Submission for Inquiry into Sleep Health Awareness in Australia Darwin -Northern Territory

Introduction:

The Australian Bureau of Statistics (ABS) suggest that in the Northern Territory (NT) almost one in three people (29.8%) are of Aboriginal or Torres Strait Islander origin, by far the highest proportion of all states and territories (ABS, 2014). There is well-documented evidence that Aboriginal people have significantly worse health outcomes than non-Aboriginal people. The burden of chronic diseases including cardiovascular, hypertension, diabetes, renal and respiratory disorders has contributed to a substantial rise in the morbidity and mortality among Aboriginal and Torres Strait Islander peoples within the Northern Territory [1-3]. Obesity has also been well recognised as an important pre-requisite risk factor for many of the chronic health conditions and for the development of Obstructive sleep apnoea (OSA) [4, 5] and it is known to be prevalent among Aboriginal Australians [6, 7]. Coexistence of sleep disorders along with chronic health conditions will likely to give rise to adverse health consequences in Indigenous population. There is evidence in the literature on the presence and severity of sleep disorders, particularly on OSA in Indigenous people [2, 8-11]. Diagnosis and management of sleep disorders which, not only may leads to positive health outcomes but also leads to a significant reduction in costs to the health care system at the NT. We support the state and federal government initiative in the inquiry into sleep disorders in indigenous and non-indigenous population.

Reference:

- 1. Vos T, Barker B, Begg S, Stanley L, Lopez AD. Burden of disease and injury in Aboriginal and Torres Strait Islander Peoples: the Indigenous health gap. International Journal of Epidemiology 2009; 38:470–477.
- 2. Kruavit, A, Fox M, Pearson R, Heraganahally S. Chronic respiratory disease in the regional and remote population of the northern territory top end: A perspective from the specialist respiratory outreach service. Aust J Rural Health. 2017; 25: 275–284.
- 3. Basnayake T, Morgan LC, Chang AC. The global burden of respiratory infections in indigenous children and adults: A review. Respirology. 2017; 22: 1518–1528
- 4. Romero-Corral A, Caples SM, Lopez-Jimenez F, Somers VK. Interactions between Obesity and Obstructive Sleep Apnea. Implications for Treatment CHEST; 2010; 137. DOI: 10.1378.chest.09-0360
- 5. Schwartz AR, PatilSP, Laffan AM, Polotsky V, Schneider H, Smith PL. Obesity and Obstructive Sleep Apnea Pathogenic Mechanisms and Therapeutic Approaches. Proc Am ThoracSoc 2008; 5:185–192
- 6. Burns J, Thomson N (2006) Summary of overweight and obesity among Indigenous peoples. Australian Indigenous HealthInfoNet. (Accessed January 2017). http://www.healthinfonet.ecu.edu.au/obesity_review.
- 7. Cameron AJ, Zimmet PZ, Dunstan DW, Dalton M, Shaw JE, Welborn TA, Owen N, Salmon J, Jolley D. Overweight and obesity in Australia: the 1999–2000 Australian Diabetes, Obesity and Lifestyle Study (AusDiab). Med J Aust 2003; 178: 427-432.

Inquiry into Sleep Health Awareness in Australia Submission 1

- 8. Wittmann V, Rodenstein DO. Health care costs and the sleep apnea syndrome. Sleep Med Rev 2004; 8:269-79.
- 9. Heraganahally S, Kruavit A, Mehra S. Does obstructive sleep apnoea exists in indigenous population: a perspective from Australian indigenous population study, Respirology, volume 21, (S3), 2016: doi: 10.1111/resp.12939 14
- 10. Subash Heraganahally, Anuk Kruavit. Obstructive sleep apnoea in indigenous and non-indigenous population. Sleep Medicine. 2015;16 (S1):215
- 11. Woods CE, McPherson k, Tikoft E, Usher k, Hosseini F, Ferns J, Jersmann H, Antic R, Maguire GP. Sleep Disorders in Aboriginal and Torres Strait Islander People and Residents of Regional and Remote Australia. J Clin Sleep Med 2015; 11:1263 –1271 39.