



Journal search and commentary

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This section is devoted to reporting on a select group of articles which are clinically relevant to sleep medicine and have been published in journals not widely read by the international community of sleep clinicians. We use the following selection criteria: first, clinical significance; second, scientific quality; third, general clinical interest and fourth, educational value. Some preference will be given to articles from journals less known to the sleep field. It is hoped that this will develop a better global coverage of journals. We recognize that any selection of a handful of articles will be somewhat arbitrary. It is, however, hoped that the articles selected will be of interest to you, the reader, so that when you get your copy of this journal you will turn with interest to these pages as one snapshot of the wider world of sleep medicine.

In this regard for this fifth issue the quartet of articles we have selected starts with a very intriguing report that the sleeping brain can anticipate a cognitively planned event, namely a planned early awakening. This cognitively related anticipation is often considered a unique characteristic of conscious action. So much for any lingering thoughts about sleep as a passive process. Cognitive anticipation disrupting sleep also has obvious broad significance for factors contributing to insomnia. The second article uses positron emission tomography and spectral electroencephalogram (EEG) analyses to study the biology of the arousals in the first NREM period of patients with depression. The results indicate not only the expected limbic system involvement but also shows a possible visual arousal network. Moreover, these authors report on a spectral analysis method that may relate better to subjective experience of restorative sleep than do the conventional sleep EEG analyses. This spectral analytic method deserves consideration for evaluation in other sleep disorders where there remains disparity between subjective report and sleep EEG measures. The final two articles focus on sleep apnea. The first examines factors related to sleep onset REM (SOREM) on the MSLT for sleep apnea patients. These authors did not find SOREM occurred in relation to reduced REM observed in sleep apnea, rather it seemed more related to amount of sleepiness and degree of hypoxia during sleep. The final article is in many ways the most clinically promising. The authors are well known for their success in surgically treating sleep apnea. They present here the results from aggressive and generally successful surgery for sleep apnea in morbidly obese patients who are often perceived as being at unacceptably high risk for complications or treatment failure. The information provided, however, does not permit prediction of similar success at other centers illustrating the need for our field to continue its commitment to develop and use standardized techniques and terminology as well as detailed reporting of methodology. Thus, this study not only merits note for the excellent results encouraging further evaluations of these treatments, but also for demonstrating the difficulties and the ultimate benefits of evidenced-based medicine for advancing the quality of care in Sleep Medicine.

We offer these reviews hoping you will find them informative, interesting and perhaps sometimes provocative.