

Current status of Latin American sleep societies

Situação atual das sociedades de sono latinoamericanas

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ABSTRACT

There is scarce information on the global situation of Latin American Sleep Medicine. In the XII Congress of the Federation of Latin American Sleep Societies and the First Congress of the Peruvian Association of Sleep Medicine held in Lima, Peru, in October 2008, a meeting of representatives from different countries of Latin America was organized to implement a plan aimed to project the future. Thus, this article intended to collect information regarding sleep medicine human resources, physician and allied health professionals, educational activities, and infrastructure in selected countries of the Latin American region. Country delegates were prompted to make a presentation. These delegates brought current information to solve the following questions: Is there a national association dedicated to sleep medicine in each of their countries?; How many sleep medicine laboratories exist in their respective countries?; Is there a formal training system?; How are technologists training in each country?; What is the number of medical technologists in each individual country? and What activities related to sleep medicine are organized in each country? Participants from Argentina, Bolivia, Brazil, Chile, Colombia, Ecuador, Mexico, Peru, and Uruguay described the organization of their societies, sleep study facilities, care and research in the area of sleep medicine, human resources and training events as well as their participation into education in each country. Very few countries like Argentina, Colombia, and Uruguay have health systems that cover polysomnographic studies or continuous positive airway pressure therapy. In the majority of countries, there is no formal training in sleep medicine, neither an inclusion of sleep medicine courses in medical school curricula. There is a very uneven development of sleep medicine in Latin America, with very variable availability of resources. The analysis of the region as a whole indicates a major deficiency in the practice of sleep medicine, an underserved population, and very few participation of sleep medicine in undergraduate and postgraduate medicine programs. Sleep medicine, as a field, is still young and with great development potential.

Keywords: sleep medicine specialty; societies, medical; Latin America.

RESUMO

Existem poucas informações relacionadas à situação global da Medicina do Sono Latinoamericana. No XII Congresso da Federação Latinoamericana das Sociedades de Sono e I Congresso da Sociedade Peruana de Medicina do Sono, realizados em Lima, Peru, em outubro de 2008, foi organizado um encontro com representantes de diferentes países da América Latina para implementar um plano buscando planejamento futuro. Assim, este artigo busca coletar informações relacionadas aos recursos humanos em medicina do sono, sobre os médicos e demais profissionais de saúde, atividades educacionais e infraestrutura nos países participantes. Delegados dos países participantes foram convidados a fazer apresentações individuais, com informações que respondessem às seguintes questões: Existe alguma associação dedicada à medicina do sono em seu país?; Quantos laboratórios de sono existem neste país?; Existe algum treinamento formal?; Como é o treinamento técnico em cada país?; Qual é a quantidade de médicos em cada país? e Quais atividades relacionadas à medicina do sono são organizadas em cada país? Participantes da Argentina, Bolívia, Brasil, Chile, Colômbia, Equador, México, Peru e Uruguai descreveram a organização de suas sociedades, a infraestrutura para medicina do sono, a pesquisa na área de medicina do sono, os recursos humanos e o treinamento, bem como a participação em formação e educação em cada país. Poucos países, como Argentina, Colômbia e Uruguai, possuem sistemas de saúde que cobrem exames polissonográficos ou terapia com pressão positiva e, na maioria dos países, não existe treinamento formal em medicina do sono ou inclusão desta disciplina no currículo das faculdades médicas. Há um desenvolvimento desigual da medicina do sono na América Latina, com disponibilidade de recursos bastante variável. A análise da região como um todo indica: grande deficiência na prática da medicina do sono, população mal atendida e pouca participação da

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medicina do sono nos cursos médicos de graduação e pós-graduação. A medicina do sono é um campo ainda novo e com grande potencial para desenvolvimento.

Palavras-chave: medicina do sono; sociedades médicas; América Latina.

INTRODUCTION

Globally, there are some published references about the situation of sleep medicine societies from different countries of America, Europe, Asia, and Oceania, which show a very variable level of development in the field of sleep medicine¹⁻⁹.

Except for the reports of Edgar Osuna and the Brazilian Society of Sleep to the World Association of Sleep Medicine (WASM)^{10,11}, there is no previous public report on the global situation, standardized and referred, by representatives of different countries, about the global situation of sleep medicine in Latin America.

On the occasion of the meeting held in Lima, Peru, in October 2008, by the XII Congress of the Federation of Latin American Sleep Societies (FLASS) and the First Congress of the Peruvian Association of Sleep Medicine (APEMES), a special session was carried out with delegates from each of the societies attending. Delegates from Argentina, Bolivia, Brazil, Chile, Colombia, Ecuador, Mexico, Peru, and Uruguay discussed the main points about the reality in sleep medicine in their respective countries.

STATUS OF LATIN AMERICAN SLEEP SOCIETIES

Each of the delegates from the countries that were prepared before the meeting updated information to solve the following questions: Is there a national association dedicated to sleep medicine in each of their countries?; How many sleep medicine labs exist in their respective countries?; Is there a formal training system?; How technologists are training?; What is the number of sleep technologists in each individual country?; and What activities related to sleep medicine are organized in each country?

Here are the answers of individual countries based on their current situation.

Argentina has the *Asociación Argentina de Medicina del Sueño* (AAMS) founded in 1995, with 100 members at the time of the meeting, 25 were currently active. There were 20 sleep medicine laboratories, 6 of which are located in the capital, Buenos Aires. The social security system covers payments for polysomnographic studies, and therapeutic use of continuous positive airway pressure (CPAP). There is no formal training in sleep medicine at the national level, and there is a lack of certification for physicians and technicians. Likewise, sleep medicine is not included in medical school curricula. The AAMS performs a sleep medicine conference every two years. There

is a regulatory problem regarding the sale of polysomnographic equipment.

In Bolivia, there was not a sleep medicine society at the time of the meeting. There was only one polysomnography laboratory, without specialists in the field. There is no formal training or certification as a specialty. In undergraduate medical training, only isolated topics are touched as Sleep Apnea Syndrome in the chapter of Pneumology. There are no activities or conferences conducted to date.

Brazil has the *Associação Brasileira do Sono* (ABS) with 896 participants. There were 45 sleep medicine laboratories, 239 certificated physicians and 90 technicians. The ABS currently published a society magazine and led the edition of the Sleep Science Journal. The Association also performs different conference and workshops every year.

Chile has the *Sociedad Chilena de Medicina del Sueño* (SOCHIMES). Although there are several private sleep examination centers, there are no registers in the SOCHIMES. There is a major sleep center in its capital, Santiago. There is no national certification neither for medical specialists nor technologists, and there is no standard program in medical education at undergraduate level. However, in postgraduate school, there is a one-year course in epilepsy and sleep offered to neurologists. There is a biannually sleep medicine meeting and a national course.

Since 1999, Colombia has the *Asociación Colombiana de Medicina del Sueño* (ACMES), with 30 active members at the moment of the meeting. There is an average of five sleep examination centres, all in Bogotá City, the Systems of Health covers polysomnographic studies, but costs of CPAP therapy are not paid. Additionally, there are several sleep laboratories with unknown level of proficiency. In educational terms, there is no certification of expertise in sleep medicine for physicians or staff technologist. There is no standardized formal education in undergraduate level. A national congress of sleep medicine is held every two years. There is also a serious political problem regarding the indiscriminate sale of polysomnography recording equipment to nonspecialists.

Ecuador had no society of sleep medicine. There was just one sleep center located in Quito at time of the meeting. There is no certification on sleep medicine specialist at the national level and no standardized education at undergraduate and postgraduate levels.

Mexico has the *Sociedad Mexicana para la Investigación y Medicina del Sueño*, (SMIMS), which was founded in 1997. There are about 50 private institutions devoted to sleep medicine around the country, and ten public health centers, involving different specialties in relation to sleep medicine. In terms of education, there is a one-year course of sleep medicine at the postgraduate level, as well as specialized courses for technicians. There is no recognized certification

for physicians and technologist. At the political level, there is also a serious problem of the indiscriminate sale of polysomnography equipment.

Peru has the *Asociación Peruana de Medicina del Sueño* (APEMES), which was founded in 2007. There are five sleep medicine centers in the country, four of which in the private practice sector. There is no government or private insurance payment for the costs of CPAP therapy. There is no certified training for health professionals, such as physicians, technologists, or nurses. Some sleep medicine topics are discussed as part of undergraduate medical courses and in one nursing school.

In Uruguay, the *Sociedad Uruguaya Investigaciones del Sueño* (SUIDES) has existed since 2001. There are seven clinical laboratories working mainly in sleep apneas, both in the public and private sector; the health system may provide CPAP for treatment.

There is no certification of specialization in the area, no national control policy. In terms of education, training in undergraduate college is minimal.

DISCUSSION

Based on presentations given by the delegates from each country, we conclude:

Recommendations of the group of representations were addressed to solve some of the mentioned problems. It was proposed to encourage academic environment in order to foster the field with homogeneous criteria about clinical and paraclinical training, and research development. It is required to support the introduction of sleep medicine in the curricula for undergraduate and postgraduate medical students, and the implementation of specialization programs with certification for physicians, nurses, and medical technology professionals to provide proper human resources. It is important to create a website where everybody can find information about sleep centers and which are the possibilities offered in each one (postgraduate studies, training, and so on). One useful tool in our continent with scarce resources would be to have online support for courses, like some that are already currently offered in Spanish¹².

One of the main risks we identified is the informality in the management of diagnostic studies and treatments provided by personnel without enough qualification to administer them.

In Latin America, there is a very uneven development of sleep medicine, with a lot of variable availability of resources, underserved population and very few participation of sleep medicine in undergraduate and postgraduate medicine programs. The analysis of the whole region shows that

the field of sleep medicine is still young and has great development potential.

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