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### Översikt

- Sömnfysiologi
- Diagnostik och behandling av sömnstörning vid Parkinsons sjukdom

*Insomni*  
*Dagtrötthet (Excessive Daytime Sleepiness), fatigue.*  
*REM-sömnstörning*

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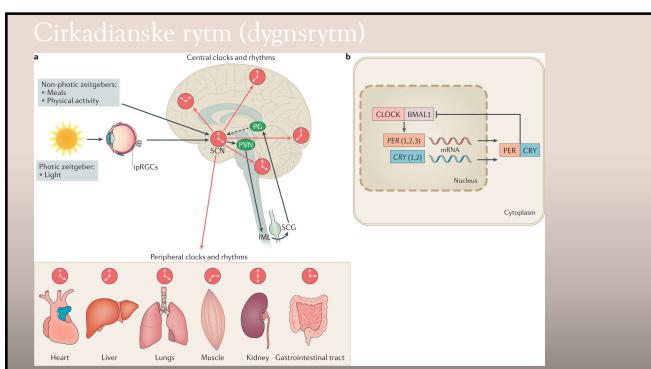
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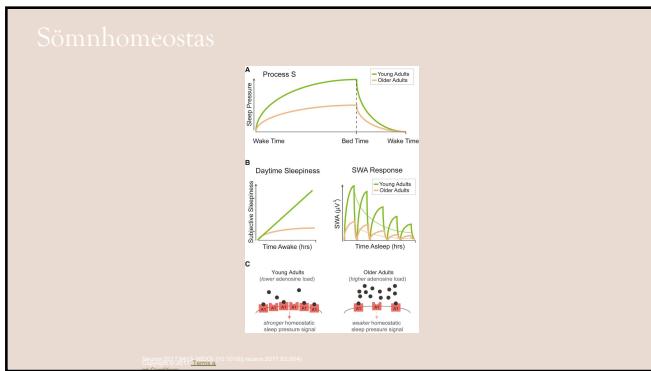
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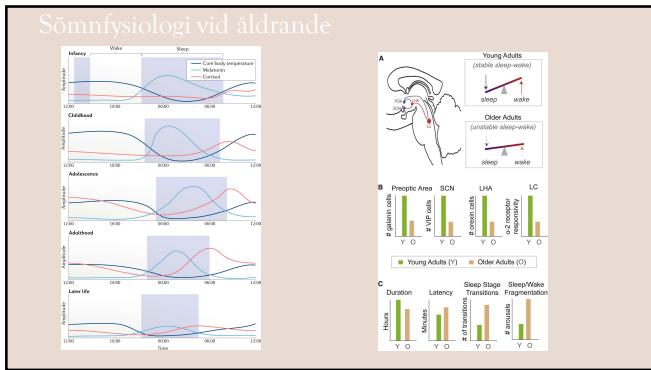
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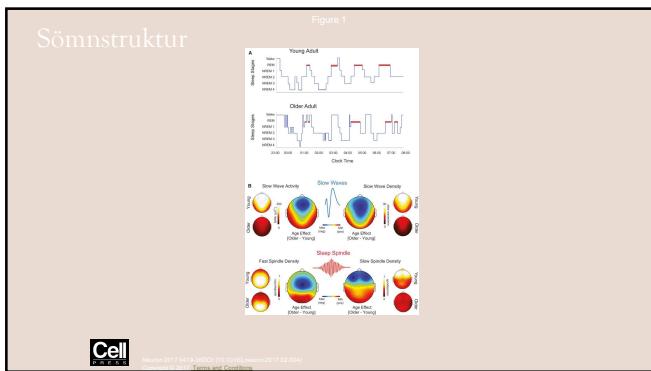
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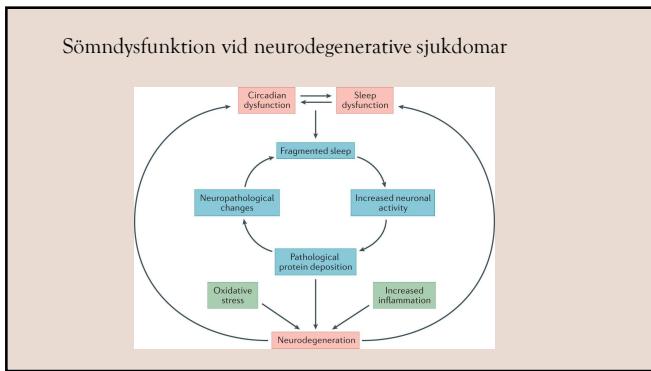
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**Table 1** Prevalence of sleep disorders in neurodegenerative diseases

Sleep-wake disorder	SDD			RLS	
	Insomnia	EDS	Parasomnias		
			REM parasomnia		
PD [24–24%]	32%–44%	21%–76% [27, 243]	39%–46% [242, 243]	17.2%–30% [241, 244]	
				Sleepwalking: 27.0%–48% [158, 241] Night terrors: 3.9% [241] NREM encephalopathy: 10.3% [245]	
FMS [247]	19%	28% [248]	88% [249]	Snoring: 30%–40% [251] OSA: 19%–37% [250] 34.8%–60% [251]	
DLB 26%–29% [252]	11%–100% [252]	76% [252]	85% [252]	–	
PDD 7% [253]	83% [253]	17% [253]	78% [253]	–	
FTD 48% [254]	64% [254]	Rare [254]	Rare [255]	–	
CBD Rare [256, 257]	–	–	14.3% [258]	68% [254]	
PSD 60% [268]	60% [268]	–	–	Rare [259]	
			11.4%–26% [258, 261]	55% [260]	
AD 42% [40]	45% [264]	Rare [265]	–	3.7%–59% [262]	
HD 29%–41% [266, 267]	35.4%–56% [268, 269]	12%–35.8% [269, 270]	22.5% [269]	–	
				30.8% [271]	
				15.4% & 39% [261, 271]	
				20.5% [261]	

EDS excessive daytime sleepiness; REM rapid eye movement; NREM non-REM; SDB sleep-disordered breathing; RLS restless leg syndrome; PD Parkinson's disease; PDD progressive subcortical gliosis; CBD frontotemporal dementia; PSD progressive subcortical gliosis; AD Alzheimer's disease; HD Huntington's disease; CBD corticobasal degeneration; PSD progressive subcortical gliosis; AD Alzheimer's disease; HD Huntington's disease; CBD corticobasal degeneration; PSD progressive subcortical gliosis

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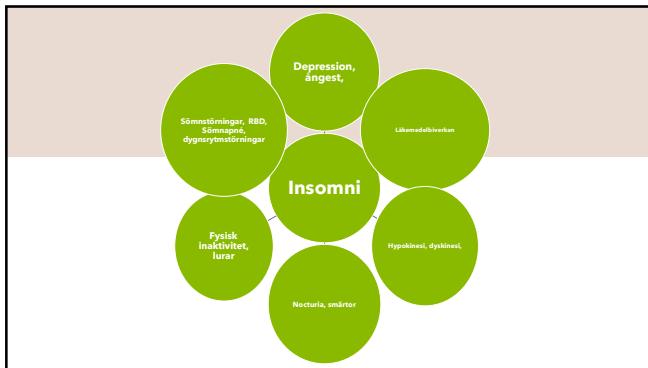
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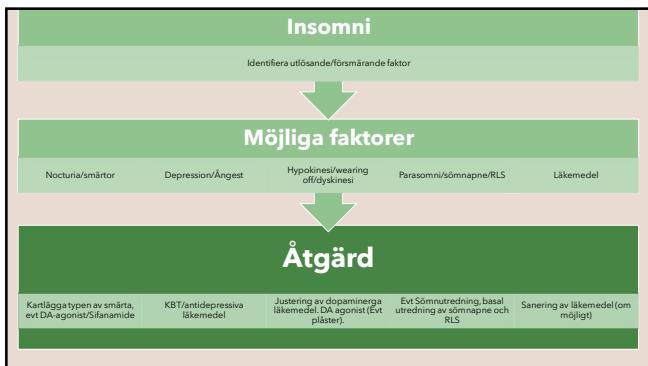
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Behandling av insomni vid tidig Parkinsons sjukdom

Icke farmakologisk behandling	Farmakologisk behandling
<ul style="list-style-type: none"> <li>Sömnhygiejn</li> <li>Daglijusterapi eller träning</li> <li>KBT</li> </ul>	<ul style="list-style-type: none"> <li>Melatonin</li> <li>Zopiclone</li> <li>Mirtazapin</li> <li>I enskilde fall→ Quetiapine/Clozapine</li> <li>Ångest/depression→Venlafaxine, TCA</li> </ul>

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Study ID	Device	Exposure distance	Interventional protocol	Investigated parameters	EXP	CON
Videmovic 2017	Sun Ray Sunbox SB-558	86.4 cm	60 min/day morning/evening (3-month, follow-up 2 weeks)	White light (10,000 lux)	Dim red light (200 lux)	
Rutten 2016-2019	light box (Brazil); Lumie, Cambridge (UK)		30 min/day morning/evening (3-month, follow-up 6-month)	White light (10,000 lux)	Dim light (200 lux)	
Rutten 2019	Spectramax light therapy device		60 min/day, evening (6-month follow-up 1 month)	Blue/green light	Polychromatic light (100 lux)	
Willis 2018	light source containing fluorescent tubes	0.8-1 m	60 min/day, evening (2-week)	Polychromatic light (3,000 lux)	Dim red light (200 lux)	
Raymackers 2019	A portable head-mounted device (Lumie, SA.Villes-le-Bouillet, Belgium)		45 min/day, morning (1-month, 2-week washout, 1-month)	Blue light	Orange light (175 lux)	

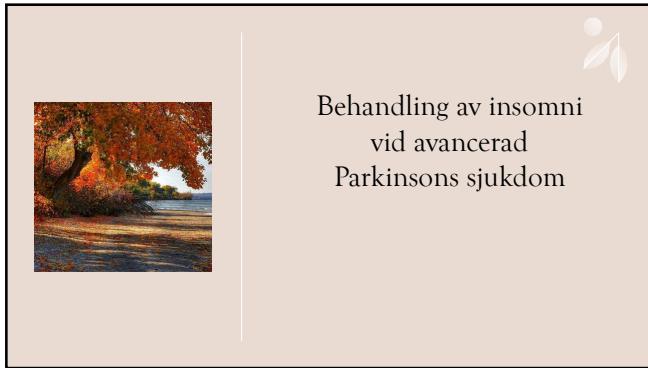
Modifierad från MDS konferens 2023,  
Dr Srinigan J

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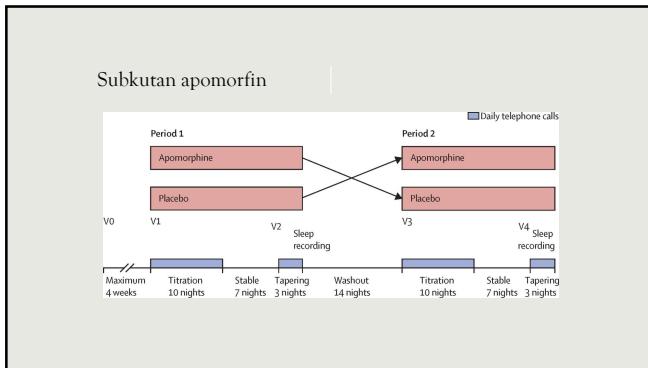
Outcomes	Study ID/number of participants (PO/control)					Summary of findings						
	Videmovic 2017	Rutten 2016-2019	Rutten 2019	Baymackers 2019	Willis 2018	16/15	33/17	45/47	R/#	10/10	Difference from pre to post (% vs. CI)	No. of participants (studies)
Motor function	UPDRS III	UPDRS III	UPDRS III	UPDRS III	UPDRS III	4.6% lower (8.2% to 1.2 lower)	(4 studies)	209	0/0/0/0	high		
Depression	BDI	HADS	BDI	HADS (depression)	BDI	0.77 standard deviations lower (0.31 to 1.22 lower)	(5 studies)	224	0/0/0/0	high		
Daytime sleepiness	ESS	SCOPA (daytime sleepiness)	ESS	ESS	ESS	0.14 standard deviations lower (0.39 lower to 0.11 higher)	(5 studies)	241	0/0/0/0	high		
Sleep	PDSS	PDSS				3.45 standard deviations higher (11.13 to 7.78 higher)	(2 studies)	122	0/0/0/0	high		
Adverse events						RR 1.71 (1.19 to 2.52)	(5 studies)	231	0/0/0/0	high		

Modified från MDS konferens 2023,  
Dr Srinigan J

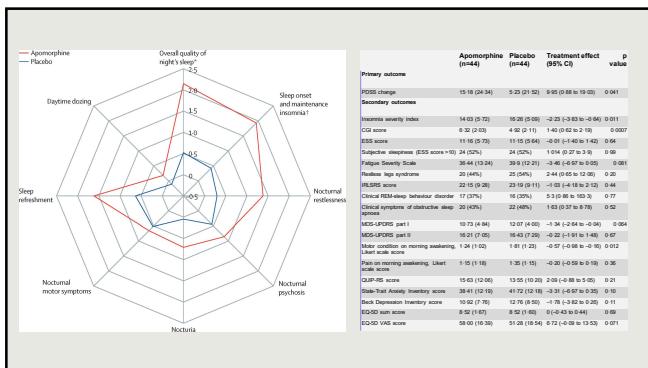
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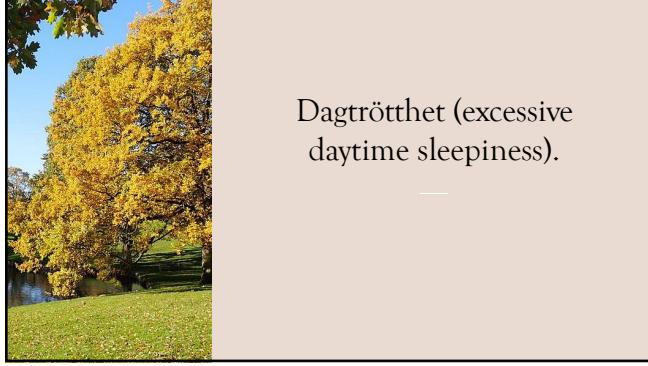


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Effects of Levodopa-Carbodopa Intestinal Gel on Dyskinesia and Non-Motor Symptoms Including Sleep: Results from a Meta-Analysis with 24-Month Follow-Up									
Outcome	Measure	Range	P <sup>a</sup> (I <sup>b</sup> )	P <sup>c</sup> (I <sup>d</sup> )	P <sup>e</sup> (I <sup>f</sup> )	P <sup>g</sup> (I <sup>h</sup> )	P <sup>i</sup> (I <sup>j</sup> )	P <sup>k</sup> (I <sup>l</sup> )	P <sup>m</sup> (I <sup>n</sup> )
Dyskinesia	UPDRS-NL score, NA	0-100 24 months (h/day)	$p < .99$	$p = .022$	$p = .003$	$p = .004$	$p = .001$	$p = .005$	$p = .001$
			-0.74(±7.7) <sup>PD</sup>	-1.18(-1.49,-4.51)	-3.56,-2.87,-0.42	-6.77(-1.31,-4.22)	-6.76(-1.21,-		
UPDRS-NL score, 22-34 months	NA	0-100 12 months	$p = .34$ , $p = .275$	$p = .267$	$p = .298$				$p = .820$
			-0.21(±8.0) <sup>PD</sup>	-1.2(±1.2) <sup>PD</sup>	-1.2(±2.9) <sup>PD</sup>				
UPDRS-NL score, NA	0-100 104 months	-1.4(±2.7) <sup>PD</sup>	$p = .001$						
			-17.4(±27.9) <sup>PD</sup>	-12.5(±9.1) <sup>PD</sup>	-13.6(±20.1) <sup>PD</sup>	-9.0(±22.7) <sup>PD</sup>	-9.0(±22.7) <sup>PD</sup>	-9.0(±22.7) <sup>PD</sup>	-8.1(±22.7) <sup>PD</sup>
Non-motor symptoms	NMSS score	-13-97 <sup>PD</sup>	$p < .001$	$p = .001$					
			-28.74(±48.24)	-27.84(-30.57,-	-28.97(-24.58,-	-18.84(-21.56,-	-17.44(-21.52,-		
Motor	UPDRS-I score, NA	0-100 16 months	$p = .407$	$p = .207$	$p = .120$				
			-0.39(-4.55,-4.22)	-0.2(±0.1) <sup>PD</sup>	-0.1(±0.2) <sup>PD</sup>				
Sleep	PSQI-2 score, NA	0-100 60 months	$p = .006$						
			-7.2(±1.5) <sup>PD</sup>	-8.1(±1.6) <sup>PD</sup>	-8.1(±1.6) <sup>PD</sup>	-5.9(±1.4) <sup>PD</sup>	-5.9(±1.4) <sup>PD</sup>	-5.9(±1.4) <sup>PD</sup>	-5.9(±1.4) <sup>PD</sup>
EDSS score	NA	0-300 24 months	$p = .307$						
			-1.5(±1.2) <sup>PD</sup>	-2.4(±0.7) <sup>PD</sup>	-2.4(±0.7) <sup>PD</sup>	-1.0(±0.9) <sup>PD</sup>	-1.0(±0.9) <sup>PD</sup>	-1.0(±0.9) <sup>PD</sup>	-1.0(±0.9) <sup>PD</sup>

Chaudhuri et al.,

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## Diagnos

## ANAMNES OCH FRÅGAFÖRMULÄR

- Epworth Sleepiness Scale (ESS)**  
≥12 (10)
- Parkinson's Disease Sleep Scale version 2 (PDSS-2)
- Scale for Outcomes in Parkinson's disease Sleep (SCOPA-S)**

## OBJEKTIVT

- Multiple sleep latency test
- Maintenance of wakefulness test
- Polysomnography för att utesluta andra sömnsjukdomar (RBD, sömnapné)
- Actigrafi

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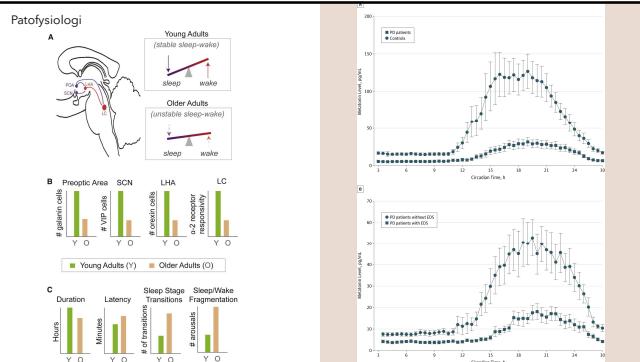
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Dagtrötthet	Fatigue	Wearing off	Autonom dysfunktion
Nedsatt förmåga att hålla sig vaken. Sömnattaker.	Subjektiv känsla av nedsatt energi till att utföra görml. Nedsatt motivation och önska om vila.	Non-motor off	Yrsel, sömnighet,
Nedsatt koncentration Nedsatt förmåga att hålla ögonen öppna	Co-morbid ångest, depression. Nedsatt koncentration.	Förbättras med ökad dopaminerig behandling och fluktuerer.	Kalla händer och fötter. Episoder med svimning vid blodtrycksfall (ändring av kroppsställning) eller postprandialt.

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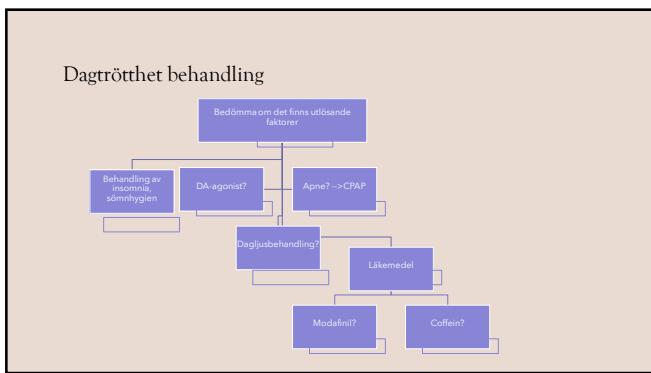
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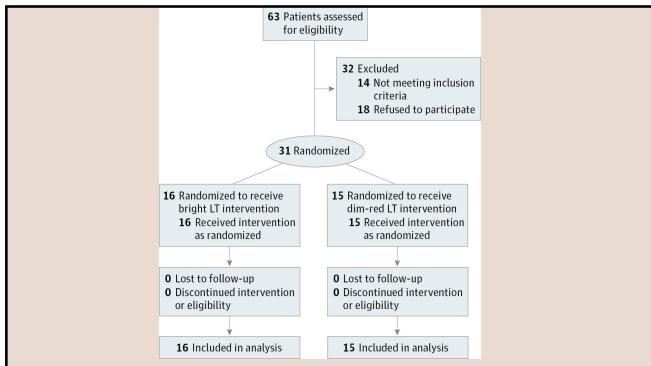
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Sleep-wake disorder	Parasomnia			SDB	RLS
	Insomnia	EDS	REM parasomnia		
			RBD		
PD [24-24]	32% [24-44]	21%–76% [27-243]	39%–66% [242-243]	17.2%–30% [24-244]	27.6%–48% [32-246]
				Sleepwalking: 0.0%–1.8% [158-241] Night terrors: 3.9% [241]	14% [37]
				NREM encephalopathy: 10.3% [245]	
FSA [29]–[47]	28% [248]	88% [249]		Snoring: 30%–40% [250-251] OSA: 19%–37% [250]	4.7%–28% [251]
DLB 26%–29% [252]	11%–100% [252]	76% [252]	85% [252]	–	34.0%–60% [253]
PDD 7% [253]	83% [253]	17% [253]	78% [253]		
FTD 48% [254]	64% [254]	Rare [254]	Rare [255]	–	68% [254]
CJD Rare [256-257]	–	–	–	Rare [256]	Rare [256]
PSD 6% [268]	60% [268]	11.4%–26% [258-261]	–	–	5.7%–59% [265]
AD 42% [48]	45% [264]	Rare [265]	–	19%–54% [16, 63-66]	49–98% [55, 58]
HD 29%–41% [266-267]	35.4%–56% [266, 269]	12%–35.8% [266-270]	22.5% [269]	–	30.8% [271] 15.4% & 59% from RWA and aspect [60, 271]

EDS excessive daytime sleepiness; RBD rapid eye movement (REM) sleep behavior disorder; NREM non-REM; SDB sleep-disordered breathing; RLS restless leg syndrome; PD Parkinson's disease; FSA frontotemporal atrophy; DLB dementia with Lewy bodies; FTD frontotemporal dementia; CJD progressive subcortical gliosis; PSD progressive subcortical gliosis; AD Alzheimer's disease; HD Huntington's disease; CGC corticobasal degeneration; PSD progressive nonfluent aphasia; AD dementia with Lewy bodies; FTD frontotemporal dementia; CJD progressive subcortical gliosis

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### Diagnostik

**ICSD-3:**

Repeated episodes of sleep-related vocalization and/or complex motor behaviors.

These behaviors are documented by polysomnography to occur during REM sleep or, based on clinical history of dream enactment, are presumed to occur during REM sleep.

Polysomnographic recording demonstrates REM sleep without atonia (RWA).

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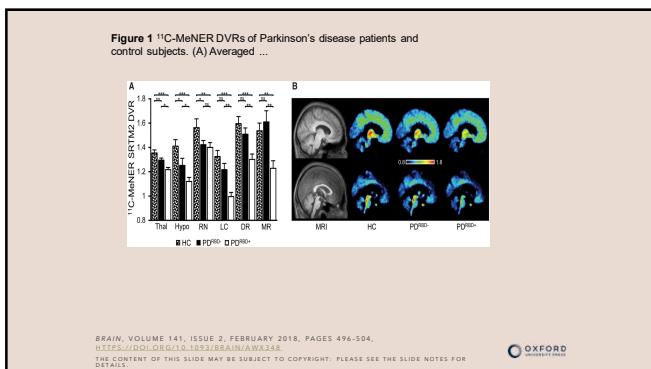
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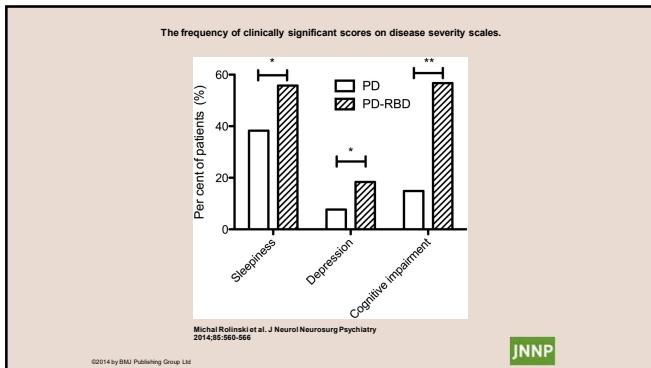
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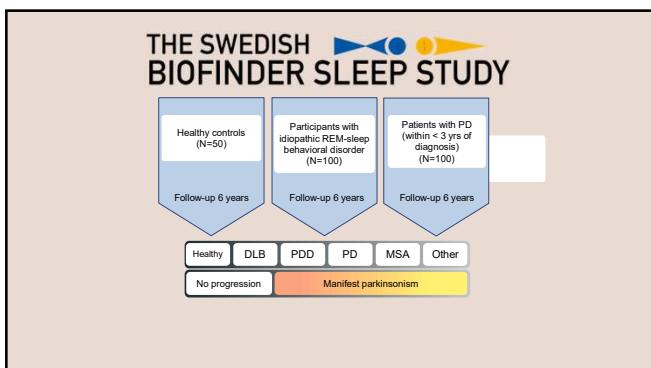
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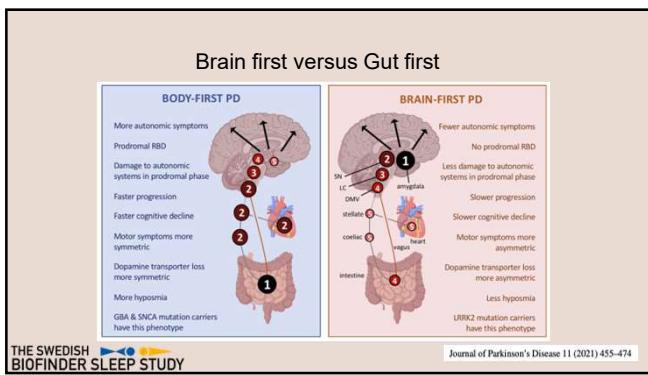
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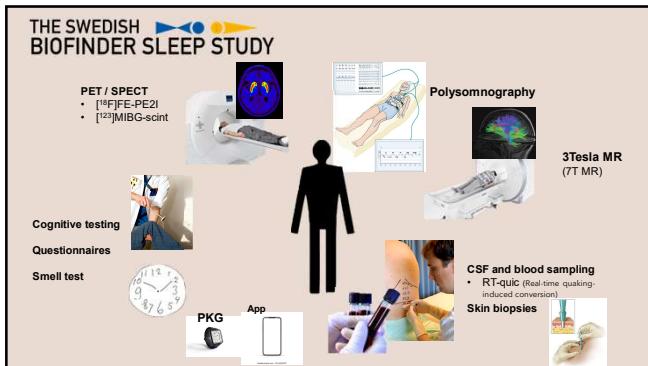
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**Sammanfattning**

Sömnstörningar som inkluderar insomni, dagtrötthet, och REM-sömnstörning förekommer mycket ofta vid Parkinsons sjukdom.

Stor negativ effekt på livskvalitet.

Identifera orsaken och rikte behandlingen på utlösande orsak.

Försök med icke-farmakologiska metoder initierat.

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Tack för uppmärksamheten.

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