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Dear members, colleagues and friends:

It is an honor and a privilege to be addressing you—my colleagues, friends and fellow members—today at the American Academy of Sleep Medicine’s general membership meeting. The Academy’s membership is one of the most diverse organizations of its size in America. We have the privilege of representing members from every area of sleep medicine and sleep research. When we think of the Academy, we may view the organization as one that represents “my” interests or those of Sleep Doctors. We are however much more. True we represent, Sleep physicians, clearly our biggest constituency. But we also represent sleep researchers, academicians, dentists, sleep technologists, sleep research assistants, research trainees, physician fellows and students. I hope I haven’t missed anyone but I hope you all can appreciate our organization for what it is: diverse and dedicated.

For over twenty years I have been a member of the American Academy of Sleep Medicine. When I joined the organization, the field of sleep medicine was just beginning. Over the ensuing years I have watched sleep medicine not only grow but flourish under the able and diverse leadership our Academy has enjoyed. Now there are more than 1,600 sleep centers and over 7,200 individual members in our organization.

Today, as I accept the role of your President, I pledge balance as we move confidently forward. We will strive for balance in the Academy’s commitment to academic sleep medicine, in the Academy’s commitment to research and in the Academy’s commitment to clinical sleep medicine. We will also strive for balance in our policies, in our initiatives and in our relationships.

In working to achieve balance for our membership and field, I will work diligently, along with the Board of Directors, to represent the pressing interests and concerns of all our members – academic, research and clinical – and I will work diligently to press forward with the Academy’s mission of setting the clinical standards for the field, advocating the recognition, diagnosis and treatment of sleep disorders, educating fellow professionals to ensure optimal care and fostering development of scientific knowledge.

Two years ago, we celebrated the recognition of Sleep Medicine as an independent medical subspecialty. The establishment of Board Certification under the American Board of Medical Specialties was major milestone for the field, and this past year saw the first certification examination. I commend each of you who sat for the exam and offer my sincerest congratulations to the almost 1,400 specialists who achieved a passing score. The next exam is in 2009, and I encourage all those practicing sleep medicine who are not yet certified to take the examination; doing so will only enhance your career and the field as a

whole.

Another one of our strategic goal has been working to expand the fellowship training programs, and ACGME accreditation of these programs has established sleep medicine within the academic medicine community. Clearly we have enjoyed many accomplishments recently, and I believe many more nascent opportunities exist for the Academy and sleep medicine.

As I just touched on, promotion of sleep medicine within academia has been an objective of the Academy's for many years. This is an area I believe we will continue to emphasize – support for physician scientists who are such an integral part of our membership and to bolster our profile within medical schools and training programs. Our membership with the Association of American Medical Colleges has been a sound foundational step, and we are looking to further develop our relationship by working on curriculum development to ensure sleep medicine is better addressed in instruction. Once again we are offering a hands-on forum for current program directors of ACGME-accredited fellowship training programs as well as prospective fellowship training directors at SLEEP 2008. Last year we launched a new initiative, AASM Academic Sleep Centers of Distinction, to recognize exemplary academic sleep centers that serve as models for our community and highlight the work of many of the outstanding physician scientists who have helped shape the field. I invite and encourage all academic centers to apply for this distinction, and look forward to receiving your application.

Our commitment to academic sleep medicine also extends to and encompasses our support of research and the American Sleep Medicine Foundation. This year the Foundation introduced the Physician Scientist Training Award to encourage careers in academic sleep medicine among our young physician investigators. The PSTA is just one example of the sustained, and continued, support of academic sleep medicine, and as our Foundation develops new initiatives will be created to further support this critical area of our field.

Research is another facet of our membership and organization that has been and remains an important area of emphasis.

The American Sleep Medicine Foundation is our charitable arm, and this year underwent a major facelift with the establishment of an Executive Board to develop new fundraising initiatives, create new grant programs, and manage its daily operations.

The Foundation also has received major commitment from the Academy. As Dr. Kushida outlined, the Academy has committed substantial resources – financial, programming and staffing – to the American Sleep Medicine Foundation, and reaffirmed this commitment last year through the establishment of an endowment to fund areas of research that are not being addressed through grants from traditional sources. We are all acutely aware of the challenges researchers face as traditional sources for funding dwindle. The Academy's leadership has responded, and I will build on this foundation by fully supporting the work of the Foundation's executive board and continuing generous support to the Foundation. I would also like to increase the profile of the Foundation through our relationship with NHLBI and other government and private funding agencies.

Lastly, I believe the expansion of research networks will be beneficial to not only Academy members as the data and evidence drive clinical practice, but also to our patients who are seeking new insight into sleep and sleep disorders as well as new and novel therapies. As president, I will work with the Foundation's executive board to make research networks a priority for both organizations, and will also work cooperatively with other granting agencies to promote research networks and translational research.

Academic sleep medicine, including education and training, and research, both basic and clinical, define and shape our clinical practice of sleep medicine and our ability to provide the best quality care to our patients.

In light of the evolution of the sleep medicine field, the role of the sleep specialist is more important than ever. As president, I will work to promote practice and policy issues that benefit our practice and our field as well as adequately address issues that present new challenges for the Academy.

One of my personal goals for this year will include overseeing the transition of the certification examination in behavioral sleep medicine to the American Board of Sleep Medicine. As a psychiatrist, I am committed to the promotion of behavioral therapy as a first-line treatment for insomnia, and I am proud of the emphasis the Academy has placed on behavioral sleep medicine through opportunities in professional education, research and certification. I commend the behavioral sleep medicine committee's efforts to bring behavioral sleep medicine to the forefront and appreciate their input and expertise. By moving administration of the examination to the ABSM we will add even more weight to this excellent exam, and open behavioral sleep medicine to more members of the sleep, medical and allied health communities, and, in turn, make behavioral therapies more available to our patients.

The publication of Medicare's national coverage determination for CPAP therapy has presented our field with new realities that will affect our clinical practice and also affect patient care. From the beginning of the CMS review of 240.4, the Academy has been a vocal force challenging evident conflicts of interest overlooked during the review process, offering unbiased data and calling for fair policies that are rooted in evidence. We have also worked directly with local Medicare carriers to develop fair coverage determination policies for CPAP therapy and we will continue to do so during my tenure as your President. Our efforts are paying off, and carriers are issuing very favorable local policies. In fact, Trailblazer Healthcare late last week released a policy, "Sleep Studies and Overnight Oximetry," which states unattended portable sleep studies (95806, G0399 and G0400) are **not indicated** for the routine assessment of obstructive sleep apnea or other sleep disorders. When trained personnel are not physically present throughout a recording session, the polysomnogram is considered "unattended" and is not covered. More information on this policy is in your inbox so please be sure to read the special membership update sent today.

As always, please be sure to read the Weekly Update for announcements of new local

determinations and policies.

I will also assume the Academy's challenge of the ambiguities, incompleteness and inconsistencies in the national coverage determination, and will work with CMS to resolve these issues so that the national and local determinations are strong and fair policies focused on quality care for patients. This is an ongoing process and the battle is far from over. There are those out there who believe any physician, regardless of training, can diagnosis, treat and care for patients with sleep disorders as well as we can. I am committed to seeing this battle through – both in research and practice arenas – to ensure our vitality of our profession and sound healthcare. Quality patient care and research are the tools we have and the ones we use to combat these arguments and positions, and we will prevail.

Our accreditation has been the gold standard for the sleep medicine community, and this is evident in the quality of care provided at sleep disorders centers and sleep related breathing laboratories around the United States. As a member of the Board of Directors and a practicing clinician, I have a vested interest in ensuring our standards for accreditation are fair and objective, and that the standards include verifiable and quantifiable measures. Currently a presidential task force is assuming a review of the accreditation standards, and I will continue to lead this process, and ensure our standards represent the highest assurance of quality.

We are facing increasing threats to our practice, from legislation that imposes taxes on our practice to laws that restrict, prohibit or limit the role of sleep technologists. I've had a civics lesson in my own state this past year. In North Carolina we are working to establish a licensure bill for sleep technologists. There are surprising challenges in this process, but it is critical to members that we remain vigilant in each state to the challenges that present themselves. In my state the Academy began by fighting legislation that would have allowed respiratory therapists, with no requirement of sleep training, be allowed to inspect sleep laboratories. Through the encouragement of several technologists and the dedication of members at UNC, Wake Forest and Duke and in private practice, as well as the invaluable help of the Academy, we have succeeded in writing our own legislation, which is currently going through the committee process. As our field faces mounting legislative challenges, the Academy is assisting each state with dedicated staff, outreach to key members of the legislature, organization and incorporation of state sleep societies and strategic advice. This week there is a workshop for sleep medicine specialists and technologists interested in establishing state sleep societies. The Academy will not manage or direct these state sleep societies, rather help members with the complexities surrounding incorporation, establishing a board and getting the organization up and running. This is wonderful opportunity to meet our health policy staff and learn more about how the Academy can help protect the practice of sleep medicine in your state. These legislative efforts also require the involvement and support of individual members, and I encourage you to become involved locally.

Lastly, I know my patients struggle with finding a sleep specialist in their provider books. Our specialty is sometimes, but not always, listed by private carriers. Now that we are recognized as a unique subspecialty, we should be listed as such by all carriers. I'd like to make it easier for patients to find us...and thus to sleep well.

As we strive to achieve balance among the many diverse facets of our membership, one area which I will continue emphasizing is the value of the sleep specialist. Last fall, while at one of the Board Review Courses, I overheard members during a coffee break talking about their practices. Each introduced herself or himself as a neurologist, pulmonologist, pediatrician or area in which they first trained. While our multi-disciplinary background is clearly one of our strengths, it remains a challenge as well. Three years ago the Academy introduced more balanced sections: a new disease-oriented structure to encourage a move from specialty-oriented sections to disease-oriented interest sections. While some sections have been energetic, active and engaged, others have not had as much interest. The committee structure is only one way members can volunteer. The sections have steering committees that need help. I encourage all of you to attend a section meeting this week to network with colleagues and propose ideas and programs that the Academy can introduce. I can't imagine an organization more focused on providing its members opportunities to serve in a variety of ways.

As we continue to expand the recognition of the sleep specialist and of sleep medicine within medicine and the public, we must set an example by embracing it ourselves, and embracing the balance between our academic, research and clinical interests. This is our challenge and I welcome the opportunity, as your president, to make this a priority for the Academy.

I have outlined how I intend to reach my goal of balance for our membership: touching the academic, research and clinical practice areas that define who we are. However, I would be remiss if I did not include a word or two about the critical role my fellow Board members. Our society is fortunate to have a diverse and qualified board leading it at this critical moment. The expertise, insight and perspective they bring is invaluable to our organization. The greatest asset each and every member of the board brings is valuable, hands-on experience acquired because they have come up through the ranks of the organization. Each member of the board has volunteered their time and served our organization in some capacity: as a member of committees, chair of a committee or section, member of the Program Committee or as a chair of one of our educational courses. Involvement with the Academy is the pathway to success in governance, organization and policy, and is an indicator of the experience and dedication that is necessary to lead an organization of our size and versatility. I hope you all recognize and appreciate the time, effort and commitment to excellence our board has made not only to the Academy but also to the advancement of sleep medicine and sleep research.

Having raised four children (one is only sixteen, so not quite out the door), I know something about sleep deprivation as well as controlled chaos. The teacher of one of my sons called me last week to let me know that in a faculty/student symposium a faculty member asked a student panel about their sleep habits. Each of the students gave a predictable response of around 6 hours of sleep on school nights. Except my son. He replied eight hours. When asked how he managed this, he explained that in his house getting sufficient sleep was considered as important as a healthy diet. "I'm the youngest of four" he quipped "my parents are already on to all of the usual tricks." The coming year will, no doubt, bring many challenges. With your support and the assistance of the Academy staff and your

Board of Directors, I know that we will achieve a balanced approach to your membership, to our practice and to our policies that will enable the continued success, growth and evolution of our field.

Thank you.