing system should be developed to license sleep medicine specialists and technicians. Accreditation regulations will serve the specialty, patient care, and the practitioners. Licensing sleep medicine practitioners and technicians will indicate that sleep medicine is recognized by the local health authorities as a distinct medical specialty. This recognition will attract more support for the specialty from decision makers in the health field and put pressure on medical insurance agencies to cover the costs of diagnostic and therapeutic measures for sleep disorders. In turn, this will result in expansion of the provided services while maintaining a high standard of care. Moreover, the sleep medicine services offered by qualified accredited specialists and technicians will result in improved patient care and outcome. In a recent study, Parthasarathy *et al.* demonstrated that the accreditation and certification status of sleep centers and physicians by the AASM was associated with better outcomes in patients with OSA.^[4] Moreover, a recent study demonstrated that adherence to continuous positive airway pressure (CPAP) therapy was better in OSA patients who had a consultation with a qualified sleep medicine specialist before undergoing a diagnostic polysomnography.^[5] In addition, accreditation will define sleep technicians as an independent group. Because sleep technology is not currently accredited or recognized in Saudi Arabia, practicing sleep technicians are placed in nursing or respiratory therapy departments in many hospitals, which in many instances puts great restrictions on the practice, education, and progress of sleep technology. Moreover, the lack of recognition discourages young graduates from pursuing a career in sleep technology.

Education

The number of qualified sleep medicine specialists and technicians in the country is still low and does not meet the increasing demand for service.^[6] The establishment of local training

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10.4103/1817-1737.98841

programs in sleep medicine and sleep technology is a necessity. These local programs are particularly important because enrollment in internationally recognized, formal training programs becomes difficult for foreign graduates. King Saud University has made a major step forward by establishing a fellowship program in sleep medicine. However, we need a national interdisciplinary training program that serves the entire country and meets the expected demand for the service. Because the number of centers for sleep disorders in major teaching hospitals and the number of qualified specialists who did their training in well-established centers for sleep disorders in developed countries have increased, the current environment is appropriate for establishing a national sleep medicine fellowship program.

A previous study has indicated that a lack of trained sleep technicians is the main obstacle facing sleep medicine in Saudi Arabia.^[6] The training of sleep technicians encompasses intensive education, experience, and a thorough knowledge of the technical aspects of data acquisition, analysis, and sleep-induced changes in the physiology of the body. Currently, no training programs for sleep technology exist in Saudi Arabia. Respiratory therapy colleges and programs and academic centers for sleep disorders should collaborate to develop special training programs for sleep technology to meet the increasing demand.

Acknowledgments

This work was partially supported by the National Plan for Science and Technology (King Abdulaziz City for Science and Technology and King Saud University).

References

1. Sullivan CE, Issa FG, Berthon-Jones M, Eves L. Reversal of obstructive sleep apnoea by continuous positive airway pressure applied through the nares. *Lancet* 1981;1:862-5.
2. Strollo PJ Jr, Badr MS, Coppola MP, Fleishman SA, Jacobowitz O, Kushida CA. The future of sleep medicine. *Sleep* 2011;34:1613-9.
3. Bahammam AS. Sleep medicine in Saudi Arabia: Current problems and future challenges. *Ann Thorac Med* 2011;6:3-10.
4. Parthasarathy S, Haynes PL, Budhiraja R, Habib MP, Quan SF. A national survey of the effect of sleep medicine specialists and American Academy of Sleep Medicine Accreditation on management of obstructive sleep apnea. *J Clin Sleep Med*. 2006;2:133-42.
5. Pamidi S, Knutson KL, Ghods F, Mokhlesi B. The impact of sleep consultation prior to a diagnostic polysomnogram on continuous positive airway pressure adherence. *Chest* 2012;141:51-7.
6. Bahammam AS, Aljafen B. Sleep medicine service in Saudi Arabia. A quantitative assessment. *Saudi Med J* 2007;28:917-21.

How to cite this article: BaHammam AS. Sleep medicine: Present and future. *Ann Thorac Med* 2012;7:113-4.

