

## Conference Tackles the Value of Sleep Dentistry

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With the one-year anniversary of the [ADA policy](#) on treating sleep-related breathing disorders upon us, many educational conferences are now being organized around the topic of dental sleep. However, in October, the Sleep Education Consortium ([SEC](#)) held its [14<sup>th</sup> annual conference](#) in Houston, Texas on this topic.

Triple board-certified neurologist Jerald Simmons, MD, has been bringing together dentists and medical doctors in a unique conference setting at the annual SEC conference for years. We had the opportunity to interview Simmons and one of this year's conference's attendees, Maria Linden, DDS, of Naples, Fla, to share their insights about the event.

**DT: Dr. Simmons, what motivated you to establish the SEC, and why did you decide to bring dentists and medical doctors together into one conference?**

**Dr. Simmons:** I realized the basic principles of sleep and sleep pathology that I learned in my sleep medicine fellowship should be taught to all medical students. I also realized that there is a major deficit of knowledge about sleep among our healthcare professionals. The SEC was established to help address this void and bring medical professionals up to speed on recognizing and addressing sleep abnormalities in their patients.

One of the goals of the SEC is to encourage collaborative care between dentists and medical doctors. As a neurologist treating sleep patients for over 28 years, I realized that dentists look into every patient's mouth, and, in so doing, they could provide a vital role in screening and channeling patients along a treatment pathway to address conditions such as obstructive sleep apnea (OSA).

I have believed that dentists have a critical role to play in the treatment of patients with OSA since around 1995. While sleep doctors are trained in the specifics of the disease and its impact on body systems, dentists have expertise in the oral cavity and upper airway, which are critical perspectives given that treatment is nearly always involving the oral cavity, whether it be via continuous positive airway pressure (CPAP), surgery, orthodontics, or oral appliance therapy (OAT).

OSA also has significant implications on dentition, the temporomandibular joint (TMJ), and occlusion, so both medical and dental perspectives are needed in treating these patients. If we can demystify this process of collaboration for both sides, we will be able to get more patients treated.

**DT: Dr. Linden, why did you attend the SEC conference?**

**Dr. Linden:** The subject of dental sleep medicine is dear to me, and this is my second such seminar in recent months. As my education in this area escalates, I am convinced we're witnessing a pandemic regarding the incidence of sleep disorder in our society.

**DT: Dr. Simmons, why is it important for dentists to be involved with treating patients for sleep breathing disorders?**

**Dr. Simmons:** We have a national crisis with sleep breathing disorders in the United States. Tens of millions live at risk every day, and 80% of people with these disorders remain undiagnosed. The impact of this to our society is very high, from loss of life from car, bus, and train accidents to the cost of treating expensive diseases such as cardiovascular disease and diabetes, which are exacerbated or, in some cases, even caused by sleep apnea.

Dentists need to get involved because they are one of the best entry points for screening patients for sleep disorders since many people see their dentist regularly. OAT delivered by dentists or in conjunction with CPAP provides excellent treatment options for patients who cannot tolerate CPAP alone. If dentists can work with sleep doctors, such as myself, to get the patient properly diagnosed and create comprehensive treatment plans, together, we can co-manage the care for many more patients than we are now.

**DT: Dr. Linden, what were some of the learning highlights of the conference?**

**Dr. Linden:** I found the entire weekend rewarding and educational. In fact, within the first few hours of lectures, I learned more than an entire weekend at another sleep dentistry course I had taken.

The highlights for me were exploring the multidisciplinary approach to treating OSA, discussing the various methods of treatment for OSA, and understanding the importance of morning aligners to reposition the TMJ and muscles of mastication after wearing a mandibular advancement device (MAD) or OAT device through the night.

The courses I've taken previously touched randomly on only a few of these topics, and even then only haphazardly. I found the presentations given at the SEC conference to be well organized and presented in a sequence that allowed the participants to first understand the concepts offered, and then build upon each concept with the following lecture or speaker. The importance of this can't be overstated.

**DT: Dr. Simmons, what are your future plans for the SEC conference?**

**Dr. Simmons:** As the interest in sleep grows, we will continue to expand this type of education. It is more important than ever that dentists and medical doctors collaborate so that we provide the highest standard of care for patients. One specialty alone cannot do that for a patient since it is a multifaceted disease. We all need to step up to the standard of collaborative care. Given the ADA's policy on sleep issued this past year, we hope that dentists will grow interested in participating with sleep doctors like myself in treating these patients.

**DT: Dr. Linden, what value did you find in having education from both sleep doctors and dentists?**

**Dr. Linden:** The workshops led by both medical doctors and dentists were invaluable! There were several procedures and techniques demonstrated in the workshops that I feel I can immediately incorporate into my daily practice. For example, Dr. Simmons and Duane Grummons, DDS, MSD, demonstrated a concise and proper chairside upper-airway evaluation that I've already begun to employ in my daily practice.

**DT: Dr. Simmons, how do you personally work with dentists in your medical practice to treat patients with OSA?**

**Dr. Simmons:** We rely on dentists to screen patients for sleep-related breathing disorders and then work with them on a treatment plan, whether the chosen treatment is CPAP, OAT, orthodontics, dental restoration, or a combination of these approaches. When the dentist works with a company like [SleepArchiTx](#), which facilitates a medical-dental model, our sleep clinic can collaborate closely with the dentist to provide a comprehensive diagnosis and overall treatment plan.

For the dentist, this high level of collaboration with medical doctors cannot be found in most third-party home sleep testing companies that just read the tests and report results. SleepArchiTx provides that link that enables true collaborative care for each individual patient between our sleep clinic and the dental office. With them, we even do nationwide telemedicine sleep consults for patients while they are in the dentist office.

I see a service like SleepArchiTx to be like a turnkey service provider to the dentist to get the dental practice transformed into a sleep dentistry practice. Too often I have seen dentists failing on implementing all that they have learned at our conference. I think SleepArchiTx will solve this implementation problem.

**Dr. Linden** received her DDS degree from [University of Detroit-Mercy in Detroit, Michigan](#). She then completed a general practice residency in Hillsborough County Dental Research Clinic in Tampa, Florida. She is a member of the [ADA](#), [Florida Dental Association](#), [West Coast Dental Association](#), Bonita Springs Study Club, and Naples Dental Seminars. She has studied at the Dawson Academy in St. Petersburg, Florida. She and her husband Rick have a private practice in Naples, Florida.

**Dr. Simmons** is a triple board-certified neurologist who trained in neurology at Washington University and furthered his specialization to include sleep disorders and epilepsy. He completed his sleep fellowship training at Stanford University Medical Center. He has founded, cofounded, and held the directorship of several preeminent sleep disorder centers, including the UCLA Sleep Disorder Center, UCLA Clinical Neurophysiology Laboratory, Memorial Hermann Sugar Land Hospital Sleep Disorders Center, Sadler Clinic Sleep Disorders Center, and Comprehensive Sleep Medicine Associates. He is the author of numerous publications in clinical journals including *Sleep*, *Sleep Research*, and *Neurology* and the recipient of a variety of grants and funded research on topics related to sleep disorders. He is the founding director of the Sleep Education Consortium, a leading non-profit organization dedicated to educating both the medical and dental communities on working together to treat sleep disorders. He currently directs Comprehensive Sleep Medicine Associates, a diagnostic and sleep therapy practice with locations throughout the greater Houston area and Austin, Texas.

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