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DON DANBROOK

BCITS Board Member and Treasurer

Don Danbrook is our treasurer and it's easy to see why. He's a Certified General Accountant, and a licensed Real Estate Agent and Mortgage Broker. He also worked for Revenue Canada as a tax collector and auditor and was a Team Leader in Client Services there for a year.

Don grew up in Victoria and now lives in Port Moody. He was a high pressure welder and also worked in the hiring hall for the International Brotherhood of Boilermakers. His life

Don lived in Creekview with Walt Lawrence, Cody Tresierra and the rest of the gang. In 1994 he applied to the CSIL program which was a pilot project at the time.

changed dramatically in 1983 when he fell backwards off a porch and landed on his head. Even though his fall was only about 5ft he broke his spine at C3/4. This happened just before Don's twenty-fifth birthday.

"I was in Shaughnessy Hospital for 6 months and then Pearson for about 16 months. I moved to

Creekview in 1985 and lived there for nearly 10 years."

Don lived in Creekview with Walt Lawrence, Cody Tresierra and the rest of the gang. In 1994 he applied to the CSIL program which was a pilot project at the time. Don sat on a committee with Walt Lawrence and Ministry of Health representatives to determine the appropriate competency requirements for attendants

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...we profile BCITS Treasurer Don Danbrook. There's an interesting article on Sleep Apnea by our respirologist Dr. Road. And there's information on a guide to accessible travel on the Sunshine Coast that we hope you'll find useful now that summer is with us.



Dr. Jeremy Road, PROP's Consultant Respirologist

What is Sleep Apnea?

by Dr. Road

Obstructive sleep apnea is a common condition affecting approximately 4% of middle-aged men and 2% of middle-aged women. Its prevalence is probably even higher: these numbers refer to what clinicians consider significant obstructive sleep apnea. Apnea in this case refers to pauses in breathing of an average duration of 20 seconds but with a range of 10 - 80 seconds.

Snoring is a constant companion of sleep apnea, however not all patients who snore have the condition. The short term consequences of untreated sleep apnea are daytime sleepiness. If left untreated long-term, cardiovascular complications such as hypertension and vascular disease may occur.

Management of Sleep Apnea

Once significant obstructive sleep apnea is suspected, referral should be made to a physician familiar with respiratory sleep disorders. The diagnosis of sleep apnea is made by polysomnography. Polysomnography involves a sleepover in a hospital where multiple complex measurements are made.

Occasionally sleep apnea is diagnosed by overnight oxygen testing which can be done in a person's home. If the apnea is mild and the person is not excessively sleepy, weight loss is a prime treatment intervention. Although not always successful, losing 25 - 30 lbs is often accompanied by a significant reduction in apneic episodes. This reduction is largely because excess adipose tissue around the upper airway decreases with weight loss and the result

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is an improvement in the patency of the upper airway. The upper airway is the part of the breathing passage behind the tongue to just above the vocal cords. Avoidance of medications known to relax muscles around the upper airway can also be effective for mild sleep apnea. Substances known to relax these muscles include excessive alcohol and sedative medications.

If the obstructive sleep apnea is more severe, nasal continuous positive airway pressure (CPAP) is usually offered. Nasal CPAP requires the person to sleep with an external appliance applied to the nose, the mouth or to both. A soft mask is usually used and positive pressure is delivered through this mask via a small machine. In about two thirds of cases, this treatment is effective and patients will notice a marked improvement upon awakening the following morning. There is often a return to the previous level of alertness and energy.

Another option is to use an oral appliance. These are made by specially trained dentists. They require the person to have good upper and lower dentition. Moulds are made over the upper and lower teeth and connected by a titanium bar. The bar can be moved forward, thus protruding the lower jaw which then opens up the upper airway. This treatment is usually well tolerated but may not

eliminate sleep apnea in more severe cases. In the absence of good upper and lower dentition a tongue retaining device can be used. This is a suction cup which holds the tongue in a protruded position, again opening up the upper airway.

Surgery for obstructive sleep apnea can be used when the above measures are ineffective. The success rate unfortunately is not high. The surgical procedure wherein much of the soft palate, uvula and tonsillar pillars are removed can effectively reduce sleep apnea in 30-50% of patients.

However, there may be some disturbance of swallowing function and phonation after this procedure. A less extensive procedure called laser-assisted uvulopalatoplasty (LAUP) is available. LAUP is used mainly for snoring and not sleep apnea.

Newer experimental forms of treatment for snoring are being tested but are not yet recommended for sleep apnea and are not yet widely available. These include somnoplasty, where the soft palate is stiffened, or placement of inflexible objects into the soft palate to again stiffen it. □

PROP's Show and Tell

SEE OLD FRIENDS AND MEET NEW ONES AT THIS GREAT MID-SUMMER EVENT.

Date: Friday, July 21 2006

Time: 2:30 – 7:00 PM

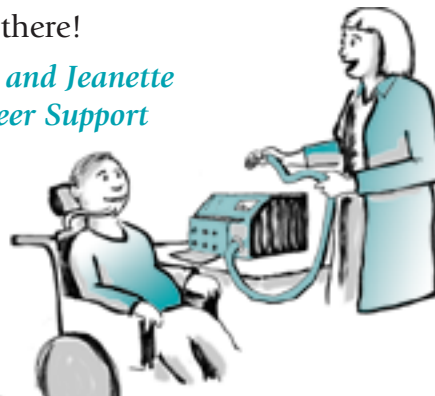
Location: Special Events Room, Pearson Centre, 780 West 57th Ave at Heather Street (free parking)

The purpose of the event is to inform PROP clients, family, friends, volunteers and caregivers about the latest in respiratory technology. There will be a Respiratory Therapist and a Biomedical Technologist present to demonstrate equipment and answer any questions you may have.

A light supper will be served outside if weather permits. Please RSVP to Seka at PROP 1-866-326-1245.

See you there!

*Heather and Jeanette
PROP Peer Support*



WE WANT TO HEAR FROM YOU

If you have a comment, concern or general feedback on any aspect of PROP we want to hear from you. Please email us your ideas to comments@bcits.org.

We're interested in anything that will help us improve our service to you. Your email will be treated in confidence but may be shared with appropriate personnel in order to improve our client service. Your email address will only be used to respond to your feedback. Or you can always call us at 1-866-326-1245. We will be pleased to help you. **SIMON COX**

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Disclaimer

The information contained in this newsletter cannot replace your doctor or other health care provider. While we try to ensure that material is accurate and appropriate, we do not take responsibility for or endorse content produced by other individuals or organizations.

all about us

BCITS acknowledges the financial assistance of the Province of British Columbia. PROP is funded by the Ministry of Health through Vancouver Coastal Health.



“ This new book is aimed at a wide range of people. Slow walkers and their friends and moms with strollers will appreciate it as much as full-time wheelchair users. ”

Sticks and Wheels: A Guide to Accessible Travel on the Lower Sunshine Coast

by Ellen Frank

Now summer has arrived, some of you will be thinking about taking a vacation. News of this book crossed our desk and we thought we'd share it with you. The author's release explains that the book will enable Sunshine Coast visitors and residents to locate accessible recreation, accommodations, shopping, and more.

“*Sticks and Wheels* isn't just for people with mobility disabilities, like me,” says Ellen Frank, Gibsons author and travel agent on wheels. “This new book is aimed at a wide range of people. Slow walkers and their friends and moms with strollers will appreciate it as much as full-time wheelchair users.”

The inspiration for this book was born on a hot summer day three years ago when Ellen, who has multiple sclerosis and uses a variety of mobility aids, went looking for an accessible Sunshine Coast beach. She consulted tourist information, library databases and the Internet to no avail, so she felt it was time to write this book. Drawing on her background as a travel consultant, Ellen published a comprehensive guide that will enable visitors and residents

with mobility concerns to have a great time on the Sunshine Coast—without facing unnecessary barriers.

For more on this book go to: <http://www.sticksandwheels.net> □

DON DANBROOK, CONTINUED FROM PAGE 1

working with ventilator users living in the community. At about this time he bought a condo in North Burnaby and moved out of Creekview. Since then he has purchased a number of properties in Langley and Surrey that he manages.

Don was unfortunately injured, again, in a bus accident in 1996. “I didn't go out for 7 years,” he says of the experience. But he's well back into the swing of things now. He's the Treasurer of the Neil Squire Foundation and he's involved with the Wheels in Motion project. He also volunteers at the University of Victoria with the Chronic Disease Self Management Program.

“TIL has helped me with environmental controls over the years: devices that allow me to turn off the radio, TV and lights etc. PROP serves my respiratory needs. It's great to have the opportunity to sit on the BCITS Board and I'm very happy to serve as its Treasurer.”

And, we are very happy to have you Don. □



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