Resumos das Comunicações Orais (C) e dos *Posters* (P) *Abstracts of Oral Communications (C) and Posters (P)*

Resumos das Comunicações Orais Abstracts of Oral Communications

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C 01

Sustained attention measurements in obstructive sleep apnoea and risk of traffic accidents.

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The aim was to use data regarding vigilance, tracking error and reaction time to identify associations between these parameters and clinical characteristics in OSA patients. The relationship between these measurements and the risk of suffering traffic accidents has also been studied.

Patients and Methods. 129 consecutive adult patients with a driving licence and clinical symptoms of OSA were recruited from the hospital waiting list. Each patient was applied a polysomnography and two driving tests; vigilance was tested with Steer Clear®, while tracking error and reaction time were tested with Divided Attention Steering Simulator DASS-2D®. Basic Nordic Sleep Questionnaire and Epworth Sleepiness Scale and SF-36 questionnaire were applied. Regression models were used to investigate factors associated with patient performance on the simulators.

Results. Poor performance in vigilance was associated with alcohol intake (OR 4.41, 95% CI 1.13 to 17.20, P<0.05), and vitality dimension of SF-36 questionnaire (OR 0.97, 95% CI 0.94 to 0.99, P<0.05). Poor tracking error was associated with female gender (OR 6.79, 95% CI 1.37 to 33.65, P<0.05), alcohol intake (OR 3.32, 95% CI 1.03 to

10.63, P<0.05), and a history of accidents the previous year (OR 5.84, 95% CI 1.33 to 25.68, P<0.05). Poor reaction time was only associated with age (OR 1.12, 95%CI 1.03 to 1.21, P<0.01). When all three performance measures were studied jointly, only reaction time was associated with self-reported dozing while driving (OR 5.39, 95% CI 1.10 to 26.32, P<0.05), and irresistible tendency to fall asleep was associated with poor tracking error (P<0.05).

Conclusions. Certain factors normally associated with OSA are also associated to measurements of performance on driving simulators. Although these measures are not directly associated to traffic accident, they are, in fact, associated to related circumstances such as dozing while driving and falling asleep while driving.

C 02

Heart rate regularity analysis obtained from pulse oximetric recordings in the diagnosis of obstructive sleep apnoea

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Approximate entropy (ApEn) is a technique that can be used to quantify the irregularity or variability of time series

and its implications for health. A decrease in ApEn, that is an increase in regularity, is associated with the presence of cardiac disease. We prospectively evaluated the validity of ApEn of heart rate data obtained from pulse oximetric recordings as a diagnostic test for obstructive sleep apnoea (OSA) in patients clinically suspected of suffering this disease.

A sample of 187 referred outpatients (147 men and 40 females), with 58.3 \pm 12.8 years and BMI of 30.4 \pm 4.1 kgr/m2 were studied using nocturnal pulse oximetric recording performed simultaneously with polysomnography. A diagnosis of OSA was confirmed in 111 (59.3%). ApEn was estimated using MatlabR (Natick, Massachusetts) with the widely established parameter values of m=1 r=0.2 times the standard deviation (SD) of the original data sequence. Patients with OSA presented significantly higher approximate entropy levels than those without OSA (1.334 \pm 0.189 versus 1.167 \pm 0.182). The distribution of ApEn throughout the night in OSA patients shows relatively small changes and that the proportional difference between OSA and non-OSA groups remains relatively constant throughout the night. Approximate entropy correlated significantly with apnoea-hypopnea index (r = 0.38; p = 0.000). There was no significant correlation between approximate entropy and either age or body mass index. No significant changes were observed in approximate entropy throughout the night in OSA patients. Using receiver operating characteristic curve analysis, we obtained a diagnostic sensitivity of 71.2%, specificity 78.9%, positive predictive value of 81.3%, and negative predictive value of 66%, at a threshold of 1.272. We conclude that ApEn of heart rate could be useful in the analysis of nocturnal oximetry and this method is very well suited to recognise the sleep apnoea-specific cyclic variability of heart rate.

C 03 Alveolite alérgica extrínseca: Caso clínico

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A doença pulmonar do criador de aves deve ser incluída no diagnóstico diferencial de doença pulmonar intersticial. Os autores apresentam um caso de uma doente de 20 anos, estudante, que foi internada para esclarecimento de um

quadro de dispneia de início súbito, tosse e febre. Durante o internamento fez cintigrafia V/P que revelou alta probabilidade de tep, iniciou anticoagulação oral com varfine. Por manter dispneia de esforço com agravamento progressivo, foi orientada para a consulta de Pneumologia, onde a doente refere ter contacto com aves desde a infância. Fez TAC torácico helicoidal que revelou fibrose pulmonar, padrão em vidro despolido com micronodularidade centrilobular e sinais de hipertensão pulmonar. As provas funcionais respiratórias revelaram um padrão restritivo, com hipoxemia grave em repouso. A broncofibroscopia não revelou alterações macroscópicas e o lavado broncoalveolar mostrou um predomínio de linfócitos (71,2%) e uma relação CD4/CD8 diminuída, sugestiva de alveolite alérgica extrínseca. O ecocardiograma revelou hipertensão pulmonar (70mmHg de PSAP) s/dilatação das cavidades. Todos os exames bacteriológicos, culturais e serologia para doenças auto-imunes foram negativos. Foram também excluídas as neoplasias. Iniciou corticoterapia oral com deflasacort 30mg/dia e deixou de ter contactos com aves. Actualmente assintomática.

$C \cdot 04$

Pneumonia por *Pneumocystis carinii* em doentes imunodeprimidos VIH negativos – A propósito de dois casos clínicos

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Os autores apresentam dois casos clínicos de doentes imunodeprimidos VIH negativos com pneumonia por *P. carinii* com diferente resposta ao tratamento.

1º caso: doente do sexo masculino 42 anos, internado por pneumonia extensa à direita. Ao exame objectivo apresentava lesões cutâneas eritemato-maculares disseminadas com histologia compatível com lúpus cutâneo subagudo. Analiticamente revelava anemia normocrómica normocítica e leucopenia acentuada; C3, C4, CD3 e CD4 baixos; PCR e VS elevadas; VIH1 e 2 negativos; ANA positivos; ecografia abdominal e ecocardiograma revelaram ascite e derrame pericárdio; TAC torácica: consolidação parenquimatosa de vários segmentos do lobo sup, médio e inf à direita; broncofibroscopia (BFO) com alterações inflamatórias; LLBA positivo para *P. carinii.* Face ao quadro de lúpus

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