

# Cardio-Respiratory System during Sleep : Cyclic Alternating Pattern (CAP) and Applications for Decision Support Systems.



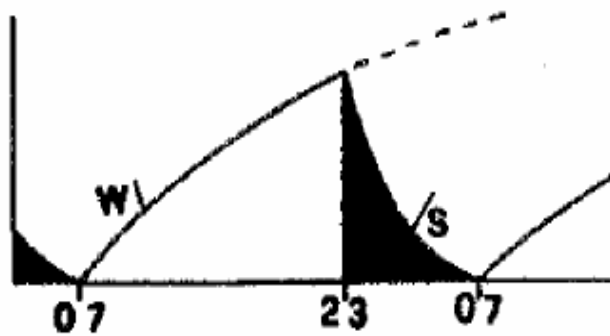
Martin Mendez

# Outline

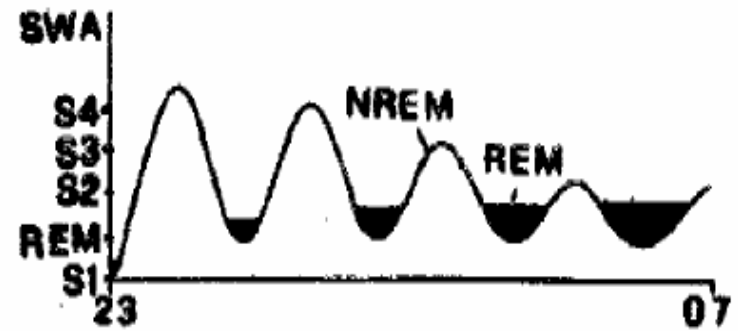
- Sleep
- Macrostructure
- Microstructure (CAP)
  - Effects on Cardio-respiratory system
- DSS for Sleep Apnea

# Sleep

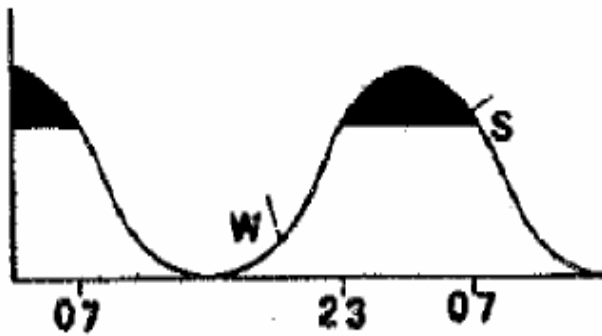
OMEOSTATICO



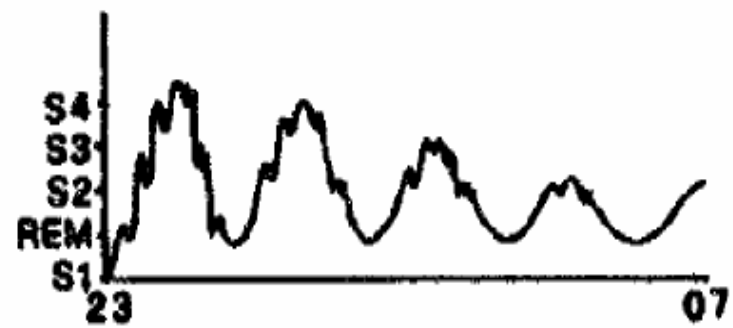
ULTRADIANO



CIRCADIANO

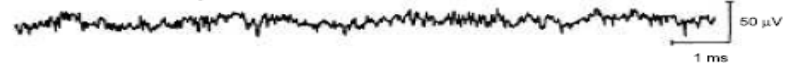


CYCLIC ALTERNATING PATTERN



# Macrostructure

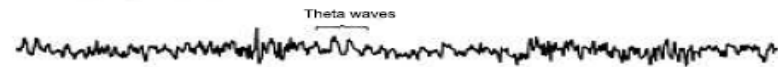
**Awake** - low voltage random - fast



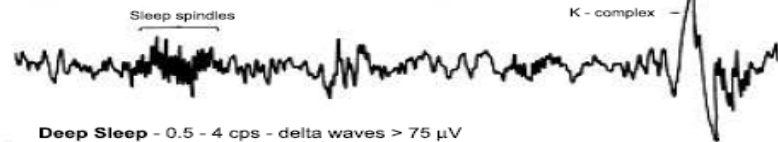
**Drowsy** - 8 to 12 cps - alpha waves



**Stage 1** - 3 to 7 cps - theta waves



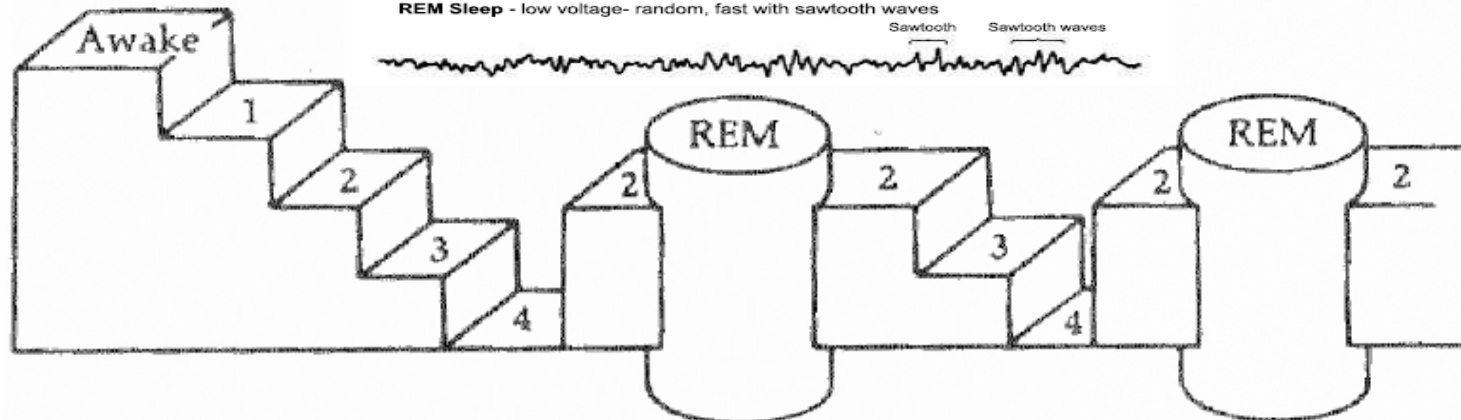
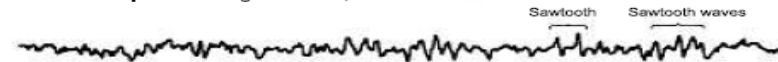
**Stage 2** - 12 - 14 cps - sleep spindles and k-complexes



**Deep Sleep** - 0.5 - 4 cps - delta waves > 75  $\mu$ V



**REM Sleep** - low voltage- random, fast with sawtooth waves



# What CAP Sleep is

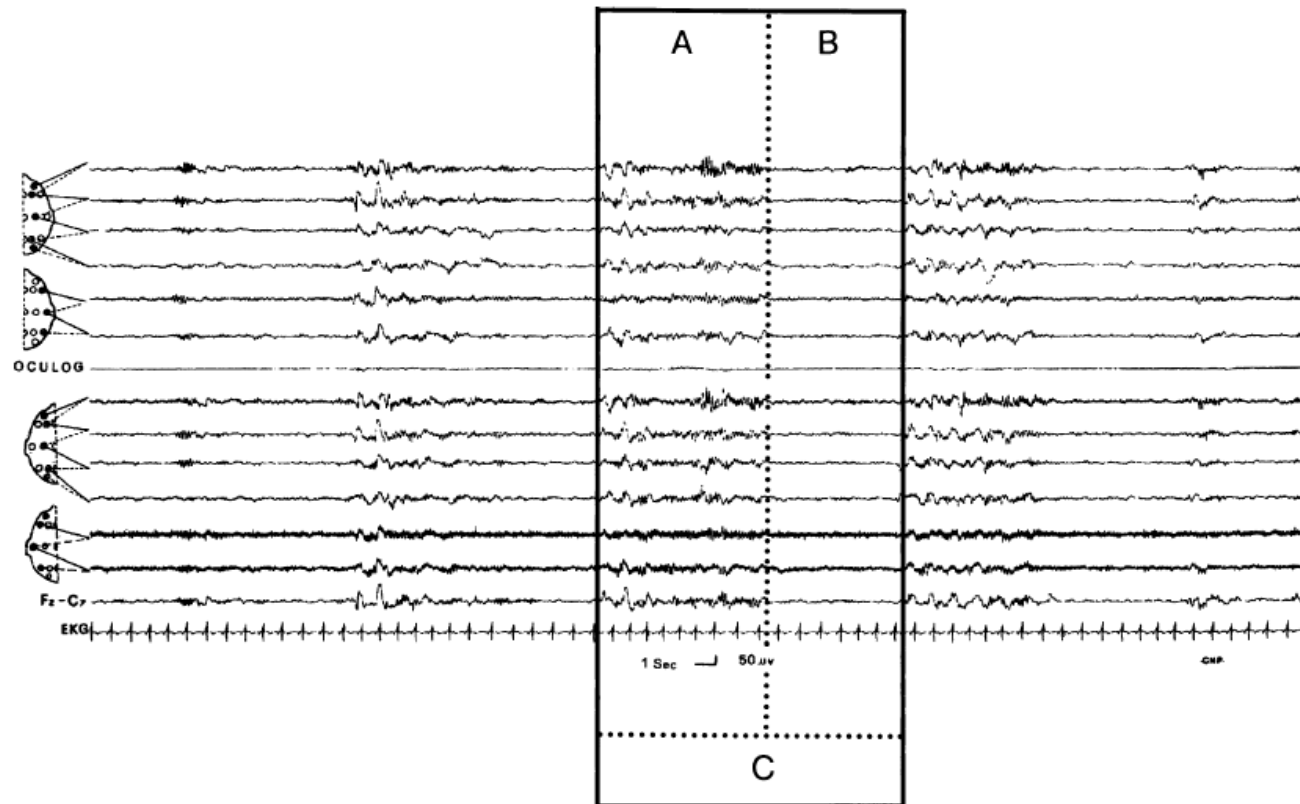


Fig. 1. An example of cyclic alternating pattern (CAP) in sleep stage 2. The box outlines a CAP cycle (C) composed of a phase A (A) and the following phase B (B). Bipolar EEG derivations using international electrode placement; top 6 channels from top to bottom: FP<sub>2</sub>-F<sub>4</sub>, F<sub>4</sub>-C<sub>4</sub>, C<sub>4</sub>-P<sub>4</sub>, P<sub>4</sub>-O<sub>2</sub>, F<sub>8</sub>-T<sub>4</sub>, T<sub>4</sub>-T<sub>6</sub>; bottom 7 channels from top to bottom: FP<sub>1</sub>-F<sub>3</sub>, F<sub>3</sub>-C<sub>3</sub>, C<sub>3</sub>-P<sub>3</sub>, P<sub>3</sub>-C<sub>1</sub>, F<sub>7</sub>-T<sub>3</sub>, T<sub>3</sub>-T<sub>5</sub>, F<sub>2</sub>-C<sub>2</sub>; OCULOG: Oculogram; EKG: Electrocardiogram.

# Players during CAP

CAP is characterized by sequences of transient electrocortical events that are distinct from background EEG activity and recur at up to 1 min intervals.

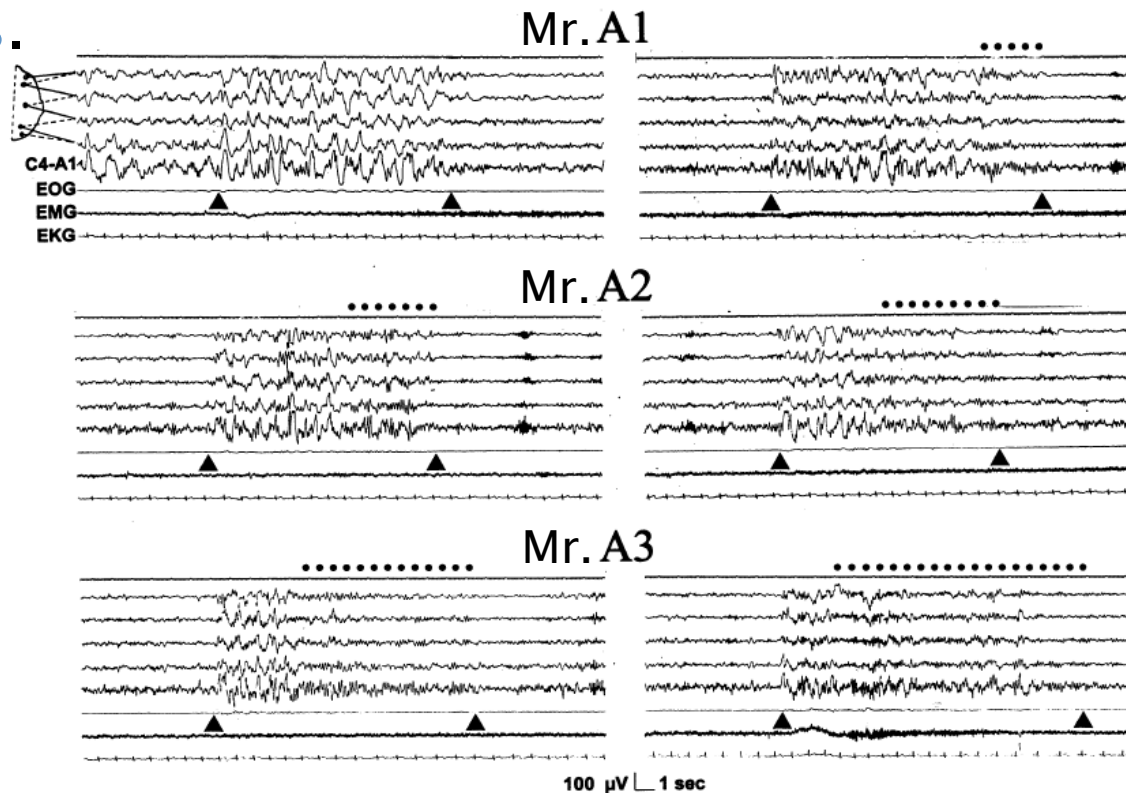
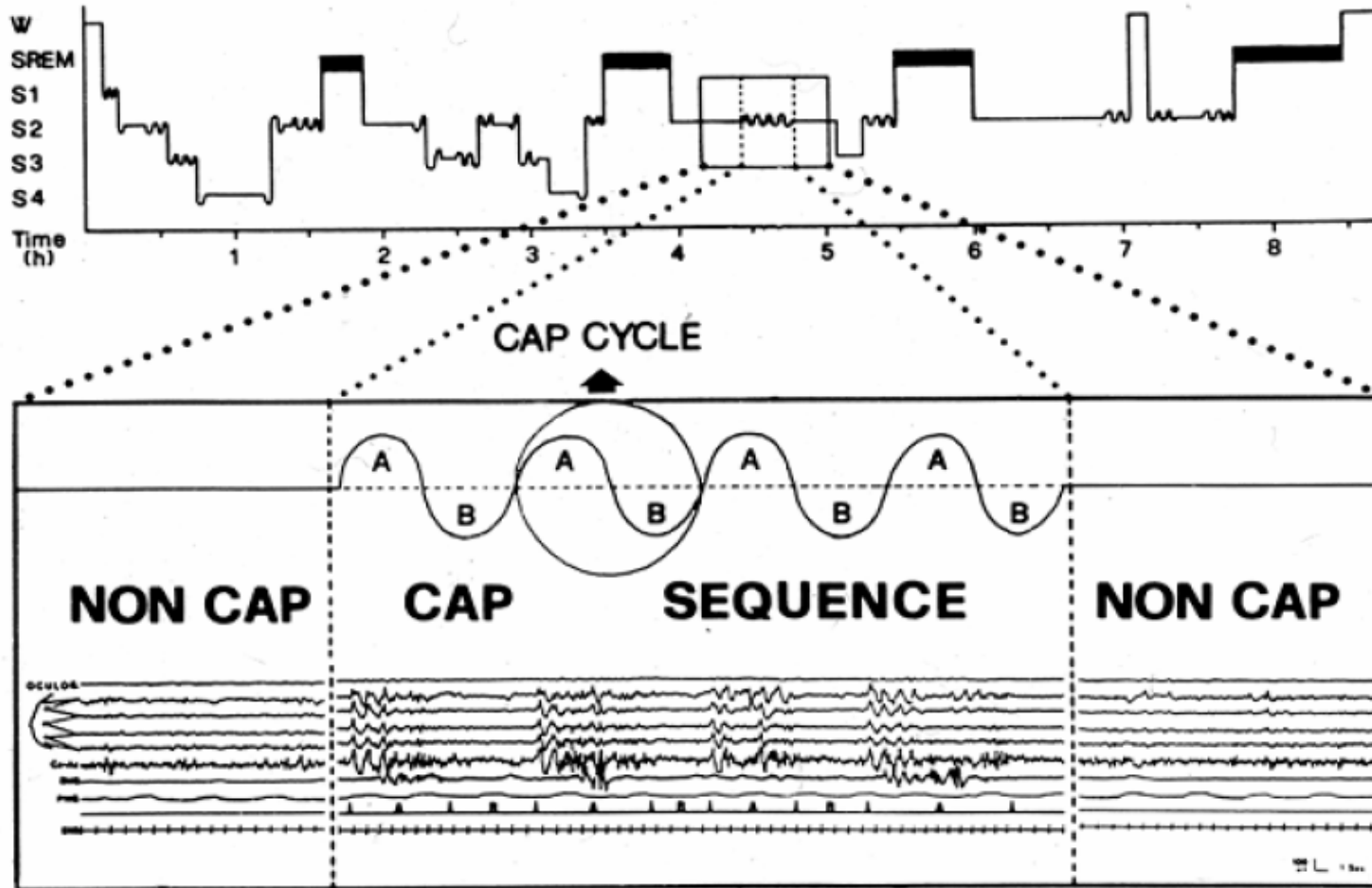
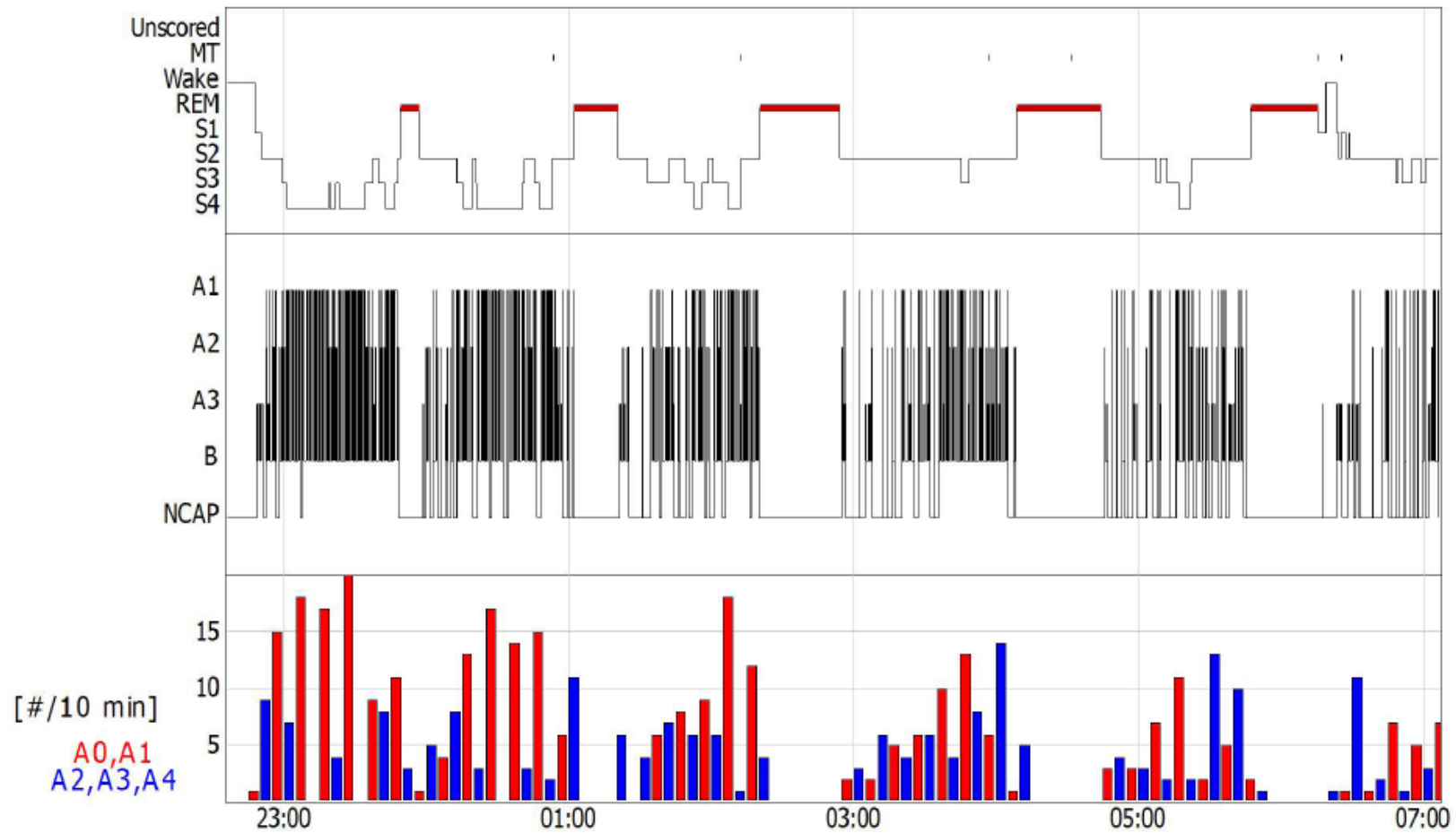


Fig. 17. Phase A subtypes. The dotted spots indicate the fast low-amplitude portion of the phase A. EEG derivation as in Fig. 2.

# CAP Sequence

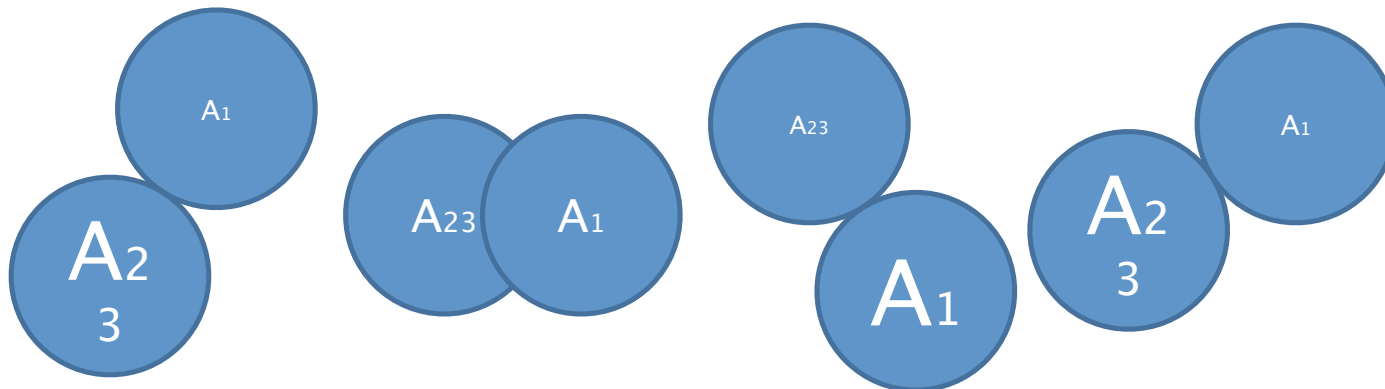
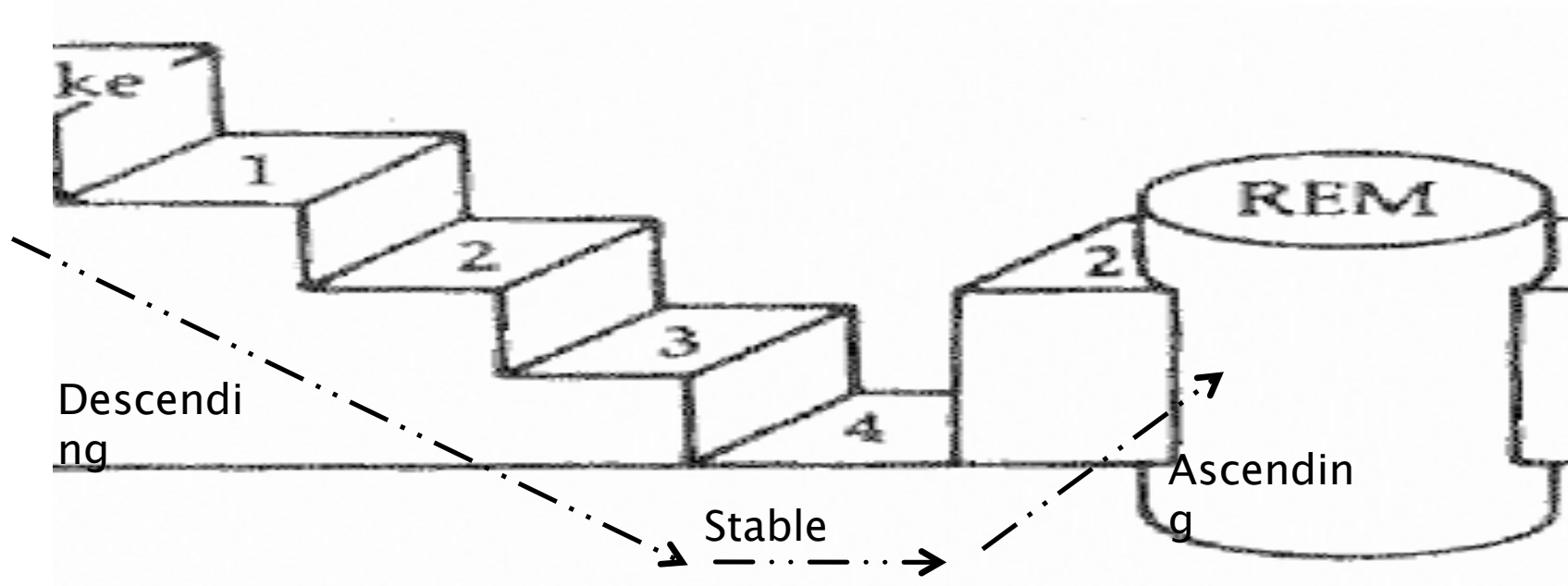


# CAP Analysis

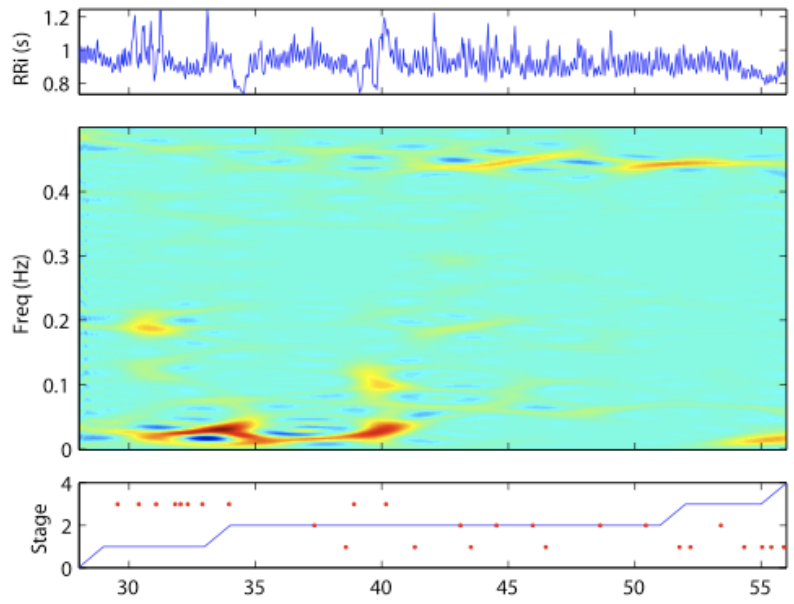




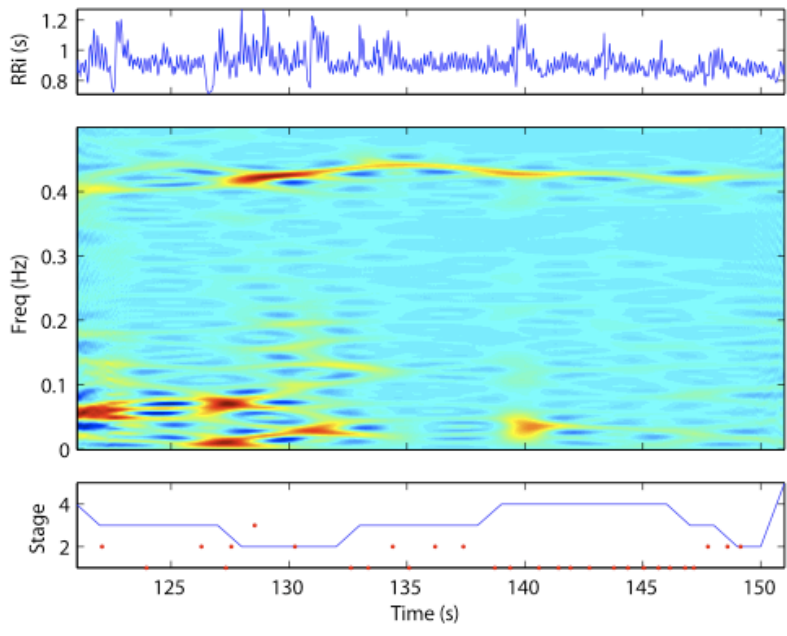
# Mr. $A_1$ and Mr. $A_{23}$



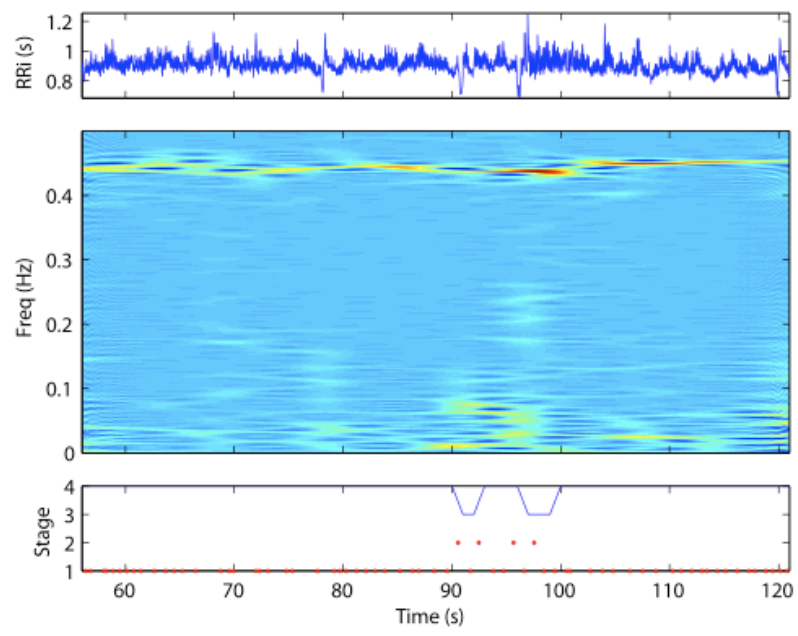
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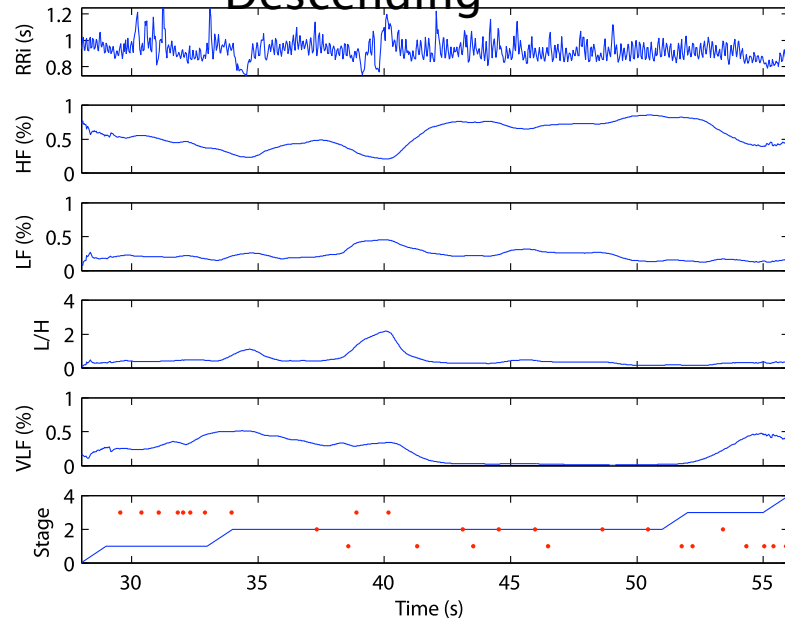
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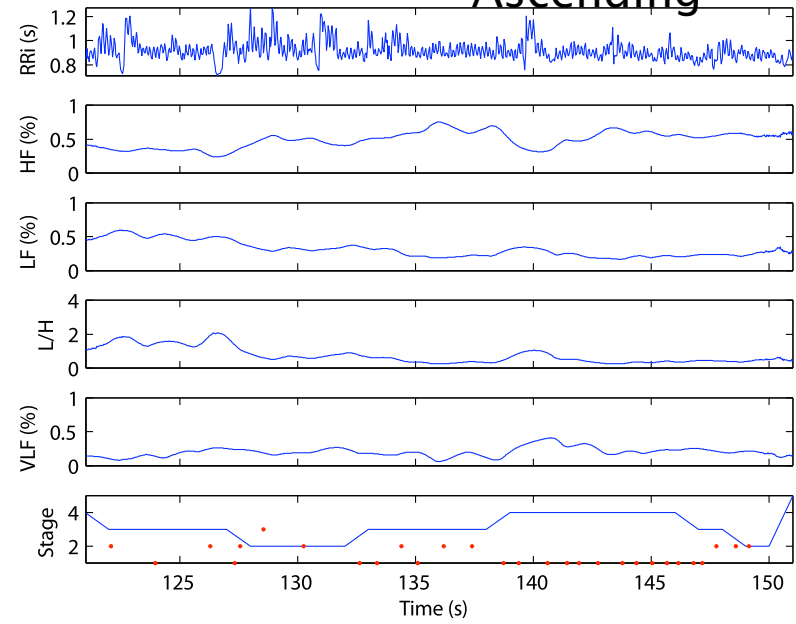
### Stable



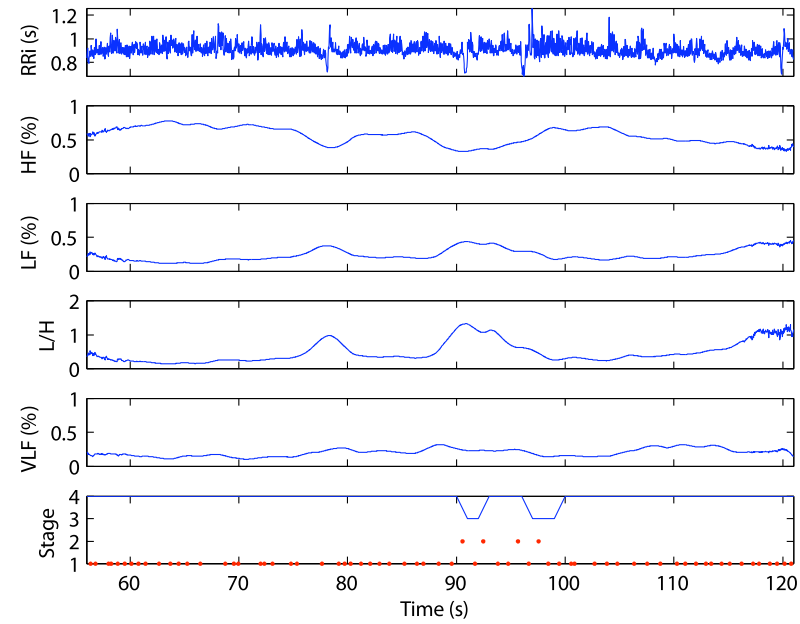
## Descending



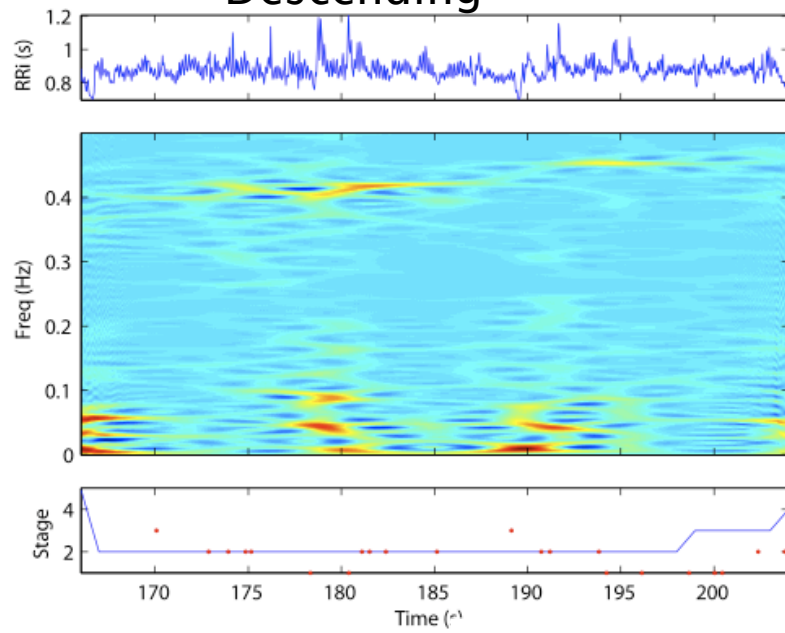
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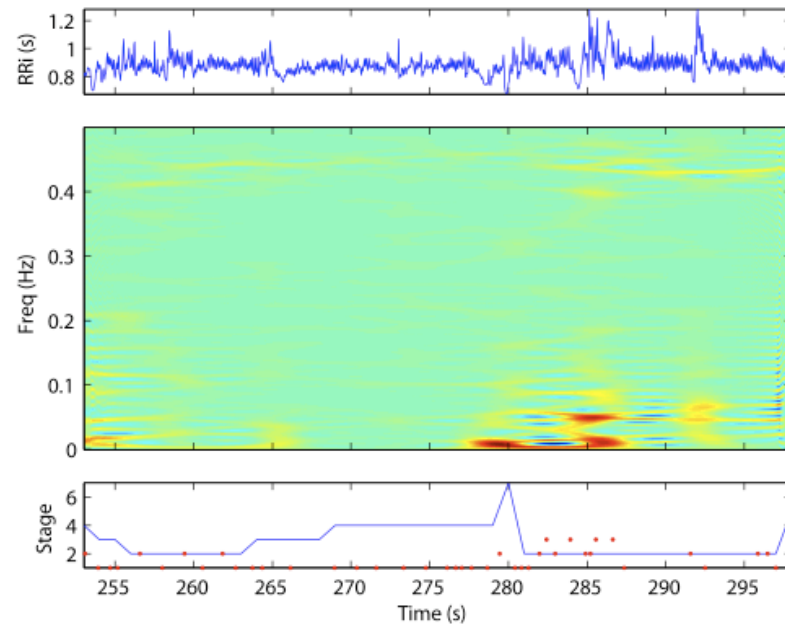
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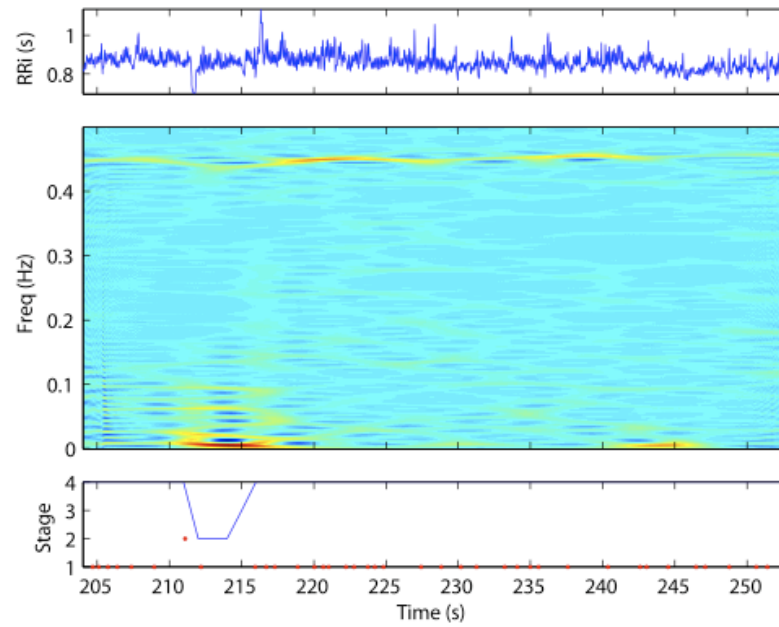
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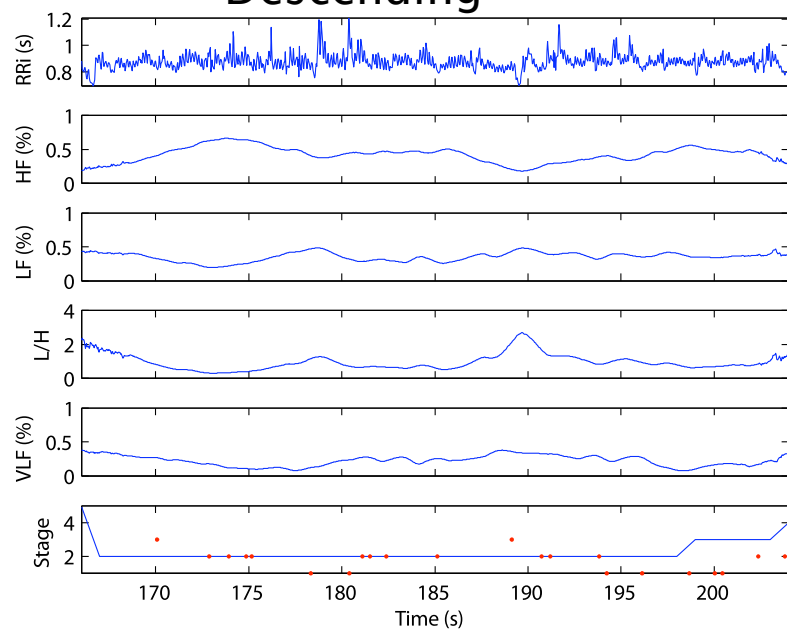
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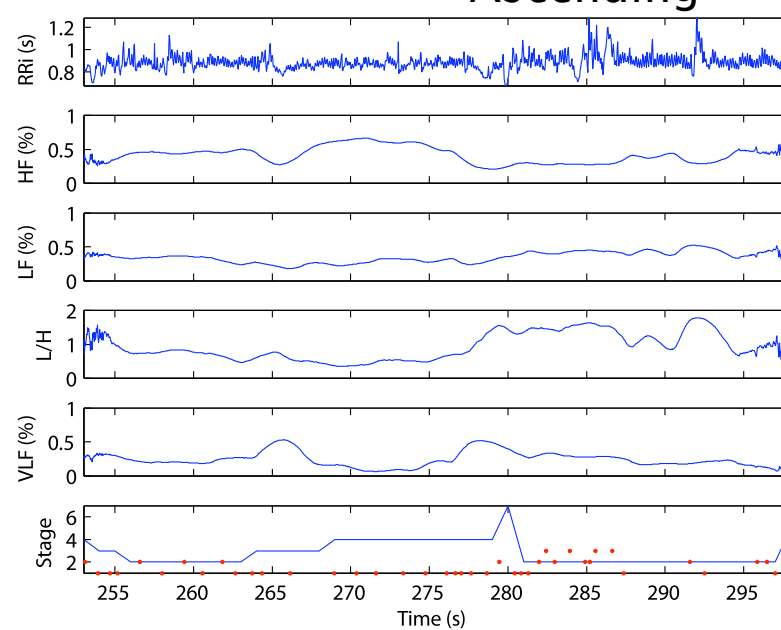
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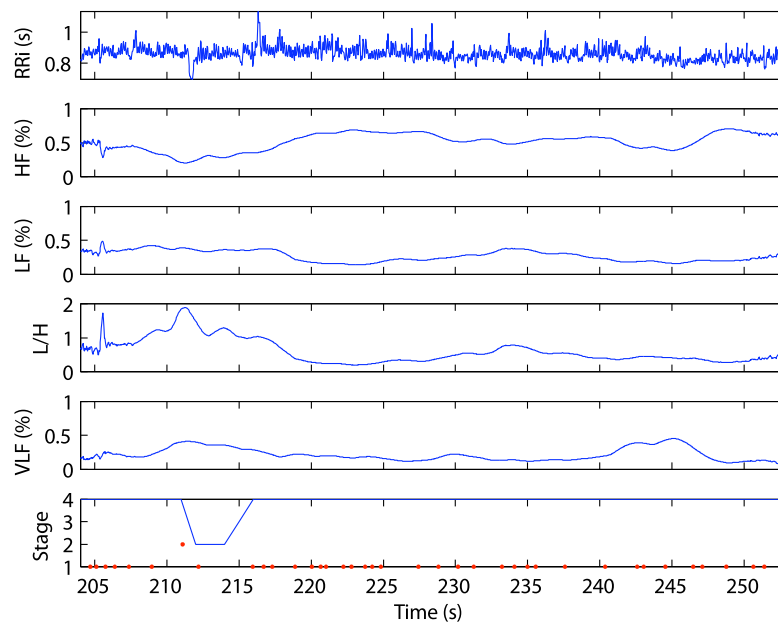
## Descending



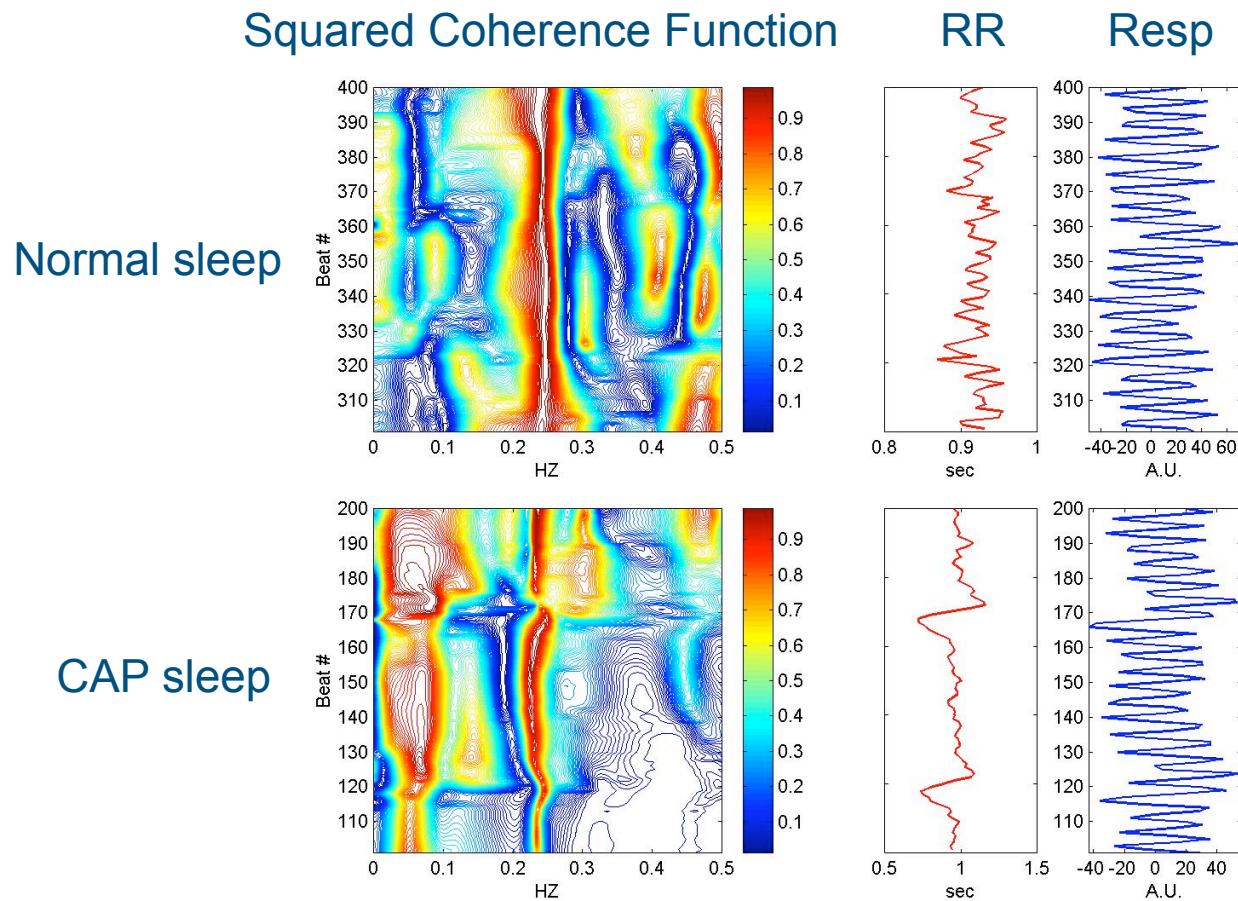
## Ascending



## Stable

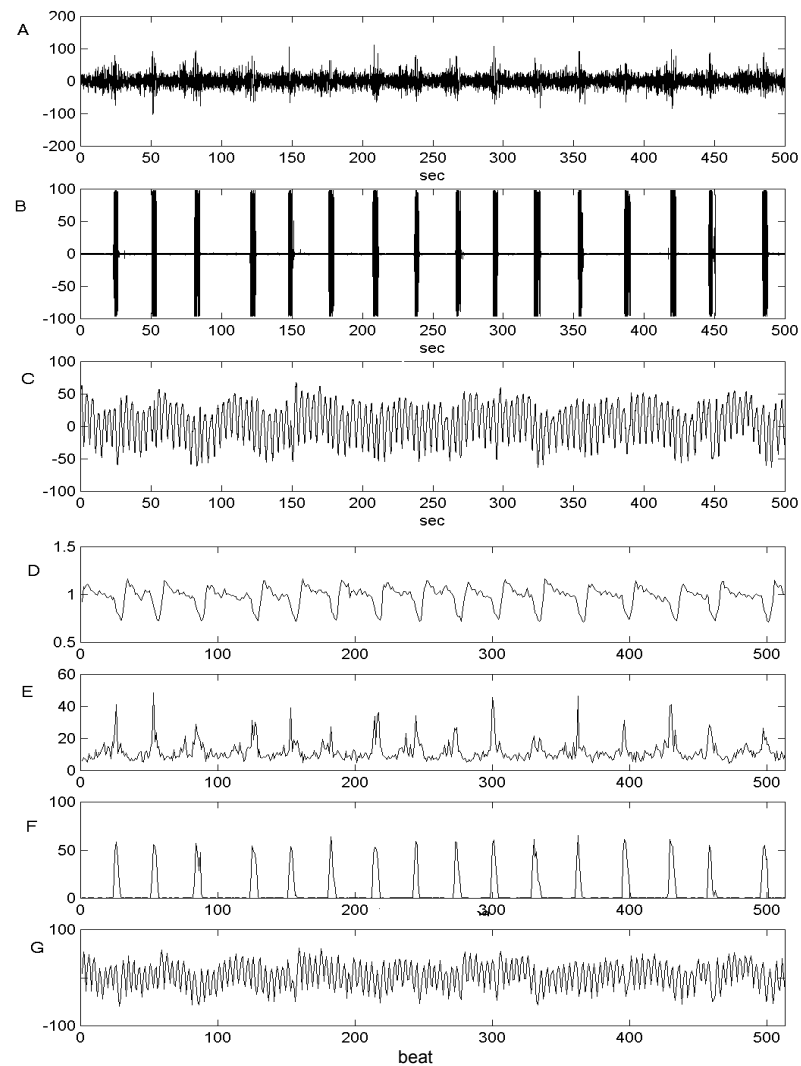


# Cardio-Respiratory Coupling during CAP



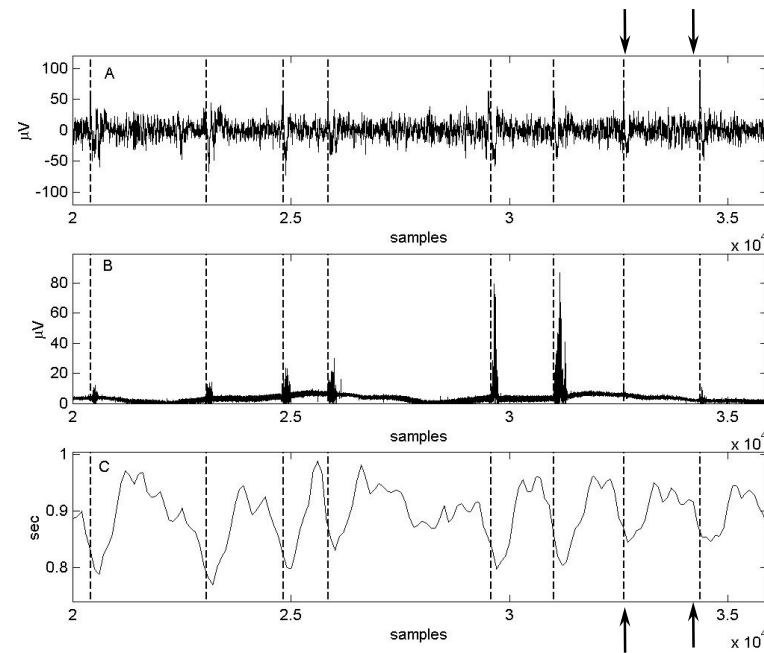
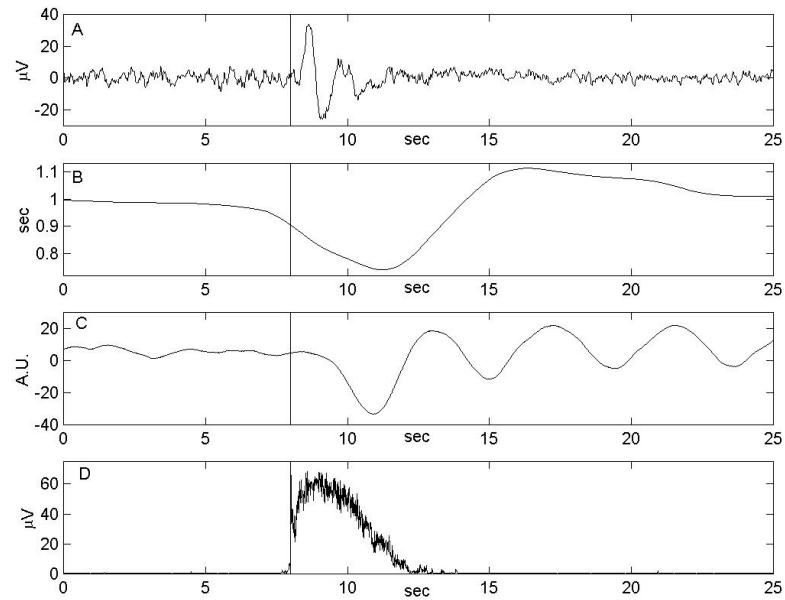
Bianchi 2008  
(submitted)

# CAP and Periodic Leg Movement



Bianchi 2008  
(submitted)

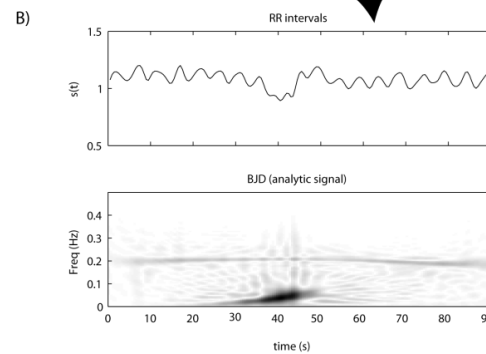
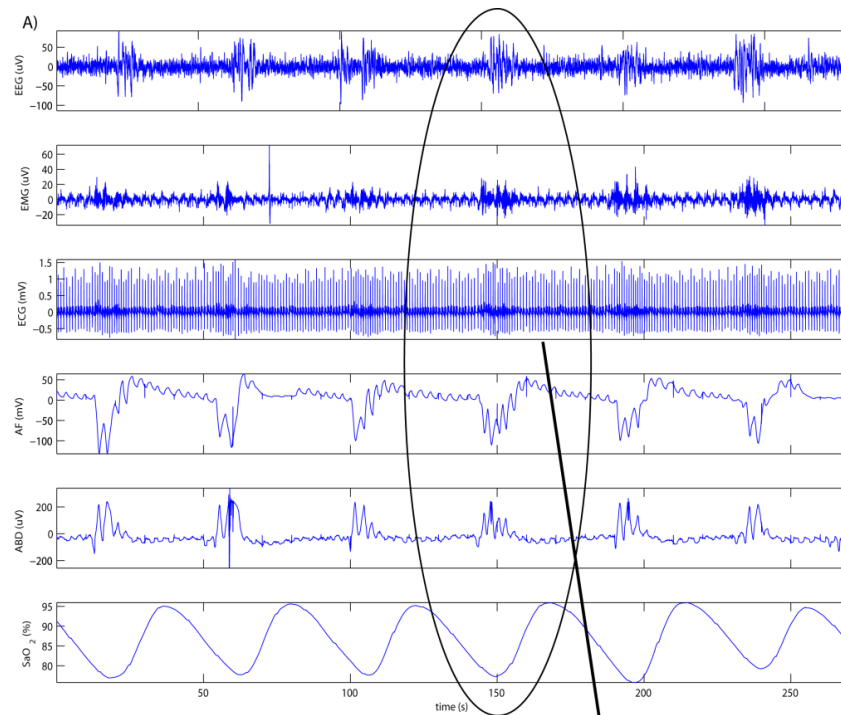
# CAP and Periodic Leg Movement



Bianchi 2008 (submitted)

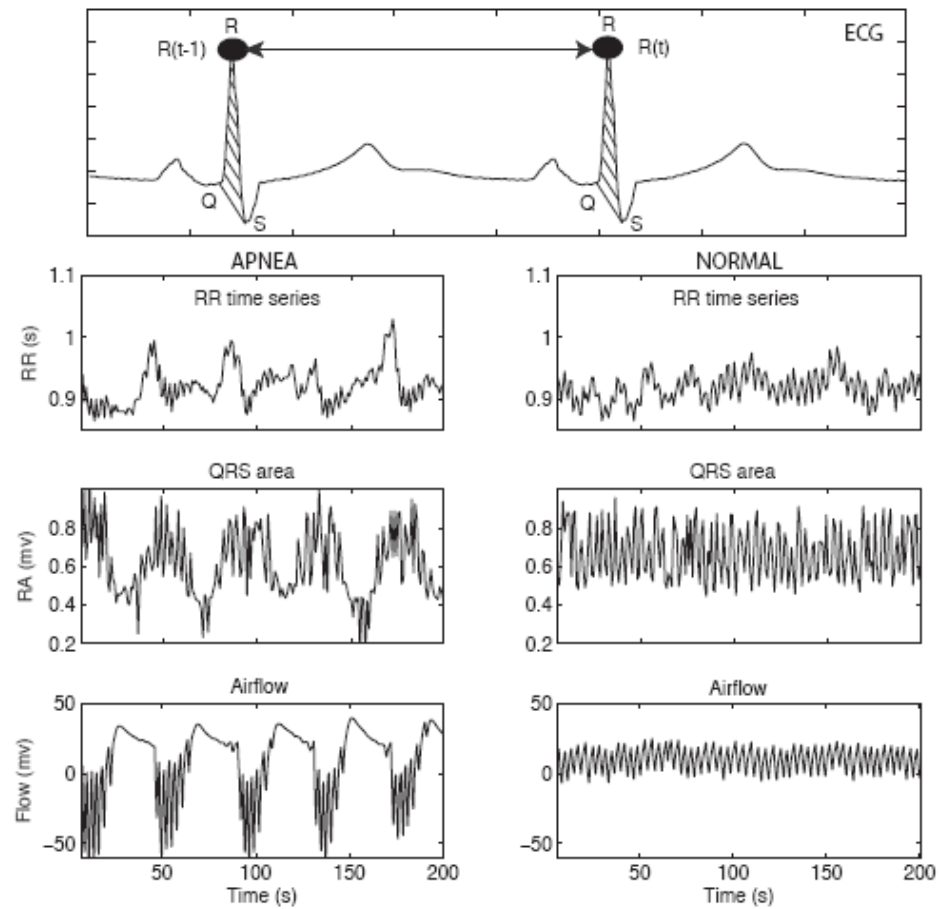


# Sleep, CAP and Apnea

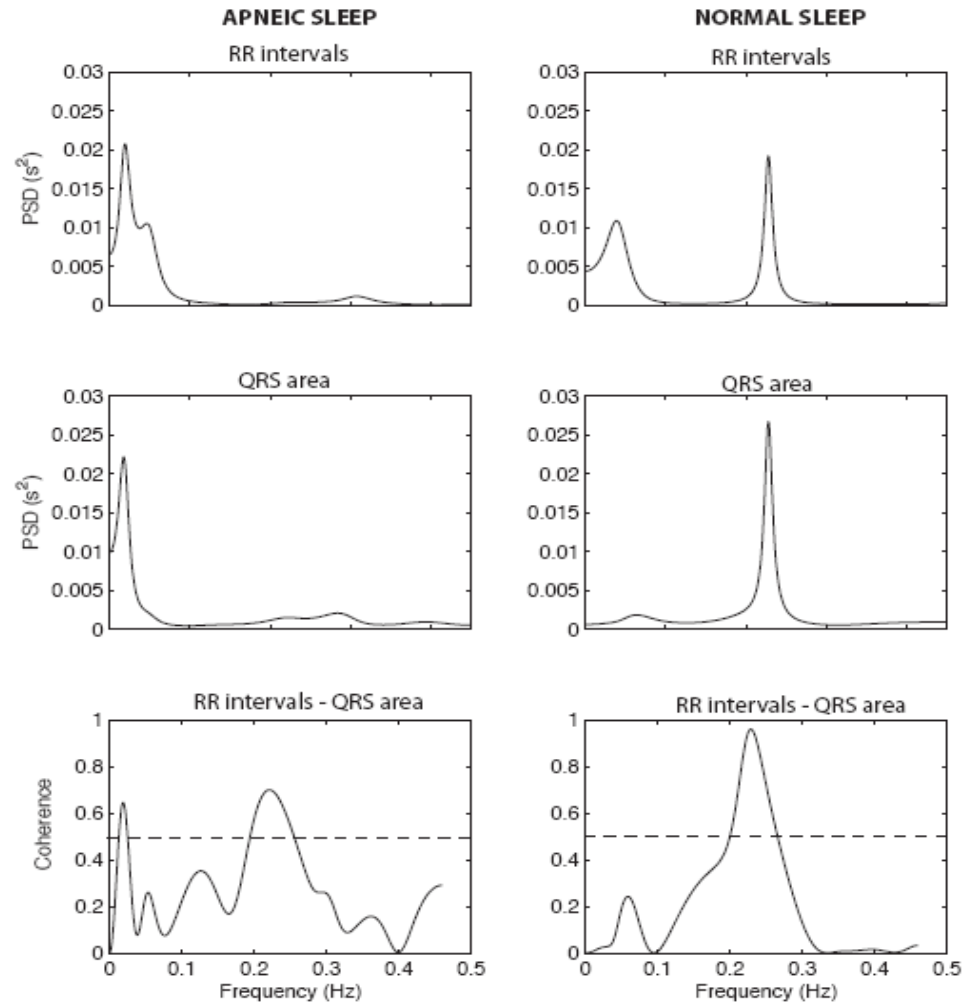


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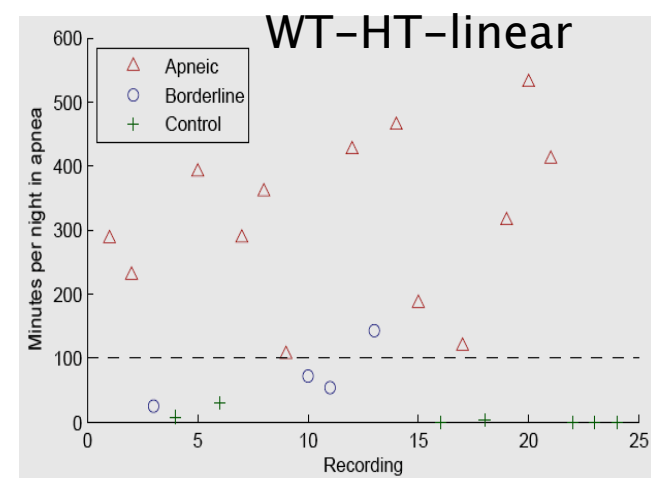
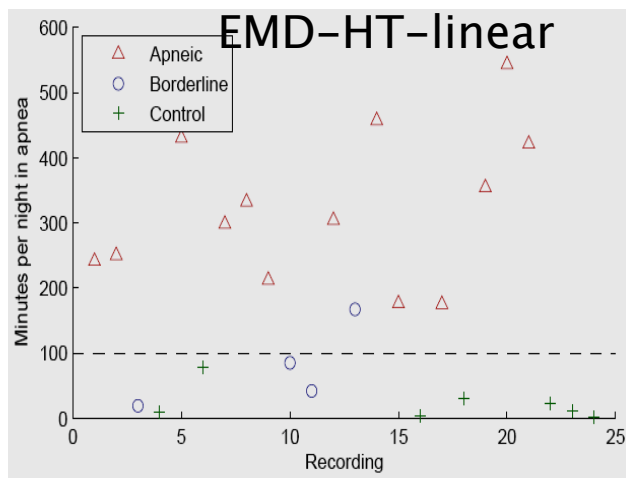
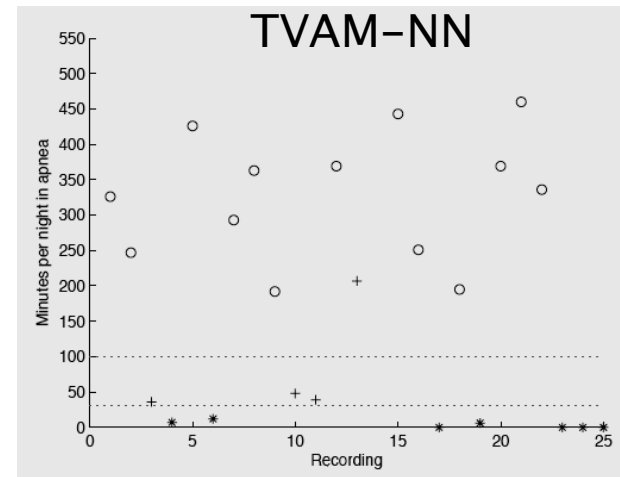
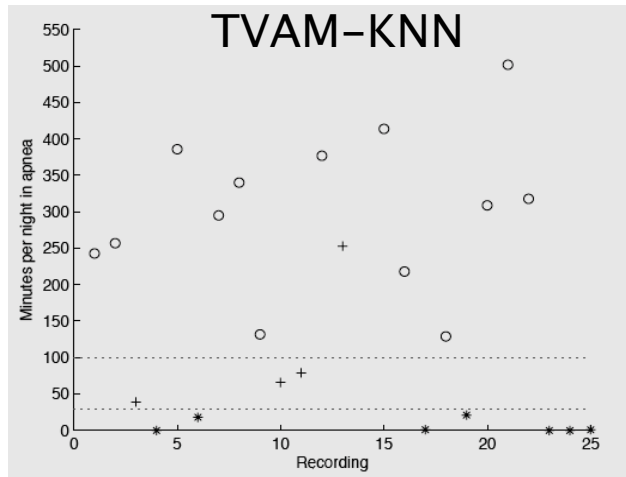
# Cardio-Respiratory Coupling during Sleep Apnea



# Cardio-Respiratory Coupling during Sleep Apnea



# DSS in Sleep Apnea



Mendez 2008 (submitted)

# Thanks

The best model of a cat  
is another cat..., specially  
the same cat.

Arturo Rosenblueth