



## What is Narcolepsy?

Narcolepsy, a chronic neurological disorder, is the second leading cause of excessive daytime sleepiness (after obstructive sleep apnea).

People with narcolepsy typically experience:

- excessive daytime sleepiness,
- intermittent, uncontrollable episodes of sleep and
- loss of muscle control (cataplexy) during the day.

If you experience narcolepsy, you may have fallen asleep while working, cooking, or even driving. You are not alone. The National Center on Sleep Disorders Research reports that narcolepsy affects about 1 in 2,000 people and most people experience their first symptoms between the ages of 15 and 30. Evidence suggests that the condition is genetic.

## What are the signs and symptoms of Narcolepsy?

In addition to excessive daytime sleepiness and sudden episodes of falling asleep, other symptoms typically associated with narcolepsy are:

**Cataplexy** – Cataplexy is a sudden episode of muscle weakness, usually triggered by strong emotions. It is estimated that the majority of narcoleptics experience excessive daytime sleepiness and cataplexy.

**Hypnagogic hallucinations** – Hypnagogic hallucinations are vivid, frightening dreams experienced while falling asleep or waking. About 25-50% of narcolepsy sufferers experience them.

**Sleep paralysis** – Sleep paralysis is paralysis experienced while falling asleep or waking. About 25-50% of narcolepsy sufferers experience sleep paralysis.

**Automatic behavior** – Automatic behavior occurs when a person continues to function (talking, putting things away, etc.) during sleep episodes, but awakens with no memory of performing such activities. It is estimated that up to 40 percent of people with narcolepsy experience automatic behavior during sleep episodes.

Narcolepsy can be diagnosed through the presence of symptoms, although some of the symptoms are associated with other sleep disorders and depression. The most common and sometimes the *only* symptom of narcolepsy present is excessive daytime sleepiness. In a case where excessive daytime sleepiness is the primary symptom, the disorder can be difficult to diagnose. If you also experience cataplexy, a unique symptom of narcolepsy, it may be easier to identify the problem as narcolepsy.

Other methods physicians and sleep specialists use to diagnose narcolepsy include:

**Epworth Sleepiness Scale** – This sleep questionnaire asks you to rank whether certain situations make you sleepy and, if so, how sleepy. Your responses will assist your doctor in providing a formal diagnosis.

**Nocturnal polysomnogram** - This test will measure the electrical activity of your brain (electroencephalogram) and heart (electrocardiogram), and the movement of your muscles (electromyogram) and eyes (electro-oculogram) and usually requires an overnight stay at a sleep clinic for observation purposes.

**Multiple sleep latency test (MSLT)** – This test measures how long it takes for you to fall asleep during the day. Sleep specialists will observe your sleep patterns through several naps during daytime hours.

**Blood test** – A blood test that measures antigens, often found in people with a family history of narcolepsy, can also be done. The blood test is not conclusive but it can be helpful in establishing the possibility and probability of narcolepsy.