Frequent Sleep-Talking During REN sleep-A Case Report

*Jeff, Jia-Fu Wei, M.D.,^{1,,2}, Wei-Chung Mao, M.D., Ph. D.,^{2,3}

- 1. Department of Otolaryngology-Head and Neck surgery, Cheng Hsin General Hospital, Taipei, Taiwan
- 2. Center for sleep health and science of Chen Hsin General Hospital, Taipei, Taiwan
- 3. Department of Psychiatry, Cheng Hsin General Hospital, Taipei, Taiwan

Introduction

Sleep talking, also known as somniloquy, can be a normal variant or associated with parasomnias. The difference between physiologic sleep talking and a disorder is the occurrence of other motor behaviors. Typically, the patients of sleep talking came for medical assistance because of his/her loud or objectionable sounds reported by a bed-partner or roommate. In this case, there was no other motor behaviors noted during the whole PSG. Although this is a case of normal variant of sleep talking, this report made small contribution to providing some manifestation of sleep talking.

Case report

The patient was a 73-year-old male with past history of benigh prostate hyperplasia and dyslipidemia. The initial presentation was talking loud during night reported by his wife. The patient also reported daytime tiredness and the ESS scored 21. The physical examination showed a narrowing of upper airway, grade I tonsil, and FTP 2. Under nasopharyngoscopy, bilateral nasal cavities were patent, no nasopharyngeal mass, bilateral vocal cords were movable and there was no obstruction in the larynx. Muller's maneuver demonstrated anterior-posterior narrowing during inhalation. In the polysomnography examination, multiple episodes of sleep talking during REM stage was identified and moderate obstructive sleep apnea (AHI: 16.4/hr) with nadir oxygen saturation 86%. Except for sleep-talking, there was no other muscular activity noted. The patient was referred to psychiatrist and neurologist, but there was no associated problem noted.

Conclusion

Even the sleep-talking is not associated with other neurologic or psychiatric disorder, it still causes some complications. Complications may arise if the sleep-talking is loud and frequent or the contents of the speech is inappropriate. This report provides some manifestation of sleep-talking.

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中文題目: 快速動眼期的夢藝——個案報告

作 者:<u>魏嘉甫*1,2</u>,毛衛中^{2,3}

服務單位: 1.振興醫院耳鼻喉部, 2.振興醫院睡眠中心, 3.振興醫院精神醫學部