

Arkansas Trucking Association Safety Management Council Meeting 11/13/08

Welcome

Don Holman, SMC Chairman. I'd like to call this meeting of the Arkansas Trucking Association's Safety Management Council to order.

Reading of the minutes of the last meeting.

The minutes were published on the web-site after our last meeting. May we have a motion to approve these minutes? Is there a second? Approved.

New Business/Old Business

Is there any other new business from the audience at this time? None.

Break for Lunch

Presentation - Topic: Sleep Apnea

Mr. Holman introduced the Presenter as follows:

Mr. John Dykes, Occupational Health Manager, ResMed, Inc.

Mr. Dykes gave a brief summary of his company's (ResMed) capabilities with emphasis on the following:

- Formed in 1989
- Primary purpose was to commercialize a device for treating **obstructive sleep apnea (OSA)**, a major subset of **sleep disordered breathing (SDB)**.
- Developed in 1981 by Professor Colin Sullivan and colleagues at the University of Sydney, nasal **continuous positive airway pressure (CPAP)** provided the first successful noninvasive treatment of OSA.
- ResMed is a producer of a variety of devices to treat SDB. Additionally, they provide consultant services for a company to determine what is best for their employees.

Key Points Made During The Presentation:

- SDB affects about 20% of truckers have untreated sleep apnea.
- Surveys show that about 90% of people with obstructive OSA remain undiagnosed and untreated.
- The trucking community, because of the nature of the work and the climate for which truckers operate, are prime candidates for OSA.
- Truckers with sleep apnea are six times more likely to be in a crash. Additionally, They are twice as likely to have a heart attack or stroke.
- ResMed is committed to increasing education and awareness of the serious health consequences of untreated SDB among the general public.
- Medical expenses reduced by 57% saving \$6000.00 per treated driver annually.
- Accidents are reduced by 73%.
- Employee retention increased by 129%.
- 4 A program consists of: Awareness; Assessment, Adjustment, Adherence
- Emphasis made that Awareness is not enough....treatment is necessary to prevent accident and potential liability claims.

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- In the future, the government is expected to write in regulations governing trucking requirements for identifying and treatment of employees with OSA.
- Must have management at the top to be involved for the program to be successful.
- Refer to Mr. Dykes' power point presentation for specific details of his presentation.
- **If interested for more details about OSA and treatment devices, you may contact Mr. Dykes at the following:**

Email: jdynes@ResMed.com

Question & Answer / Points

Q: The Schneider Study on sleep apnea is the source document used by many as to the problems being experienced in the trucking community. How many drivers were used in their study?

A: I do not have the figures, but could obtain them

Q: Do you know if Schneider is still identifying and treating their drivers diagnosed with OSA today?

A: It is my understanding that they are still involved. Their focus is on BMI which identifies potential candidates for OSA.

Q: Is your company the only one that provides devices to treat OSA.

A: No. There are 6 to 10 devices on the market. They different in degree of sensitivity. The device that you would choose would be dependent upon your company's analysis of their driver pool and the associated costs for treatment.

Q. A person with OSA, do they experience a sleep interruption every night?

A. No, several factors affect the interruption of an individual's sleep. They are: sleeping on one's back, lateness in eating before bed time, consumption of alcohol, and how fatigue one is.

Our next meeting (TBD)

Number in attendance: 16

Meeting Adjourned - travel safely.