

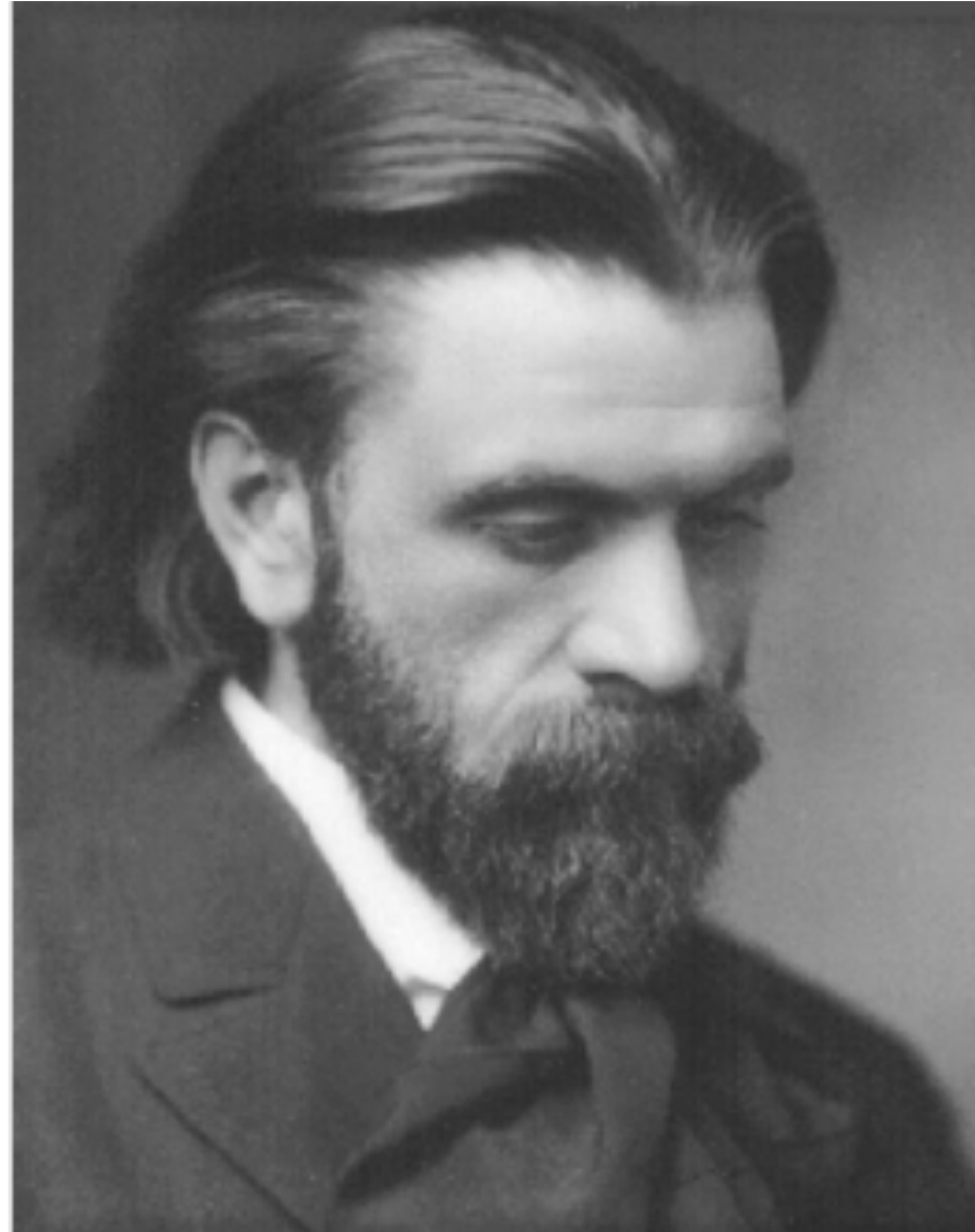


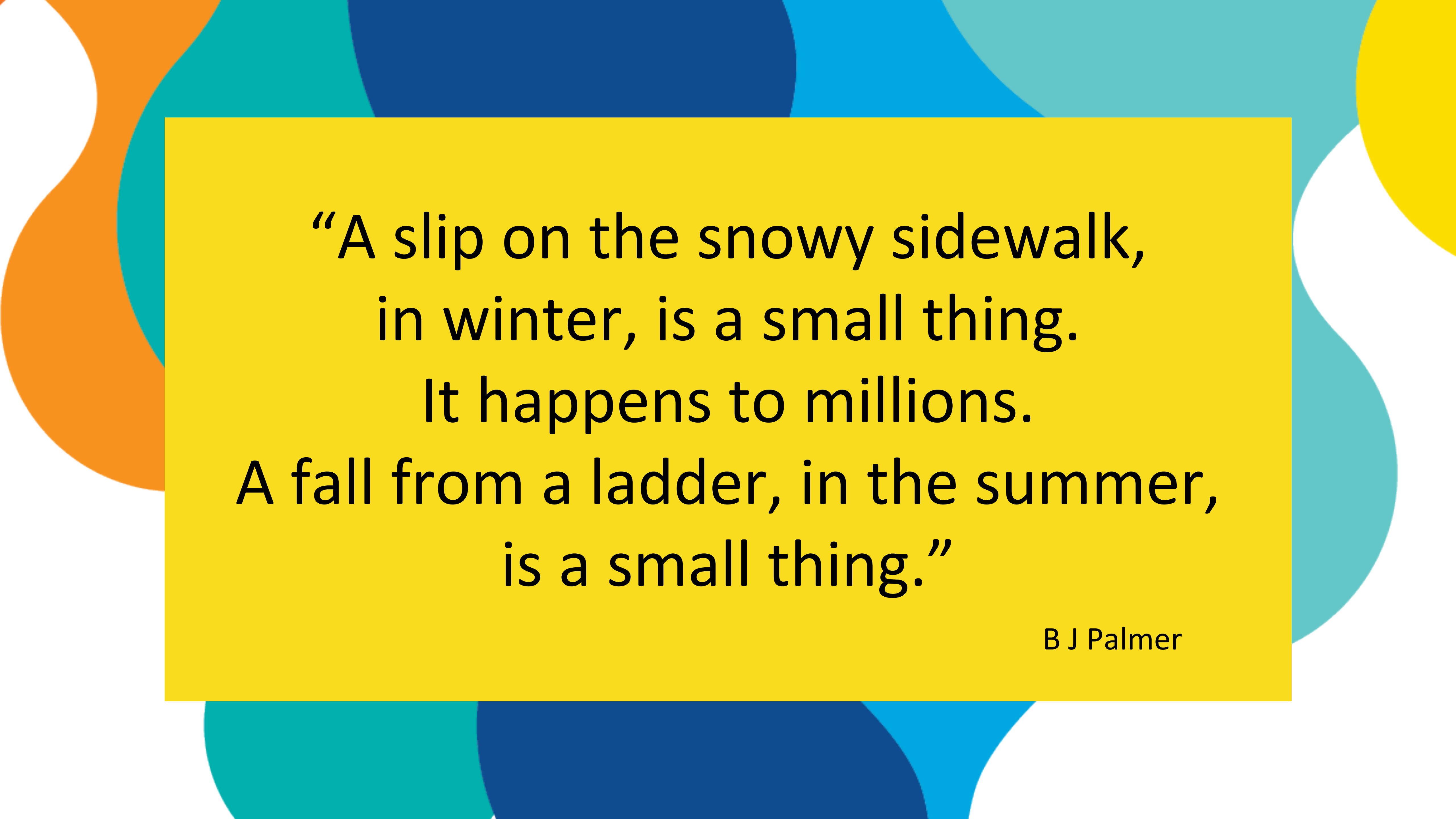
# The cat amongst the pigeons

Sydney, 22 October 2022

**Brett Lillie** 

# Dr BJ Palmer





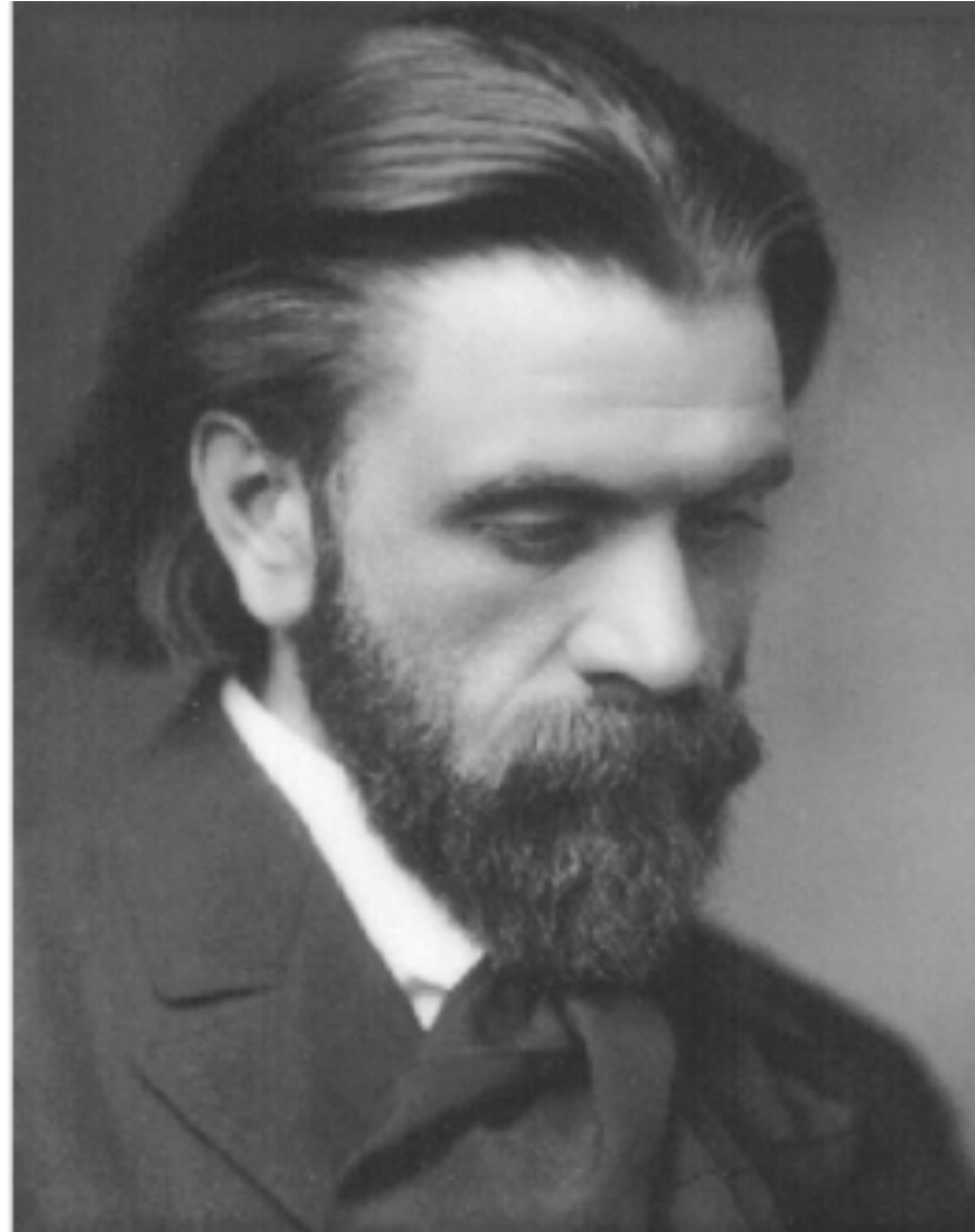
“A slip on the snowy sidewalk,  
in winter, is a small thing.  
It happens to millions.  
A fall from a ladder, in the summer,  
is a small thing.”

B J Palmer

# Dr BJ Palmer



# Dr BJ Palmer



Visionary

Influencer

Resourceful



# The industrial revolution

Hand power to machine power


Alarm clocks

Standard work week (9am - 5pm)



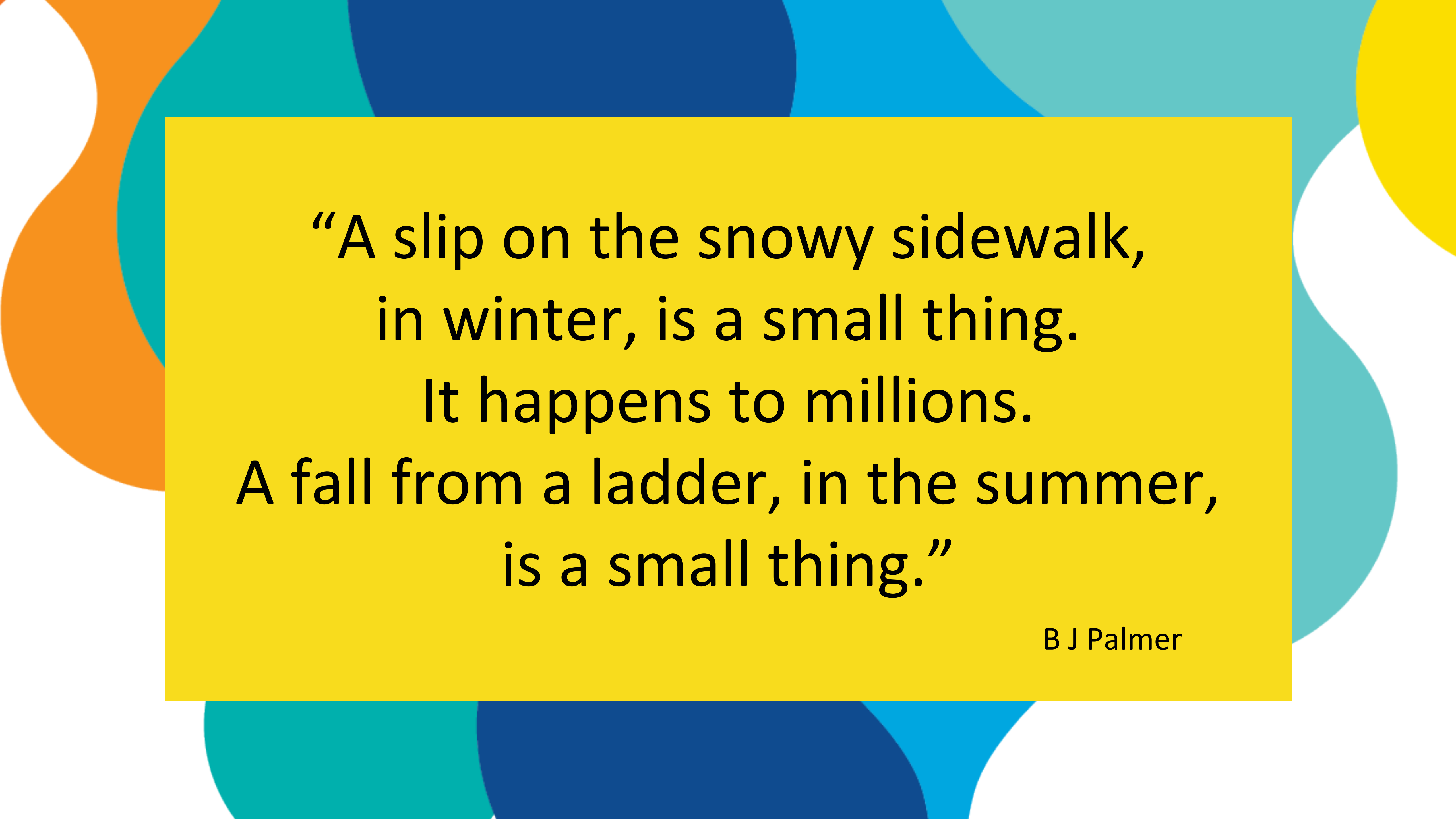







## Did you know?

Today our kids on average sleep 2 hours less than the same kid 80 years ago (in BJ Palmer days).



“A slip on the snowy sidewalk,  
in winter, is a small thing.  
It happens to millions.  
A fall from a ladder, in the summer,  
is a small thing.”

B J Palmer



# Did you know?

By the time you are 65:

8 out of 10 people live with 1 illness

7 out of 10 people live with 2 illnesses

Research is catching up!

**The cat  
amongst  
the pigeon**





# Sedentary lifestyle

Sitting is the new smoking

Sleep apnoea = silent killer

Sleep apnoea is as common as diabetes



When was the last time you woke up without an alarm clock?

When was the last  
time you woke up  
feeling refreshed?





# From today onwards

The brain has two gears

## Day time

movement + gravity

## Night time

Ability to rest (sleep)





# Night time

Is when your brain goes to work

- Sorting out memories
- Dreaming about new possibilities
- Making connections + considerations
- Neuro-cleaning
- Recharging your emotional bank account

Is when kids grow

# Just another regular day...





# The research

43% of women office workers (35% of men) averaged less than 6 hours sleep each night

1 in 5 women averaged less than 5 hours sleep  
(1 in 8 men)

48% of office workers said their quality of sleep had fallen in the year up to April 2021

63% reported increased fatigue since returning to the office





# Daylight saving

1hr less sleep =  
24% increase risk of heart attack

1hr extra sleep =  
21% decreased risk of heart attack

< 7hrs of sleep per night for 10 nights  
= all-nighter



# Compromised sleep

## Motor behaviour

Dr Carl - micro sleeps

< 5hrs of sleep

= > 300% risk of crash

## Emotional behaviour

> Anxiety

> Depression



# Compromised sleep

## Metabolism

- < ability to lose weight
- > poor food choices
- > insulin resistance

## Learning and Memory

- < memory consolidation



# **Compromised sleep**

## **Neurodegenerative conditions**

Parkinson

Dementia

Huntington's disease

## **Anatomical relationships**





# Anatomical relationships

## Sleep apnoea

50% of men 40-85 years

23% of women

Increasing over the past two decades



# Anatomical relationships

**Airway**

Anatomy

Arousal

Fragmentation



# **Anatomical relationships**

## **Craniovertebral relationships**

Breathe

Bite

Swallow



# Anatomical relationships

**Growth**

Proportional

**Lifestyle impacts**

Degeneration

Function

Reflex



# **Anatomical relationships**

**Chronic pain = chronic sleep**



# The good stuff about sleep

Learn faster

Improve BP

Better food choices

Better memory

Less likely MVA

Better emotional wellbeing

**Who are the best people to deal  
with sleep?**



**The cat  
amongst  
the pigeon**







# **Sleep is the worst diagnosed area for 2 reasons**

1. You need a team

2. Everyone comes at it from different  
point of views

3. You need a team

When was the last  
time you woke up  
feeling refreshed?



# Me today

Sleep enthusiast

Pain stalker

Solution seeker

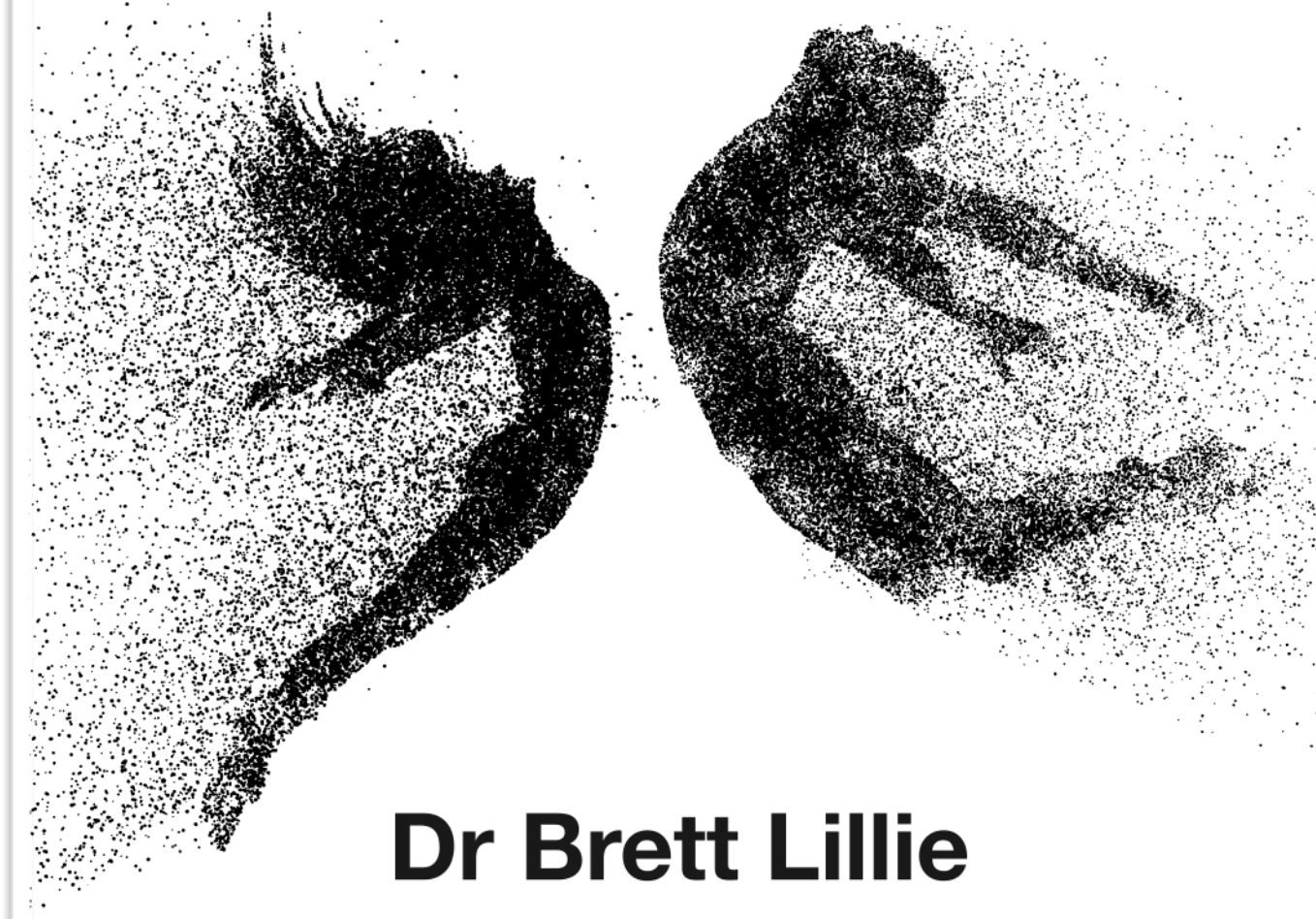
Athlete scout



# Me today

## REDISCOVER **YOUR** ATHLETE WITHIN

A practical **10 step process** to get you moving  
and keep you moving, **for the rest of your life**



**Dr Brett Lillie**



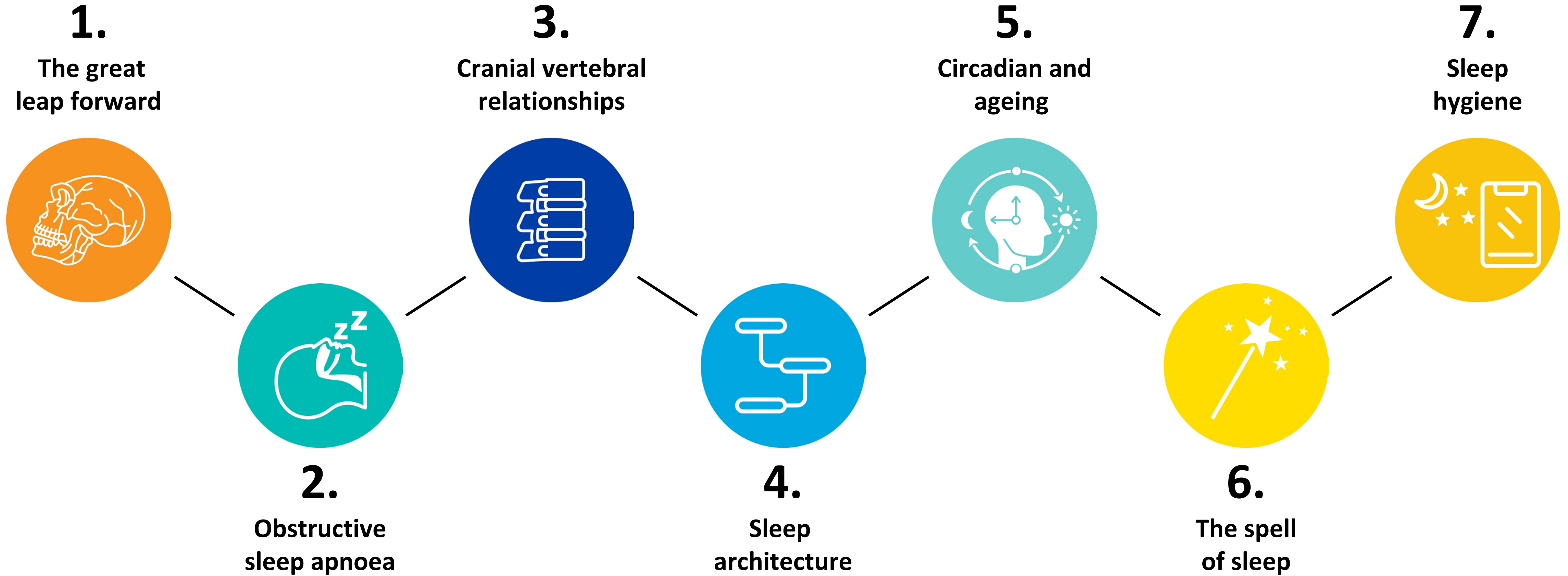
# My journey



Why shave?



# Our journey today



# Sleep deep dive

**1.**

The great  
leap forward







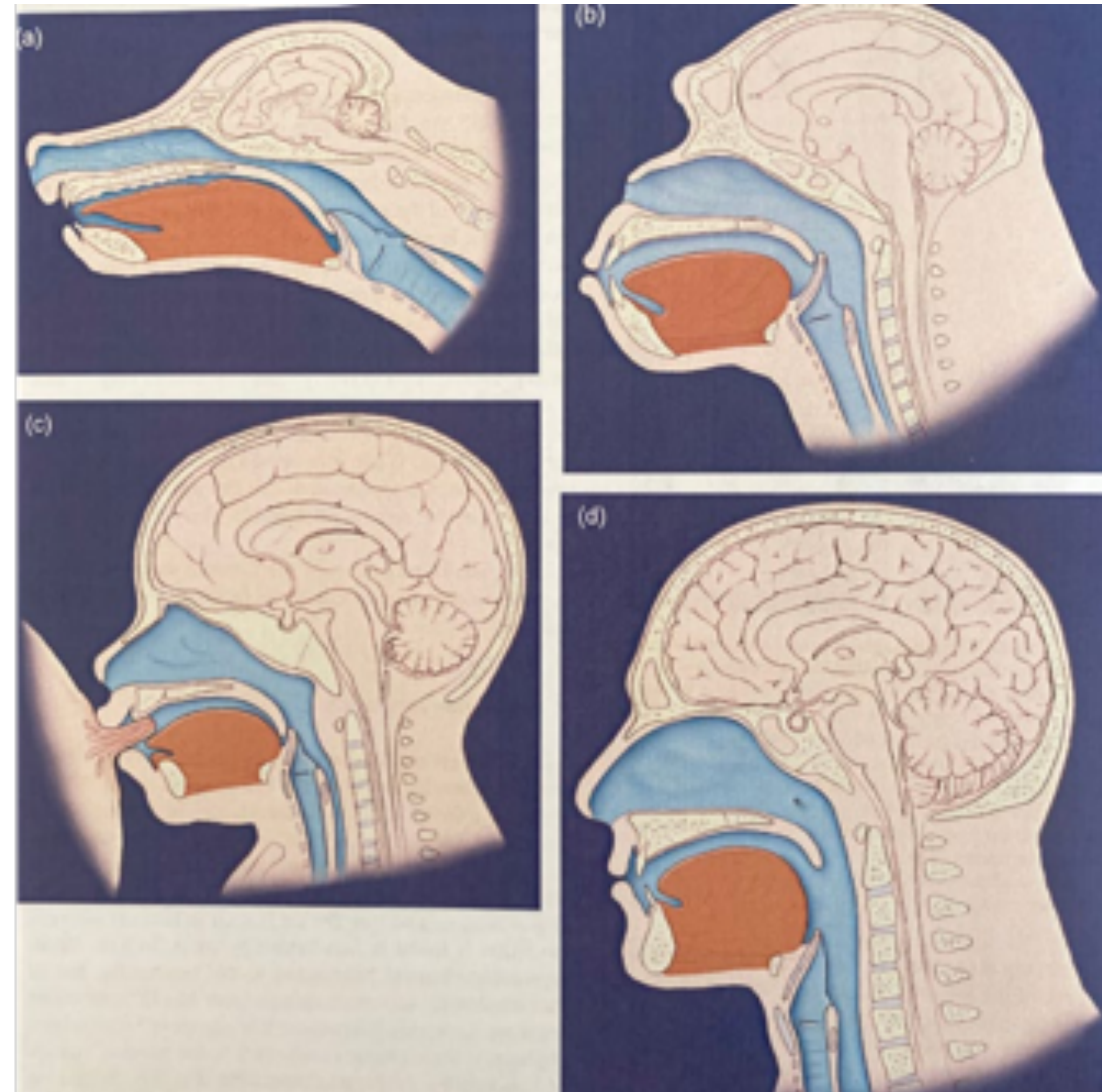
# **The great leap forward**





# The descent of the larynx

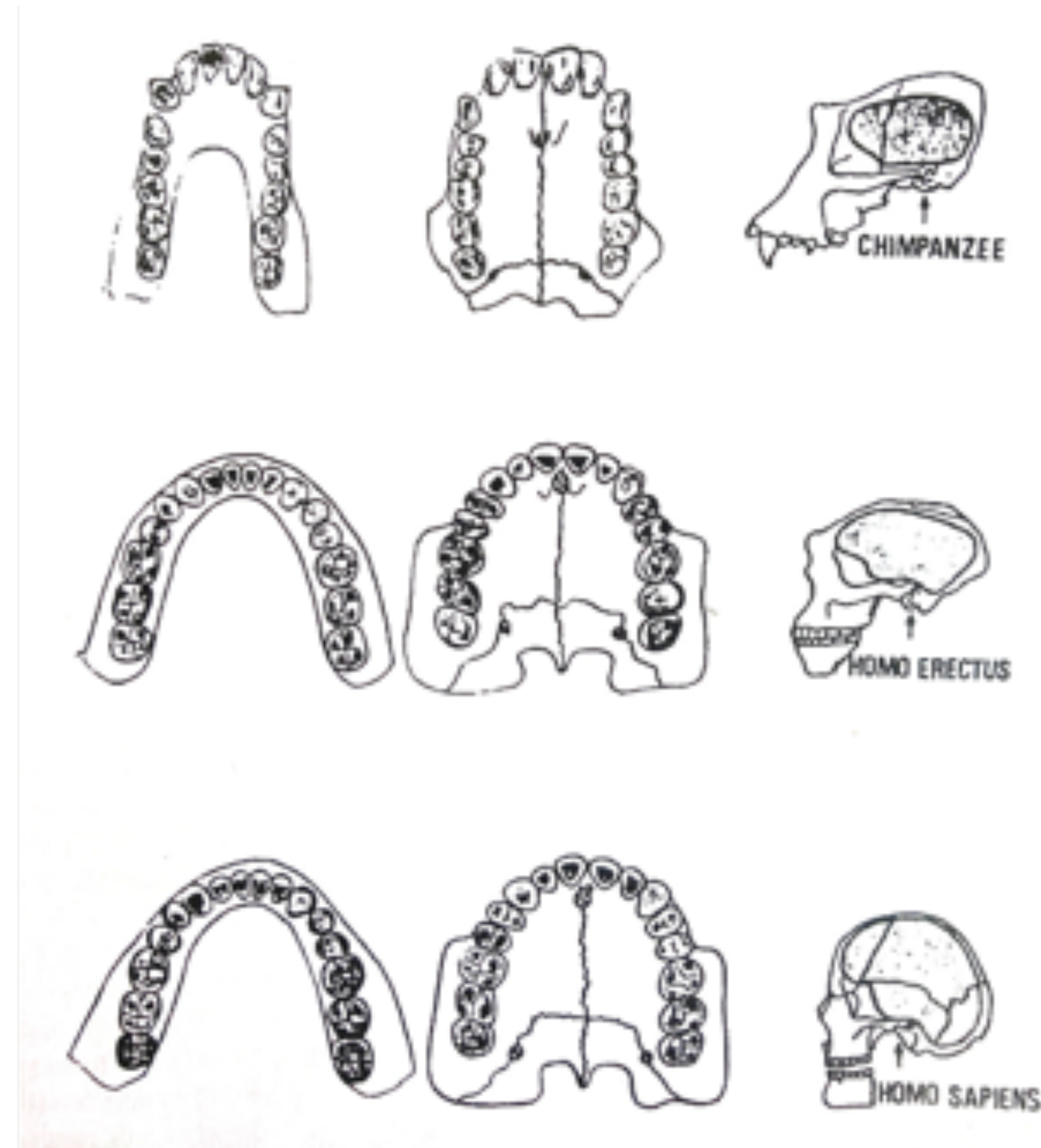
The great  
Leap  
Forward





The great  
Leap  
Forward

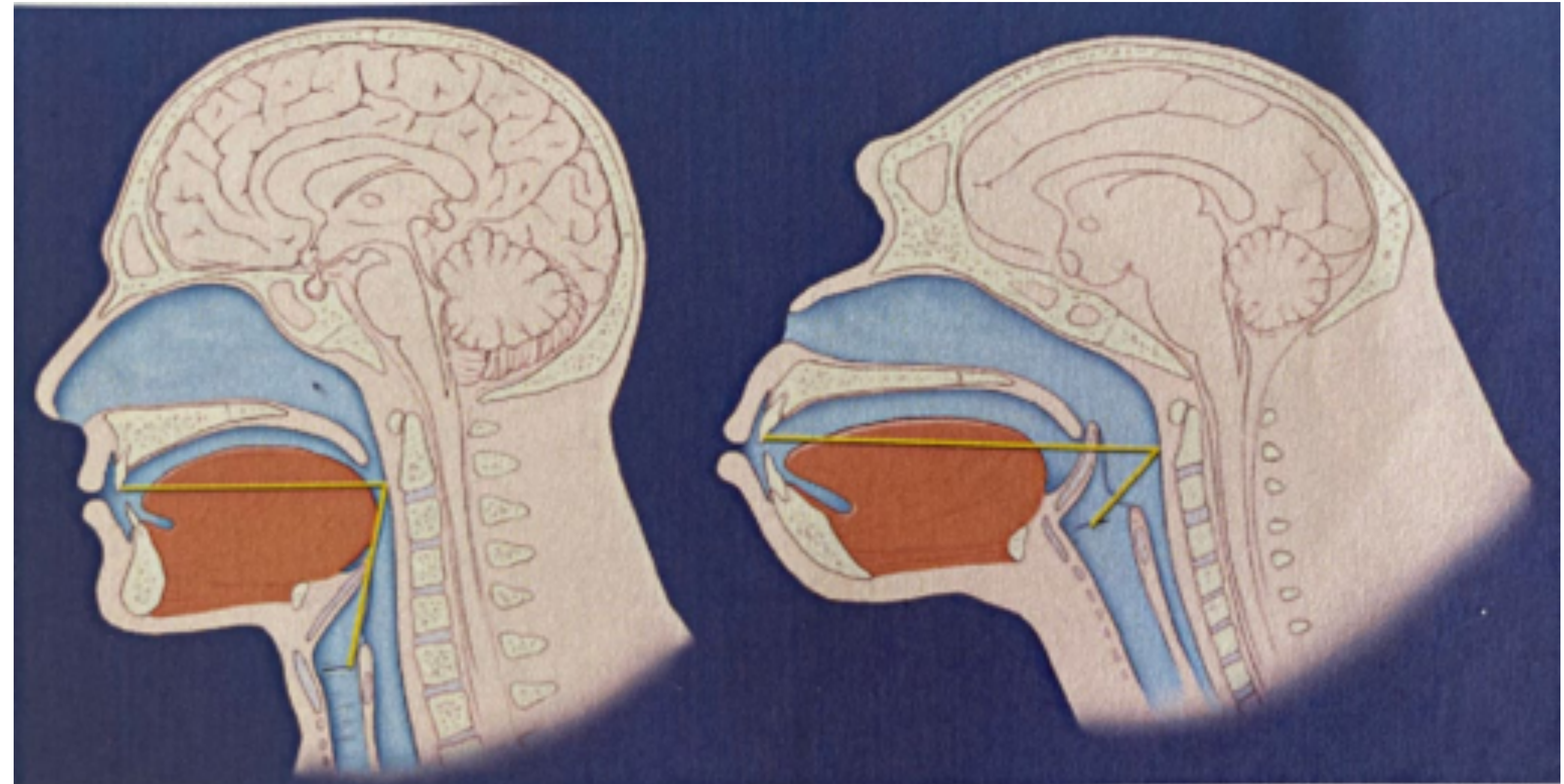
# Maxilla evolution





The great  
Leap  
Forward

# Human vs chimpanzee





The great  
Leap  
Forward

# Dr Weston Price, dentist 1930s



# Sleep deep dive

**1.**

The great  
leap forward



**2.**

Obstructive  
sleep apnoea

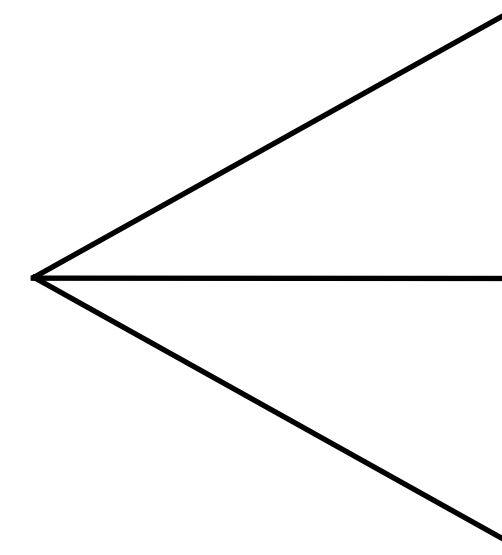


# **Obstructive sleep apnoea**



Obstructive  
Sleep  
Apnoea

**Sleep**



Brain

Airway

Movement







Obstructive  
Sleep  
Apnoea

# Definitions

## 1. **SDB - Sleep Disorder Breathing**

Decrease airflow 30% for 10 sec

## 2. **OSA - Obstructive Sleep Apnoea**

Decrease airflow 90% for 10 sec

## 3. **Syndrome - add daytime symptoms**

- Epworth scale
- Stop Bang



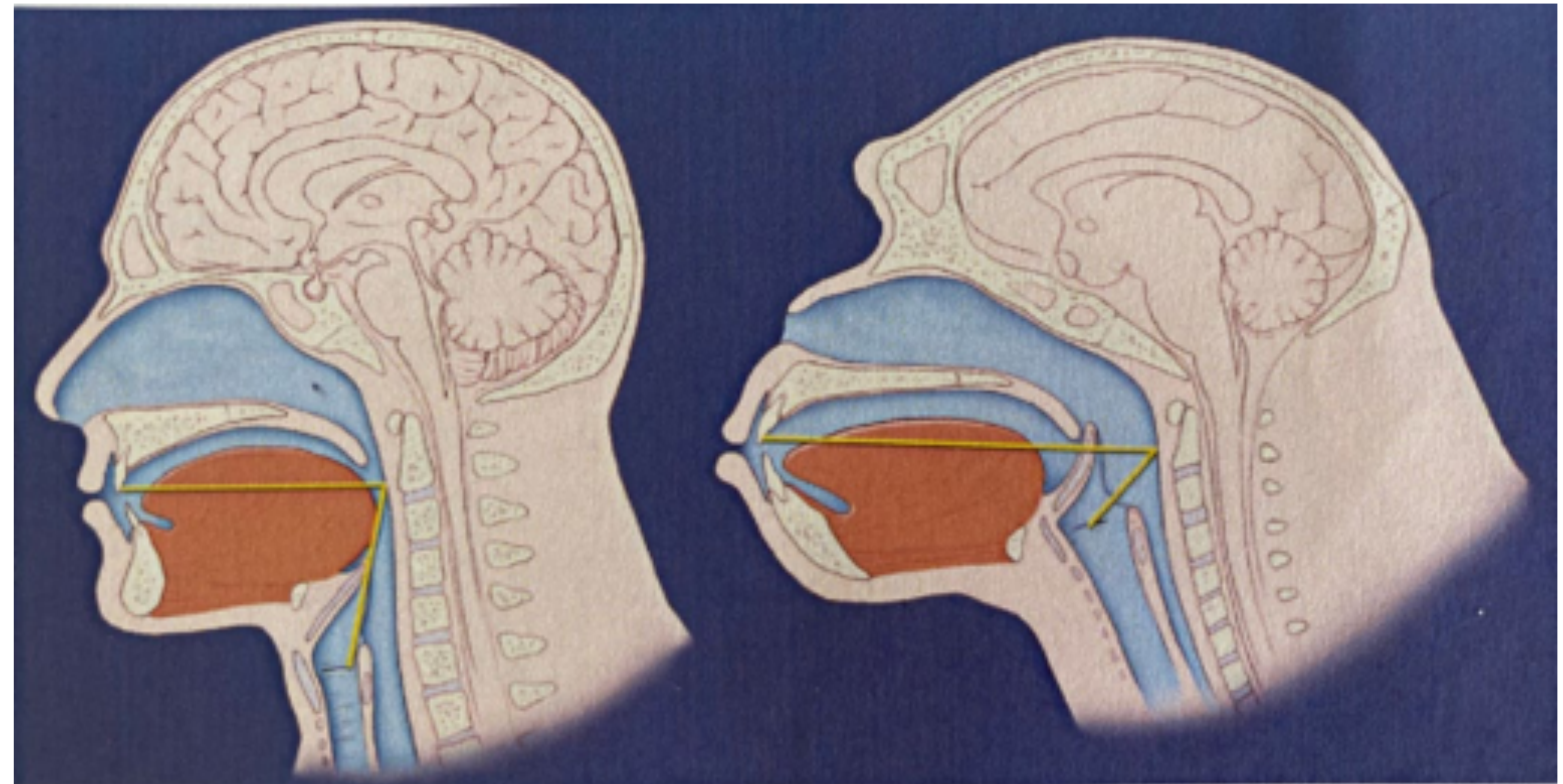
**Obstructive  
Sleep  
Apnoea**

# **Sleep apnoea vs diabetes**



Obstructive  
Sleep  
Apnoea

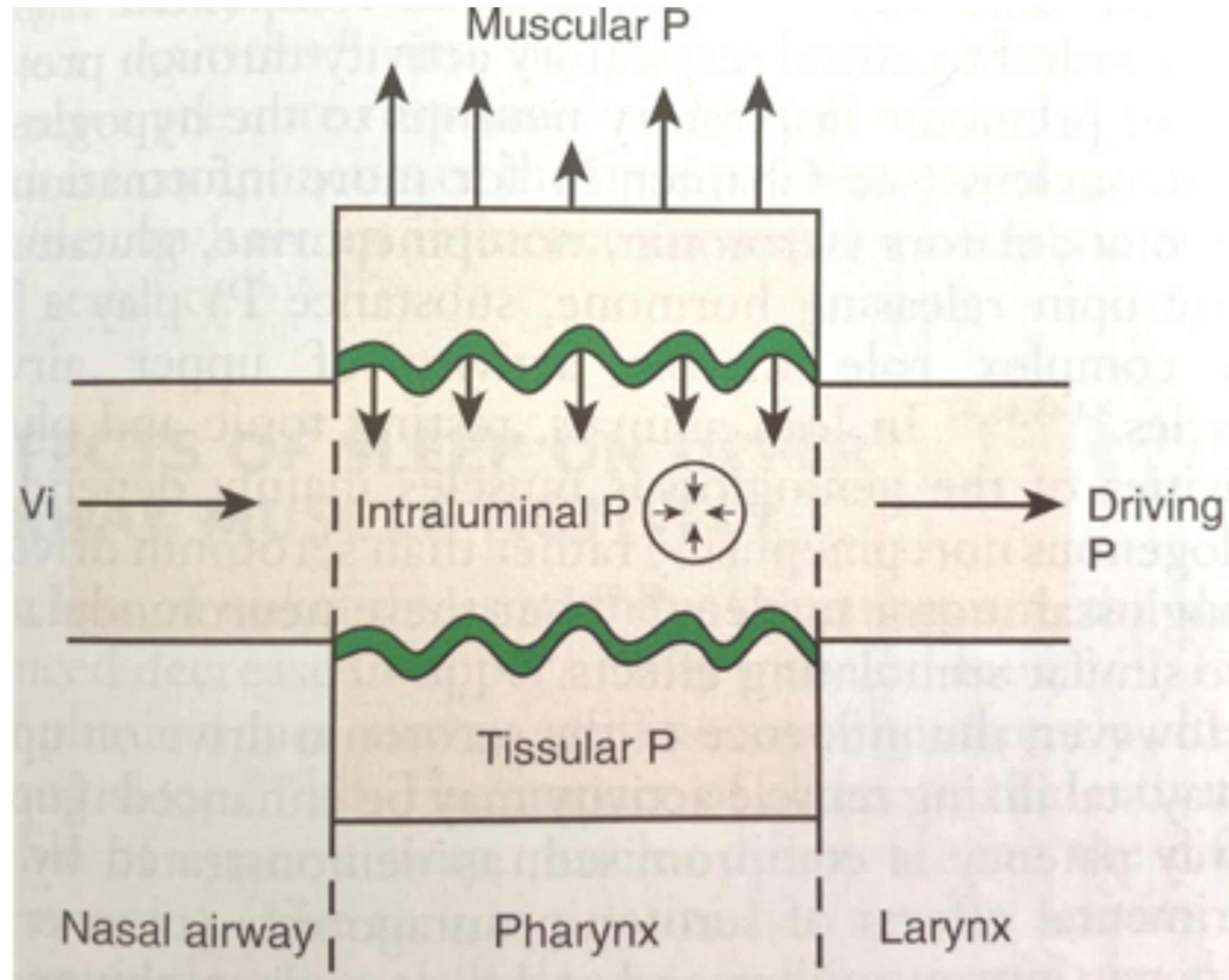
# Human vs chimpanzee





Obstructive  
Sleep  
Apnoea

# Air flow - Starling resistor





Obstructive  
Sleep  
Apnoea

# OSA stats

50% of men 40-85 yrs

23% of women

Increasing over the past two decades



Obstructive  
Sleep  
Apnoea

# Four phenotypes

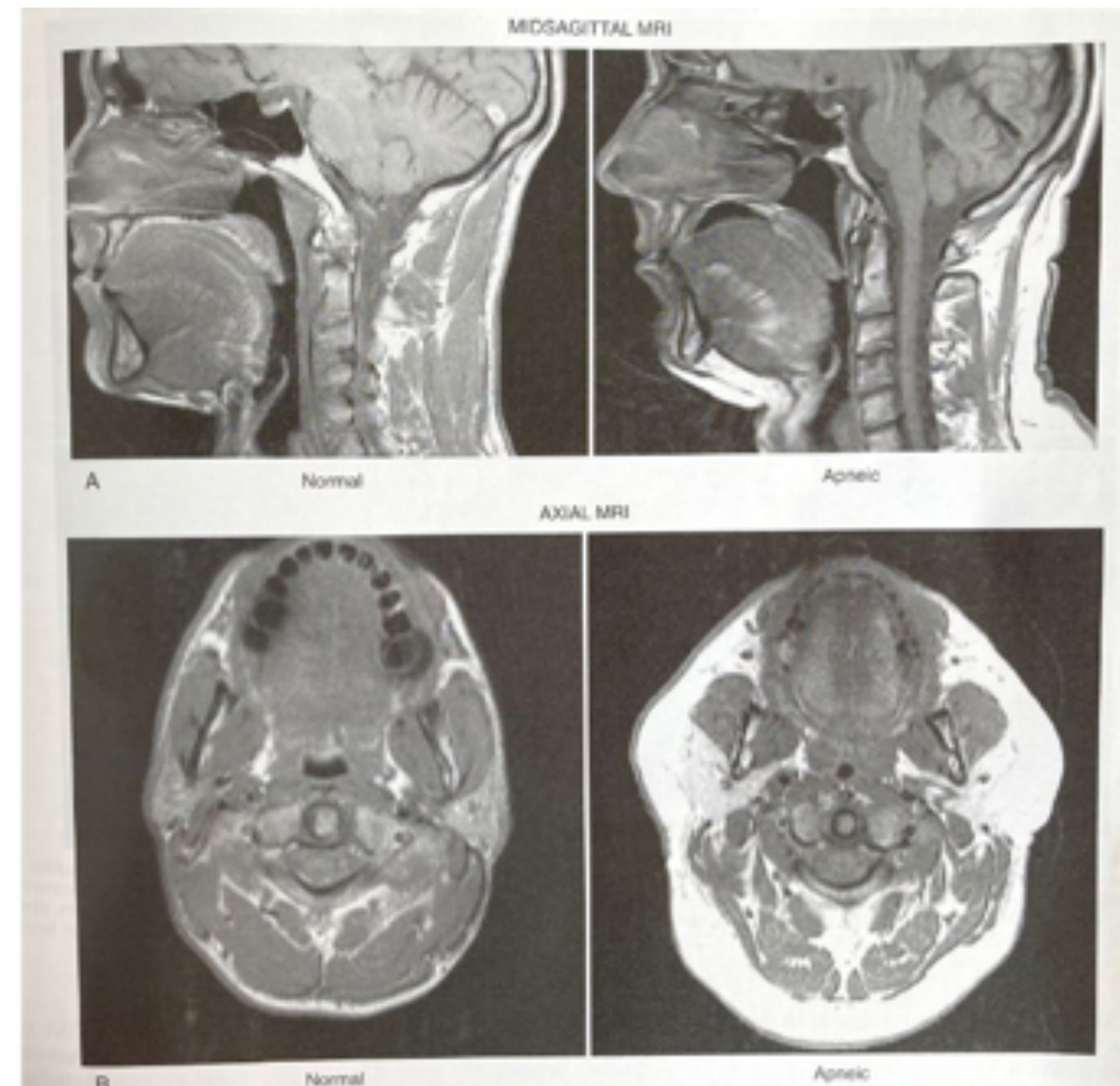
1. Upper Airway Anatomy
2. Effectiveness of dilators -  
Genioglossus muscle (primary)
3. Arousal threshold (high loop threshold)
4. Inherent stability of respiratory control



Obstructive  
Sleep  
Apnoea

# Upper airway obstruction

MRI of the upper airway



Normal

Apnoea



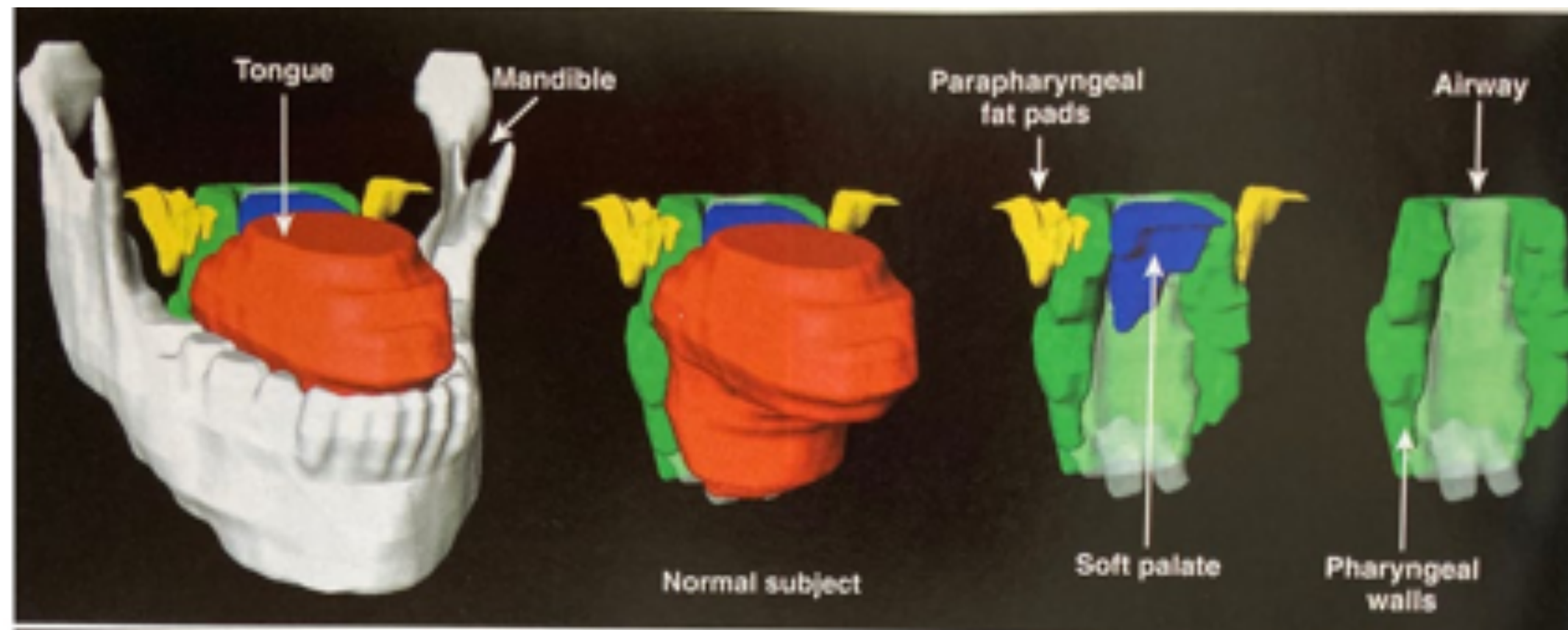


Obstructive  
Sleep  
Apnoea

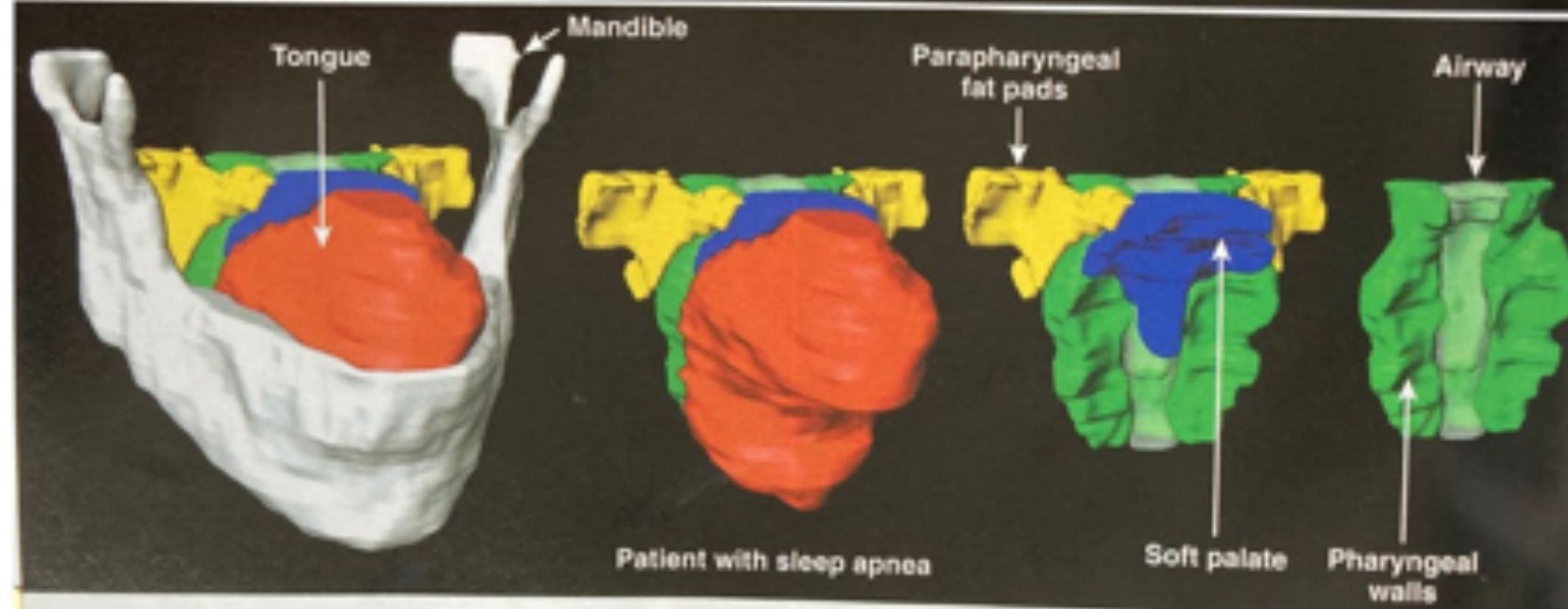
# Upper airway obstruction

CT of the upper airway  
(volumetric reconstruction)

Normal



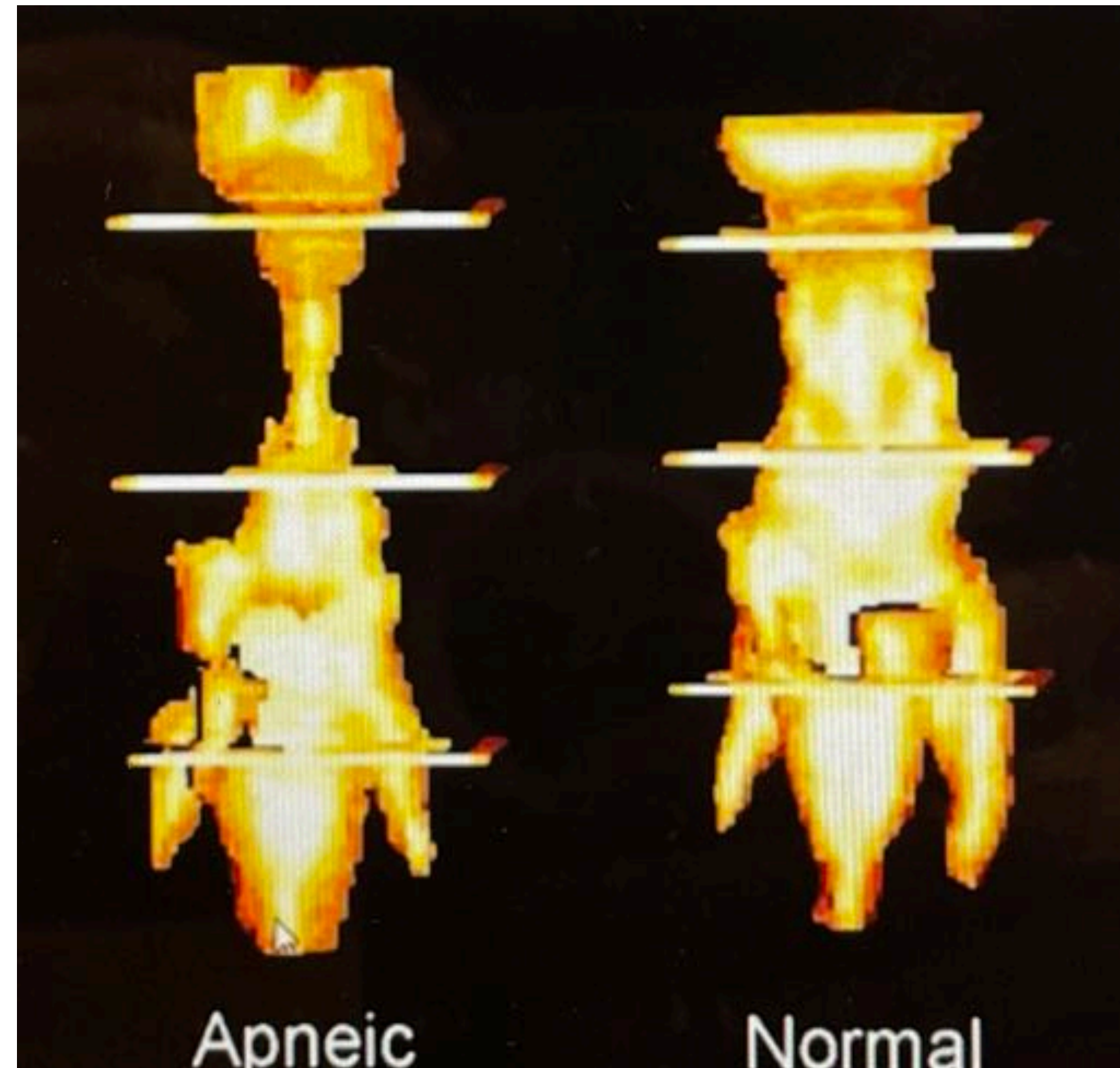
Apnoea





Obstructive  
Sleep  
Apnoea

# Upper airway obstruction





Obstructive  
Sleep  
Apnoea

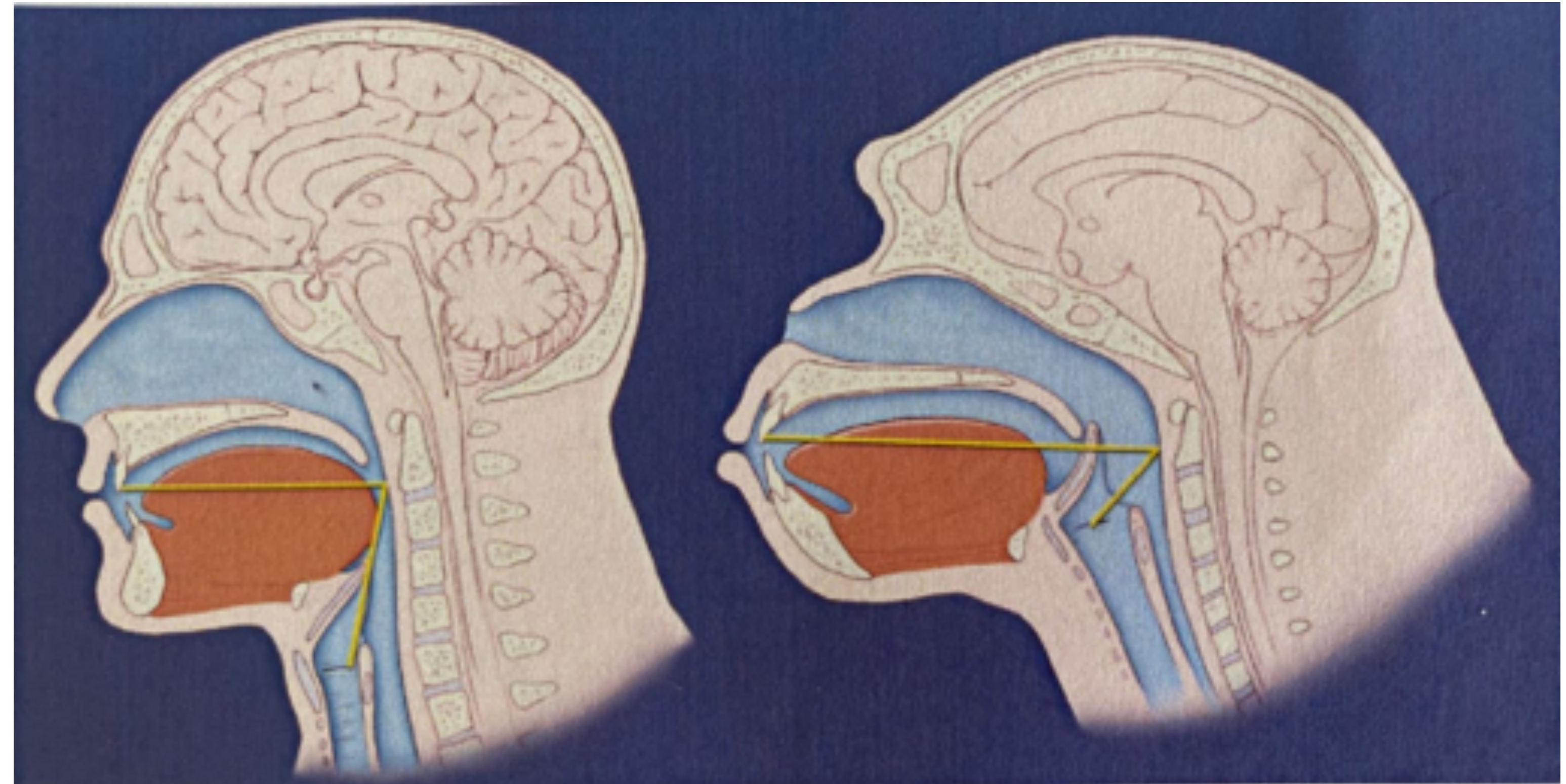
# Risk factors

1. Bone structure
2. Soft tissue



**Obstructive  
Sleep  
Apnoea**

# Risk factors





Obstructive  
Sleep  
Apnoea

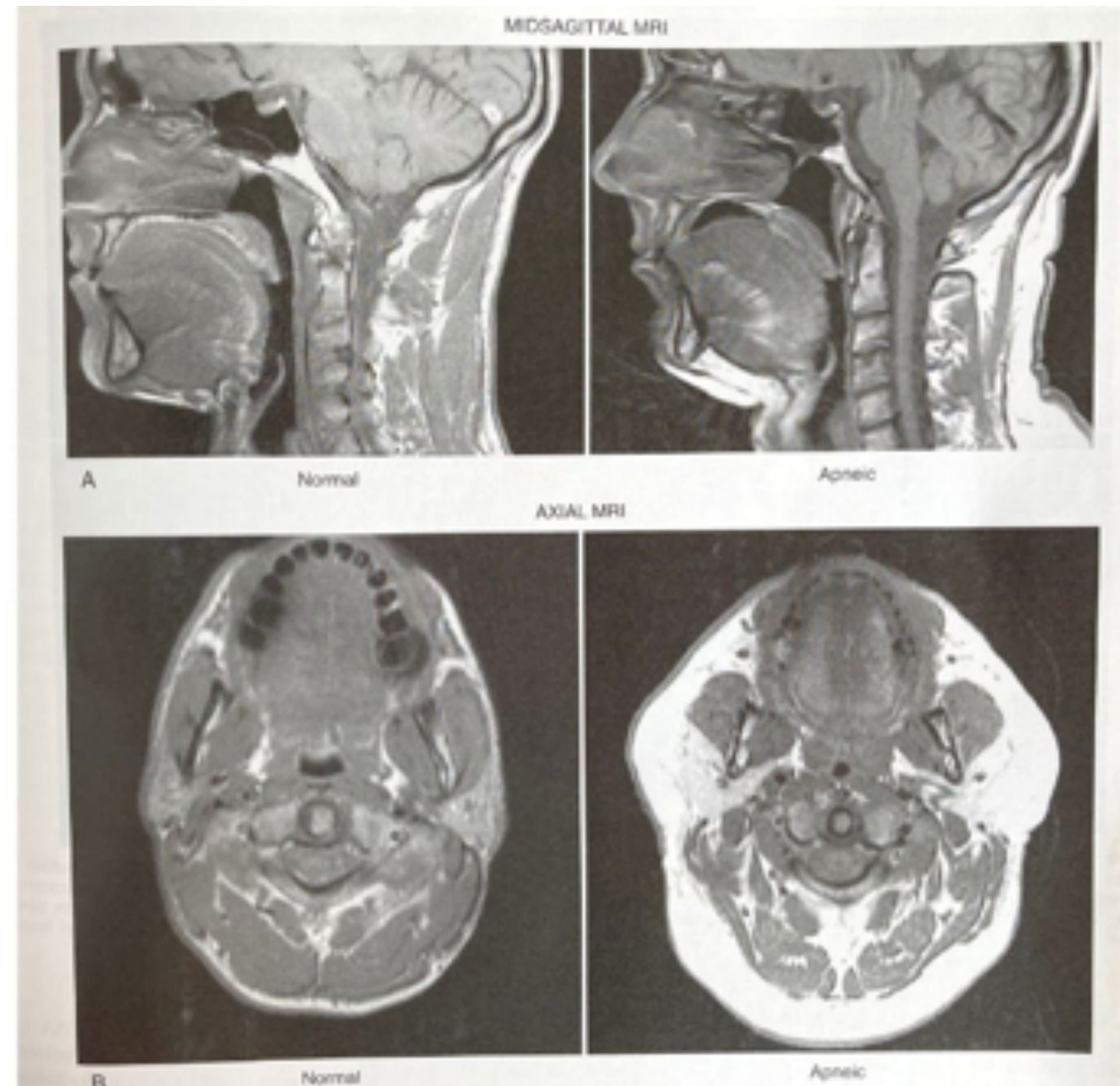
# Risk factors - bony

1. Mandible
2. Maxilla
3. Hyoid



Obstructive  
Sleep  
Apnoea

# Risk factors - bony





**Obstructive  
Sleep  
Apnoea**

# Risk factors

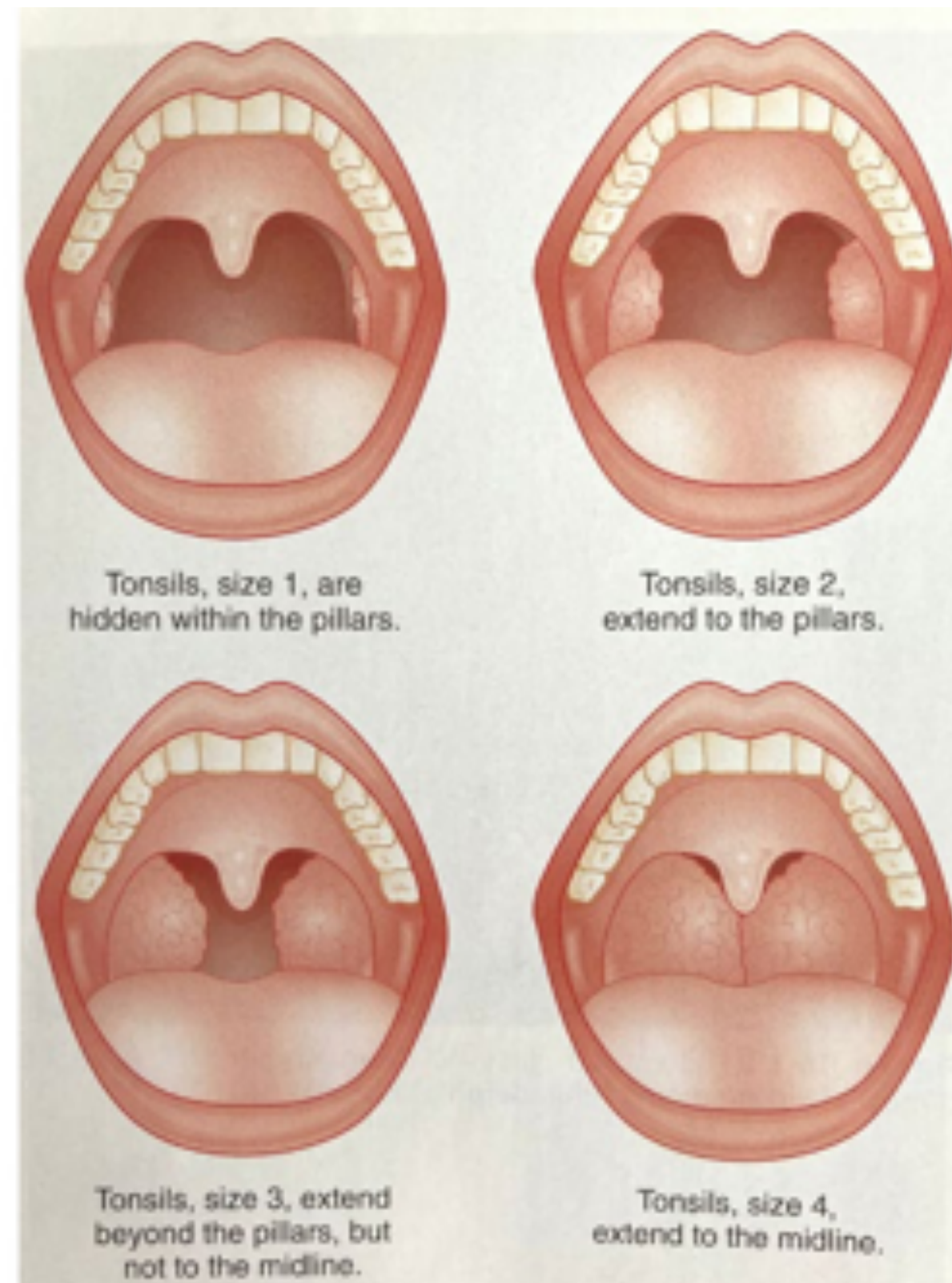




Obstructive  
Sleep  
Apnoea

# Risk factors - soft tissue

## 1. Tonsils



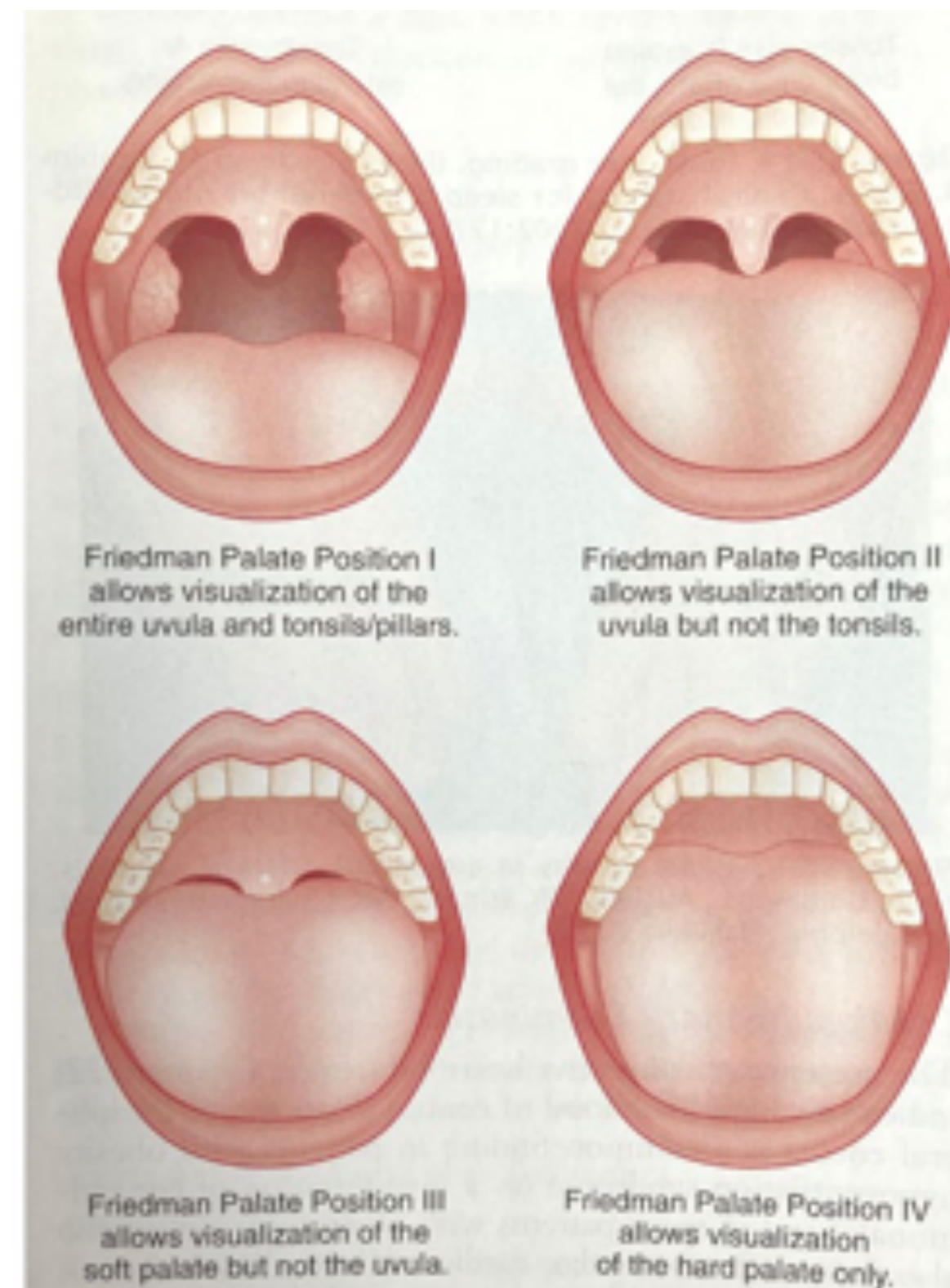




Obstructive  
Sleep  
Apnoea

# Risk factors - soft tissue

1. Tonsils
2. Pharynx (tongue) — Friedman classification





Obstructive  
Sleep  
Apnoea

# Risk factors - soft tissue

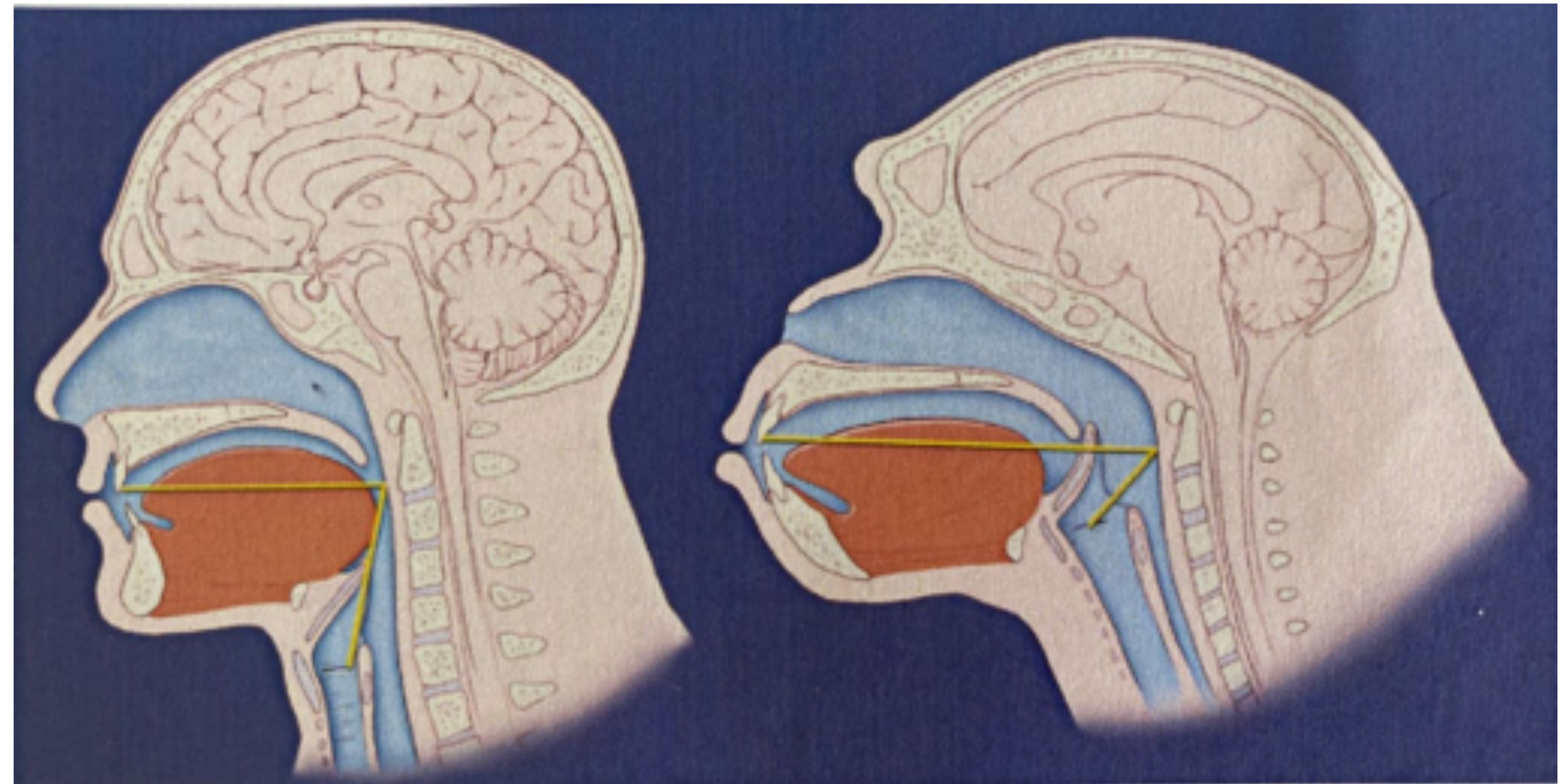
1. Tonsils
2. Pharynx (tongue) — Friedman classification
3. Palatoglossal and palatopharyngeal arches





**Obstructive  
Sleep  
Apnoea**

# Risk factors





Obstructive  
Sleep  
Apnoea

# Bruxism

Bruxism

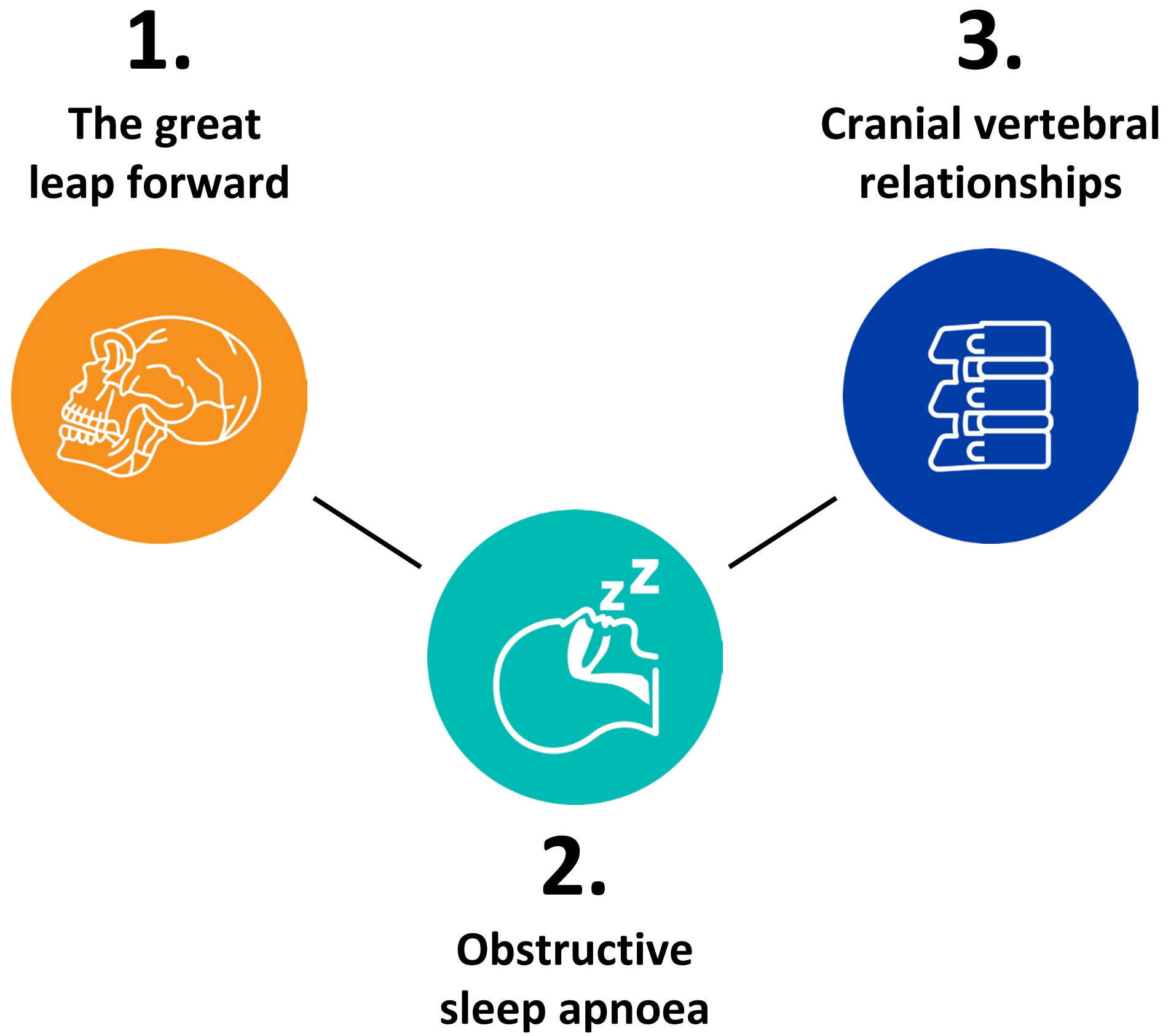
vs

Grinding

vs

Clenching

# Sleep deep dive



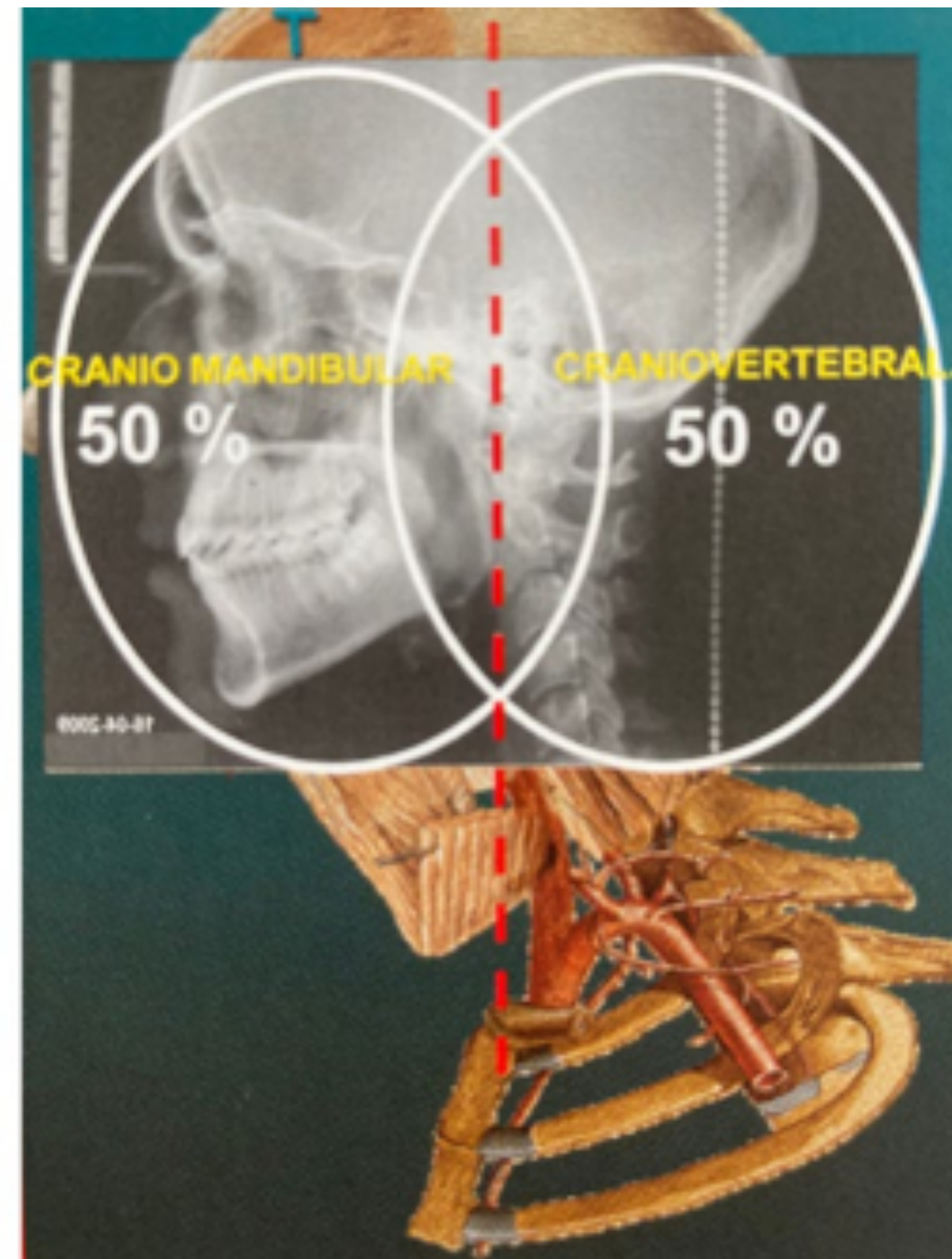






Cranial  
vertebral  
relationships

# Cranium - Anterior and posterior columns







Cranial  
vertebral  
relationships

# Hip joint - centration





Cranial  
vertebral  
relationships

# Joint centration

1. No joint compression  
max congruence - smooth
2. No soft tissue/CT tension
3. No mm activity on EMG
4. No loading



Cranial  
vertebral  
relationships

# Cranial vertebral relationships



Centration



Cranial  
vertebral  
relationships

# Cranial vertebral relationships



Centration



Relationships



Cranial  
vertebral  
relationships

# Cranial vertebral relationships



Centration



Relationships



Planar



Cranial  
vertebral  
relationships

# Cranial vertebral relationships



Centration



Relationships



Planar

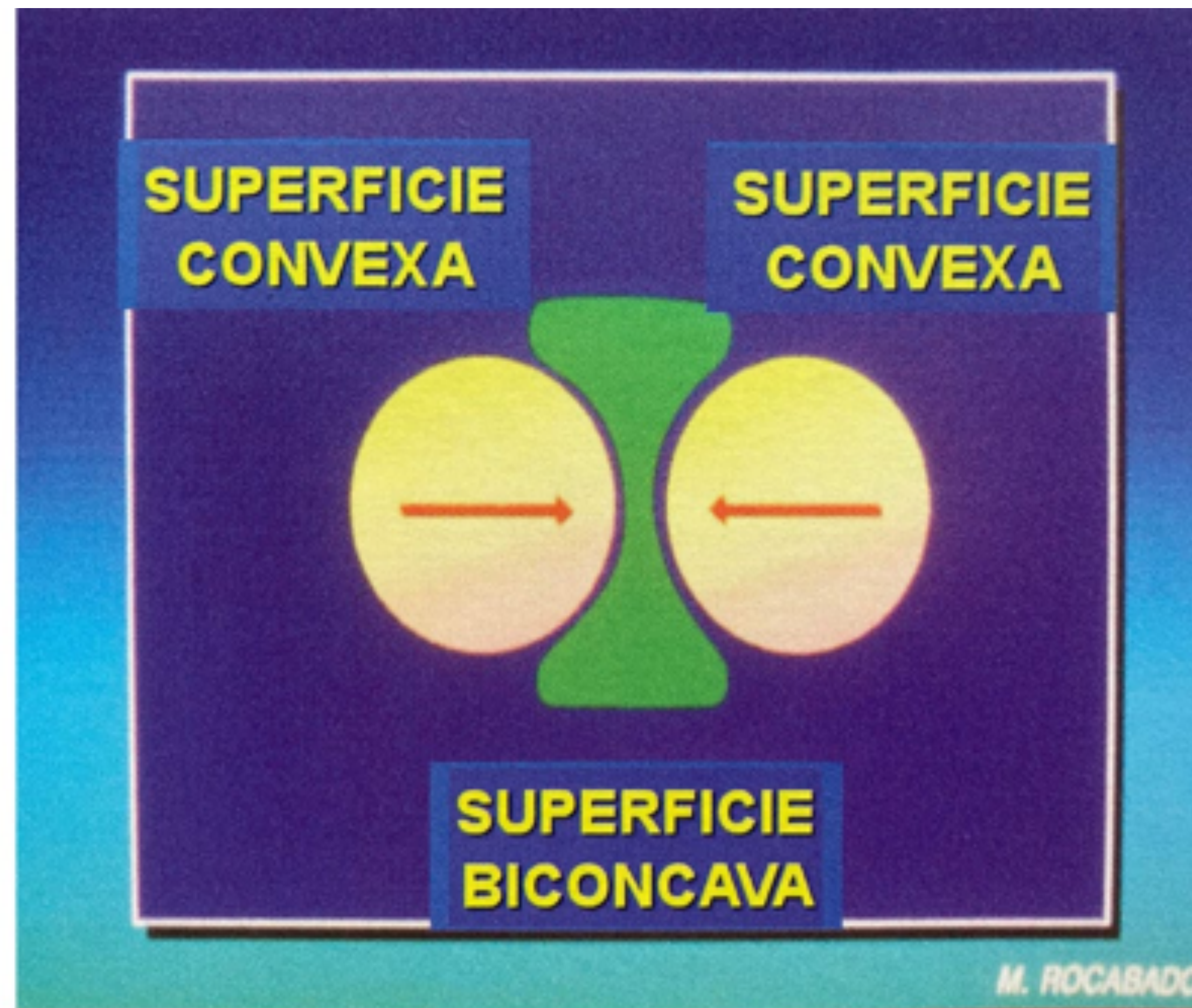


Proportions (profiles)



Cranial  
vertebral  
relationships

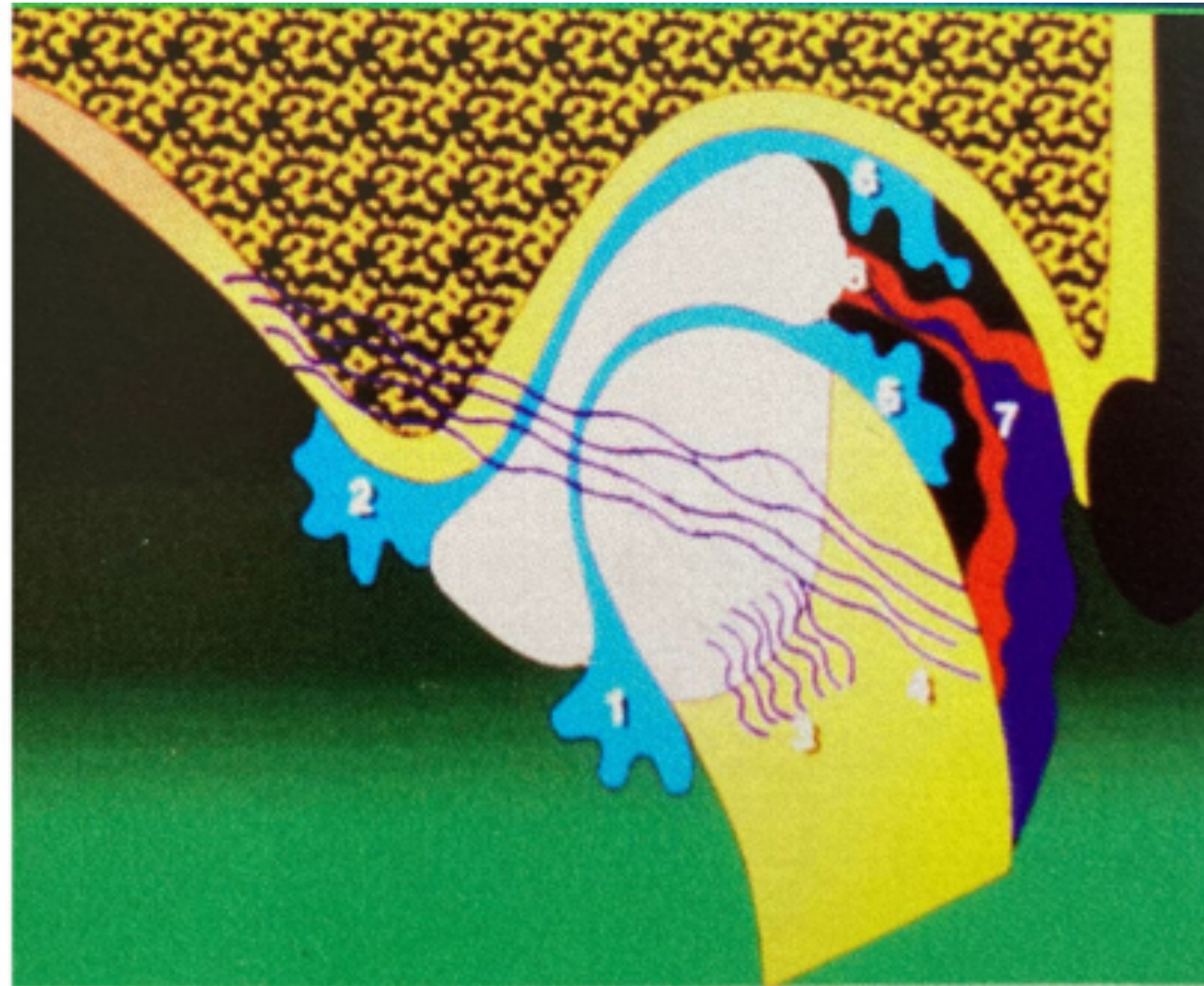
# TMJ - Biconcave disc





Cranial  
vertebral  
relationships

# TMJ anatomy







Cranial  
vertebral  
relationships

# Brain runs the show





Cranial  
vertebral  
relationships

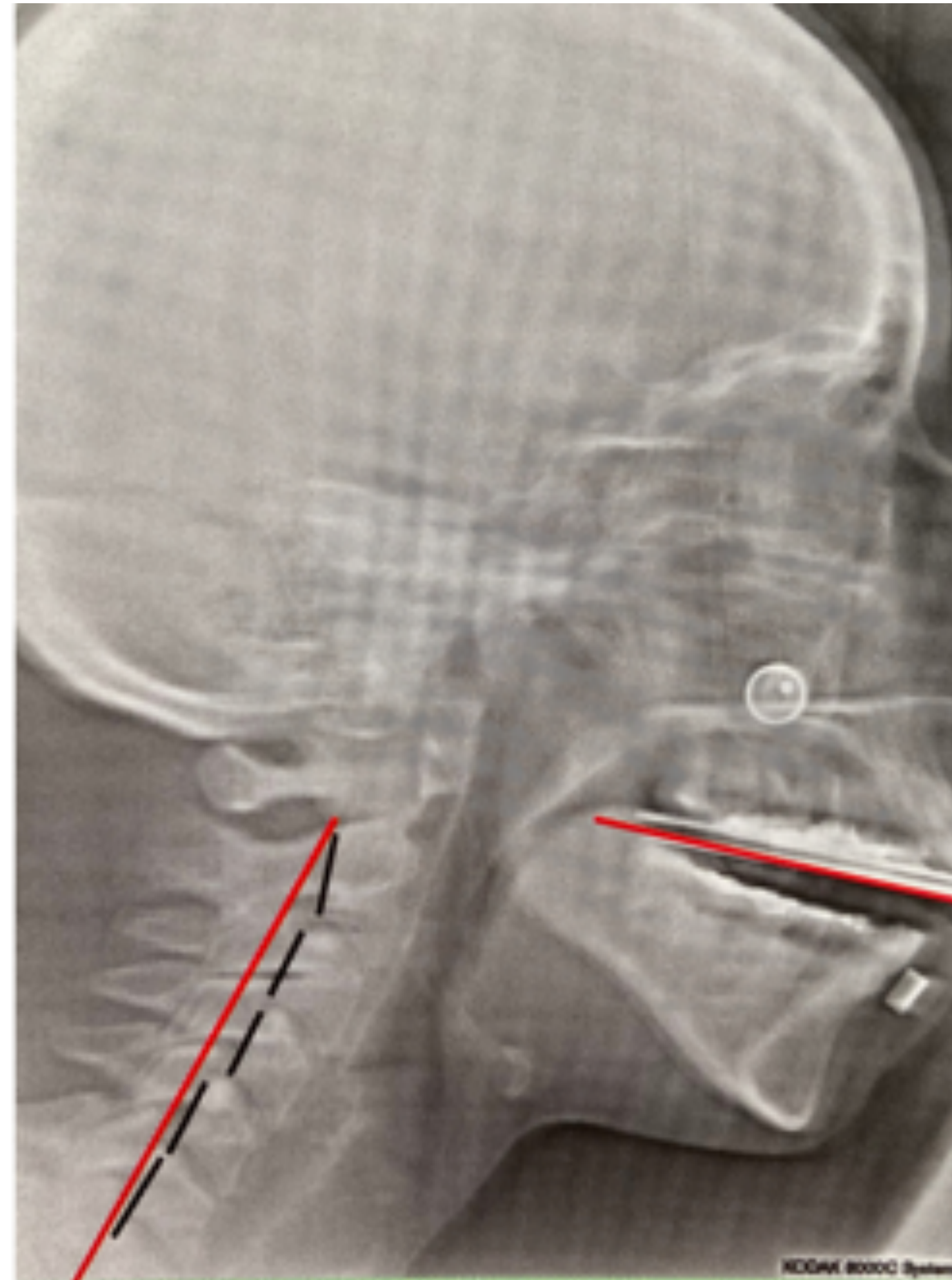
# TMJ opening





Cranial  
vertebral  
relationships

# TMJ opening





Cranial  
vertebral  
relationships

# TMJ opening





# TMJ opening

Cranial  
vertebral  
relationships





Cranial  
vertebral  
relationships

# Title?

1. Mouth breather
2. Tongue thrust
3. Open bite
4. Closed bite



Cranial  
vertebral  
relationships

# How will you know?

- TMJ ROM?
- TMJ trajectory?
- Palpate
- 2D —> 3D



Cranial  
vertebral  
relationships

# Title?

## Diagram





Cranial  
vertebral  
relationships

# Cervical spine

1. Occipital condyles - weight
2. Atlas
  - Ring
  - Lateral bodies
  - Carries head
3. Axis
  - Dens (passfier)
  - Screw down mechanism
4. C3
  - 1st disc
  - Shoulders



Cranial  
vertebral  
relationships

# Upper cervical movement

Yes

No

Perhaps





Cranial  
vertebral  
relationships

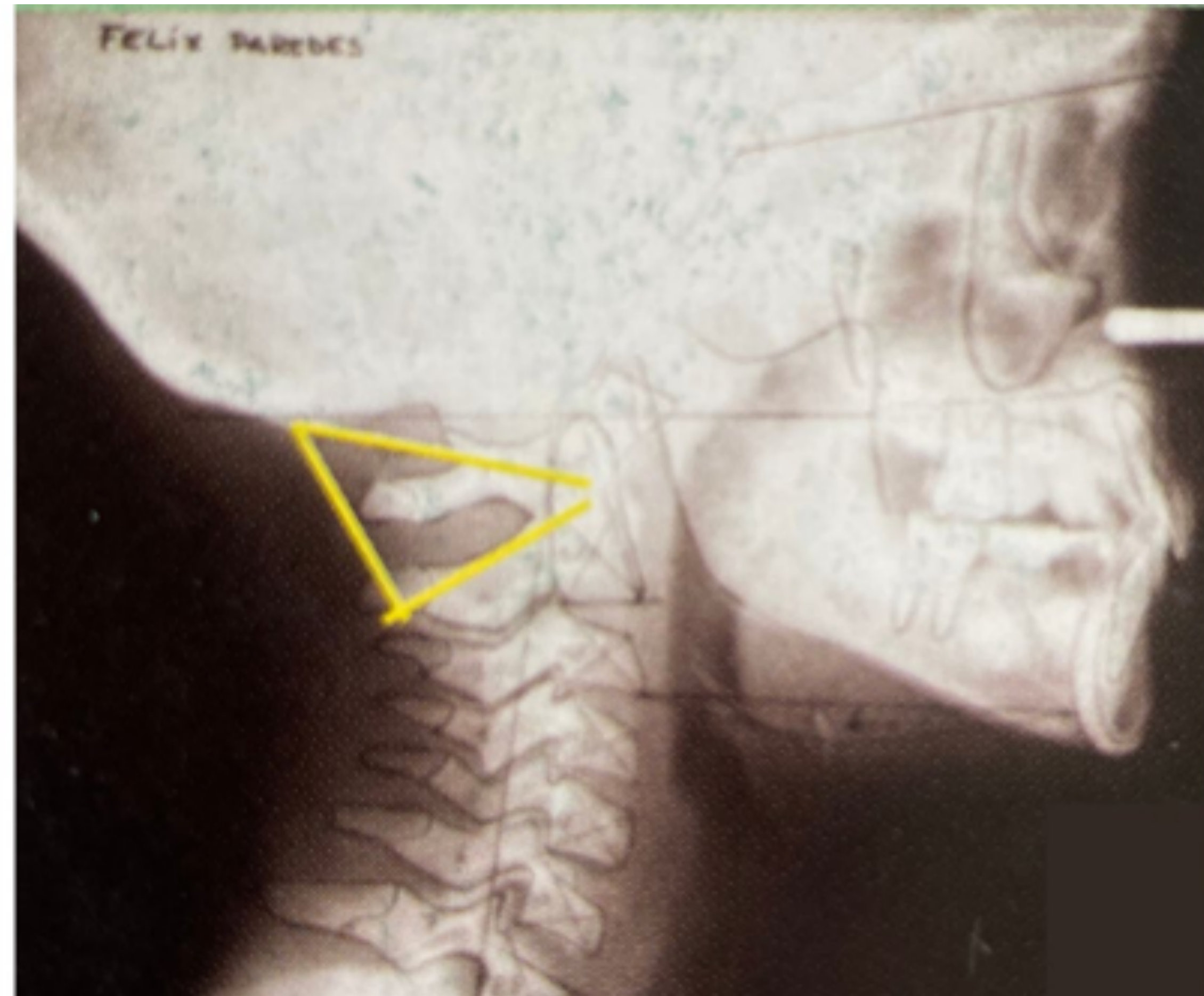
# Cervical lateral x-ray





Cranial  
vertebral  
relationships

# Suboccipital triangle

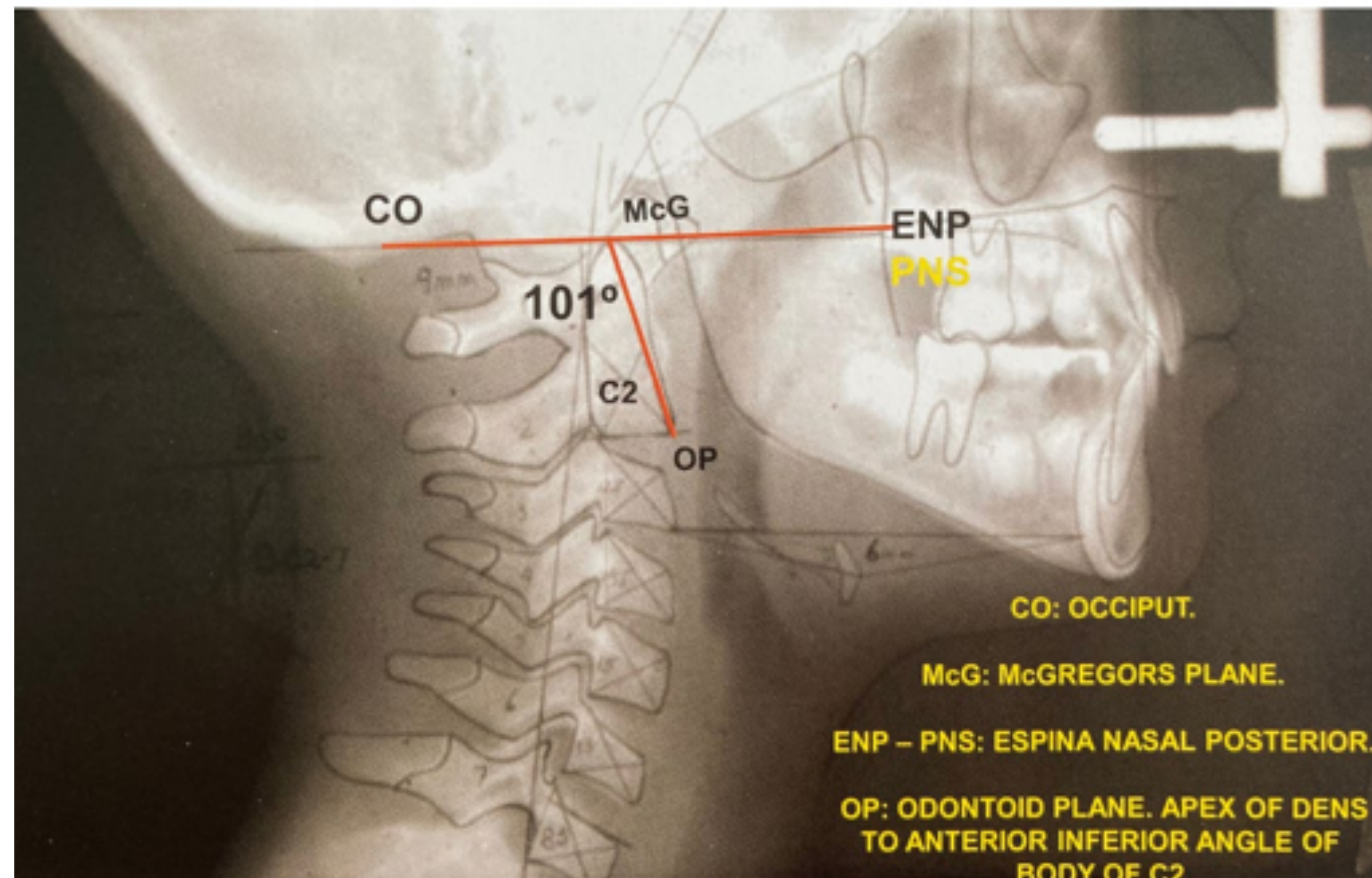




Cranial  
vertebral  
relationships

# Cranium relationships

## 1. McGregors Line (Cranium to cervical)

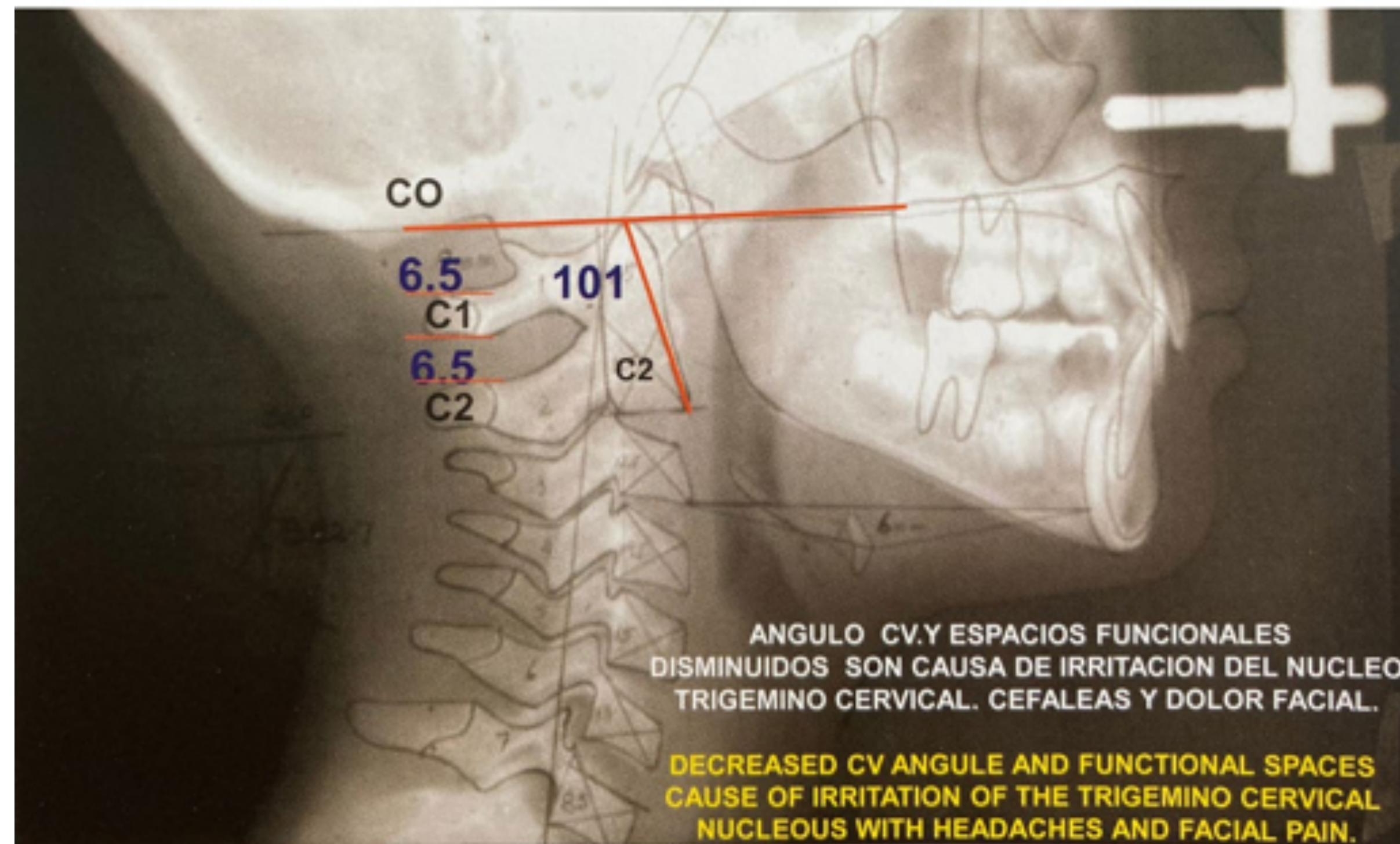




Cranial  
vertebral  
relationships

# Cranium relationships

1. McGregors Line (Cranium to cervical)
2. Functional space

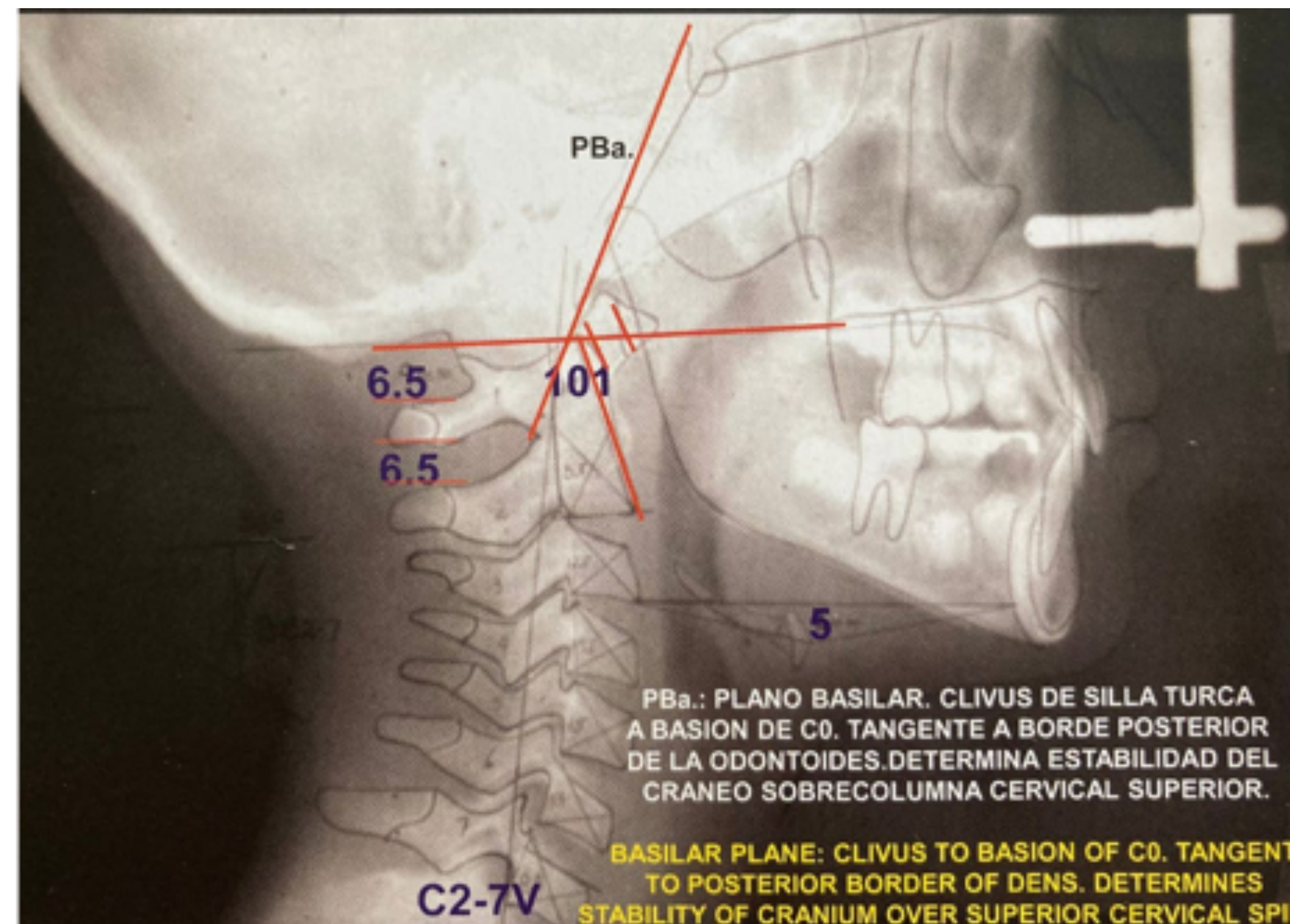




Cranial  
vertebral  
relationships

# Cranium relationships

1. McGregors Line (Cranium to cervical)
2. Functional space
3. Sphenoid line - temporal bone upright



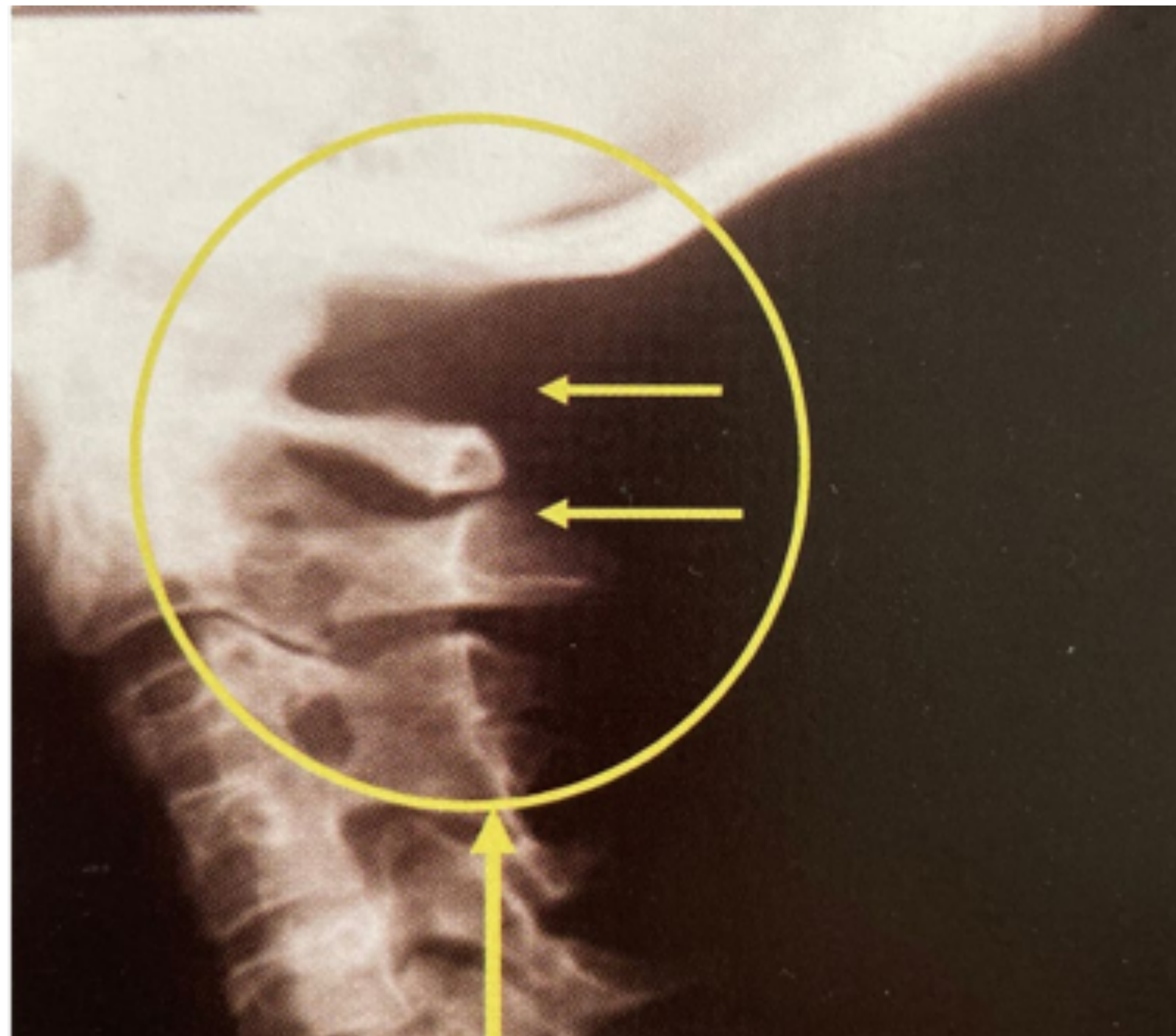




Cranial  
vertebral  
relationships

# Atlantoaxial joint

Greater occipital nerve entrapment







Cranial  
vertebral  
relationships

# 3-Dimensional

- TMJ
- Bite
- Airway
- Sleep

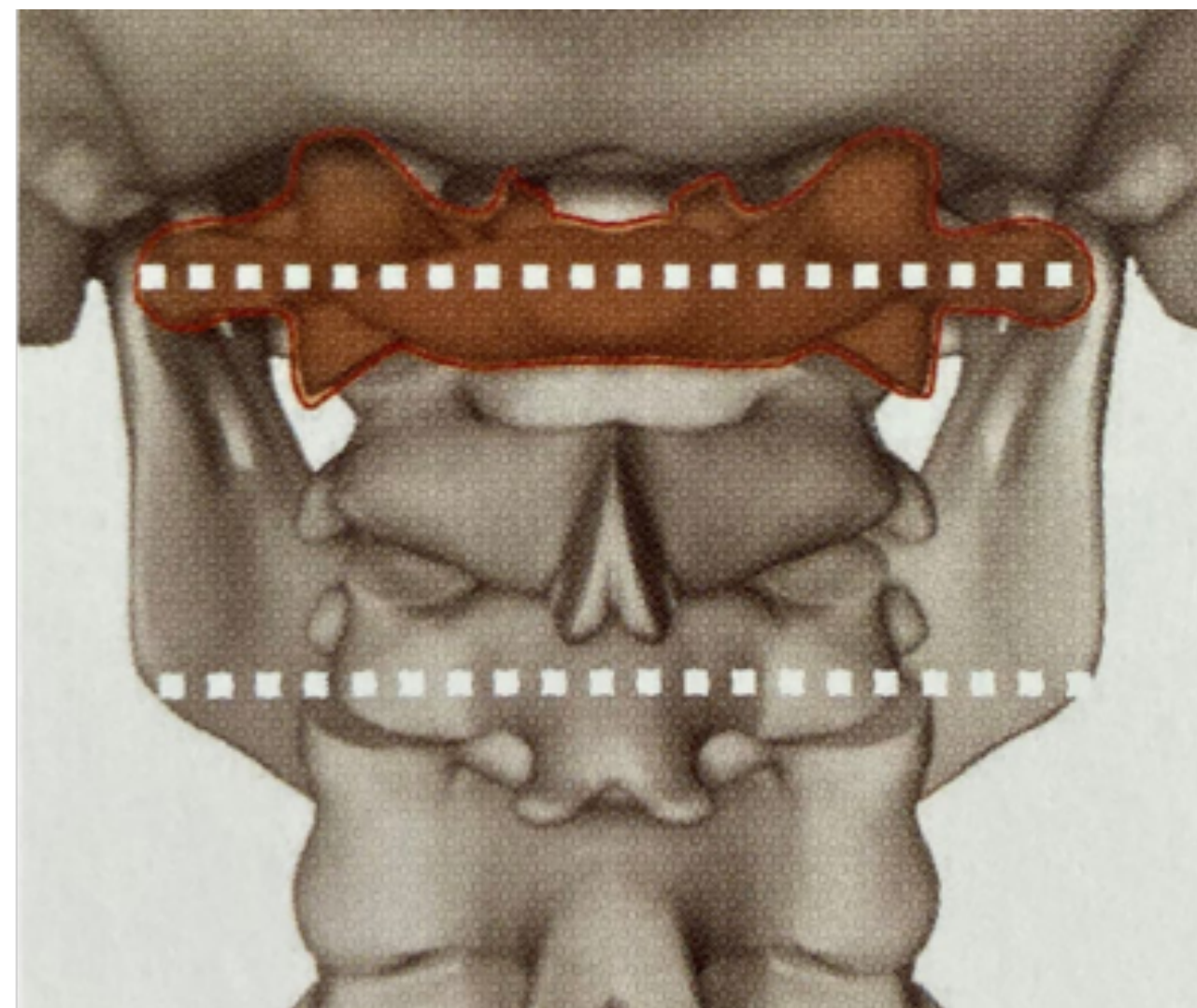


Cranial  
vertebral  
relationships

# The paradox of movement

## Coupling

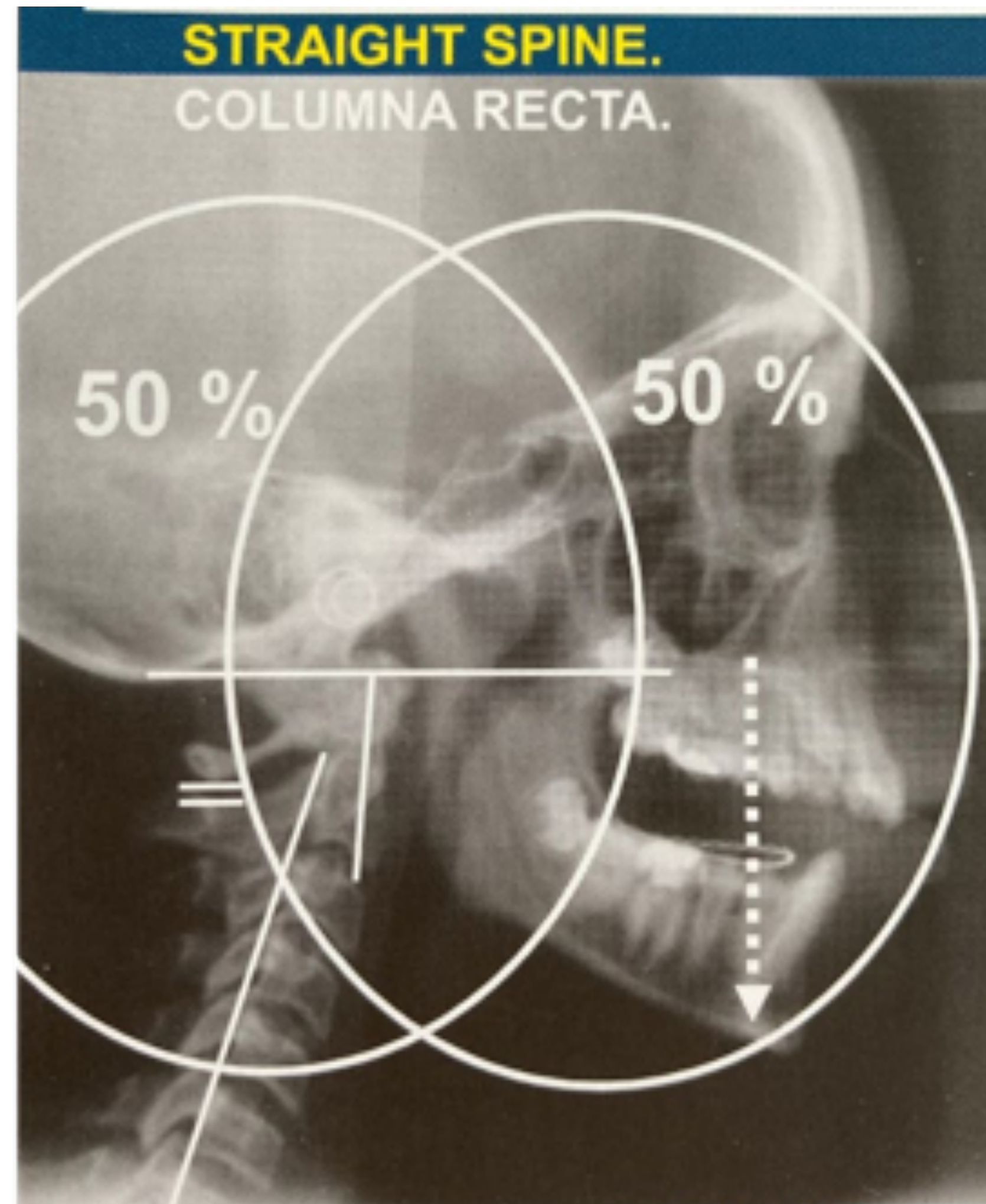
- Cranium and cervical work in **opposites**  
(cranium extend then cervical flexes)
- Mandible moves **same** direction as cervical





Cranial  
vertebral  
relationships

# Parafunction





Cranial  
vertebral  
relationships

# The story of parafunction





Cranial  
vertebral  
relationships

# Orthodontics

First cousins

Cranial vs pelvis





Cranial  
vertebral  
relationships

# Examination

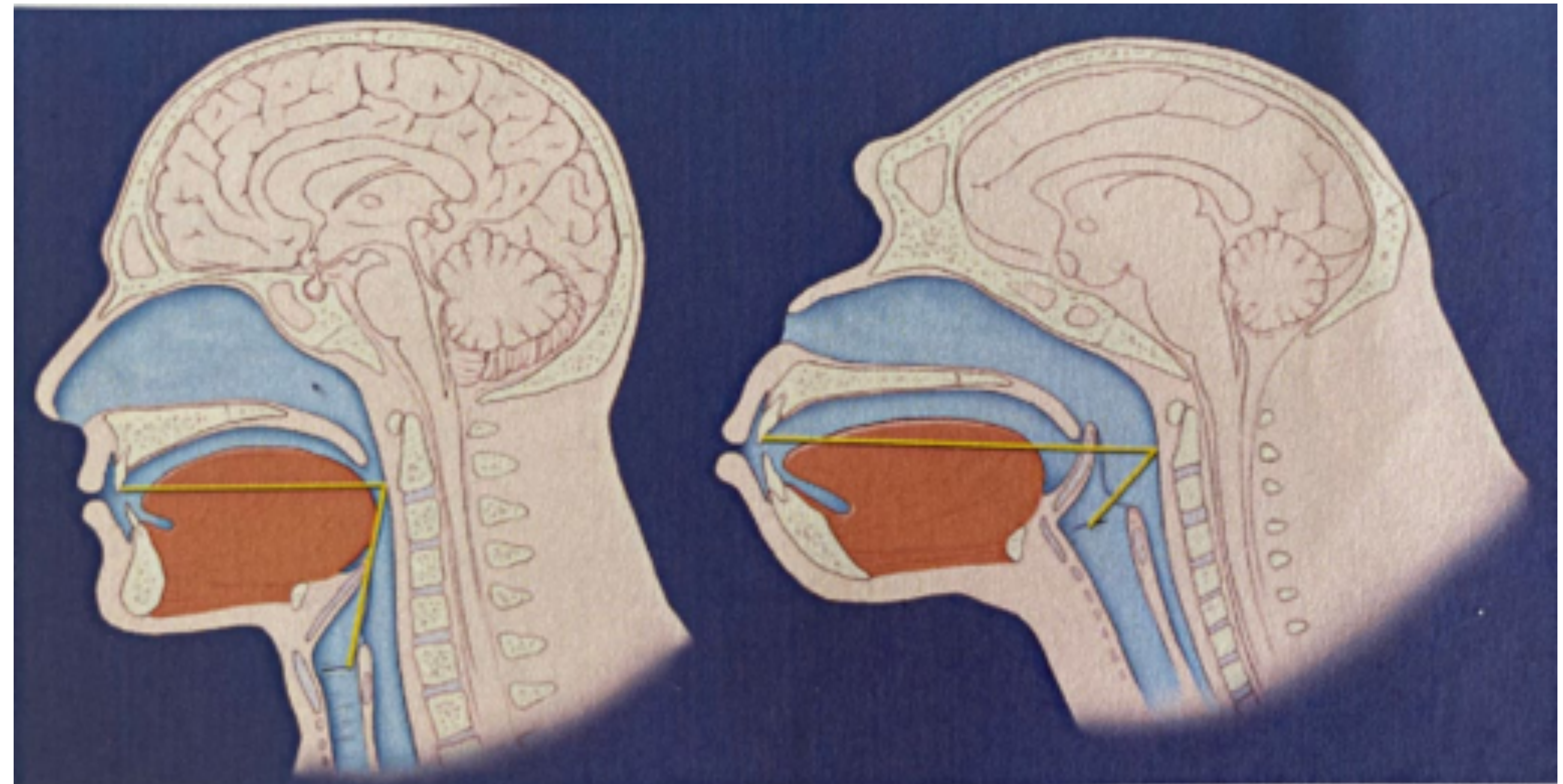
- Photos
- Nose
- Oral / tongue
- TMJ
- Swallow





Cranial  
vertebral  
relationships

# Risk factors





Cranial  
vertebral  
relationships

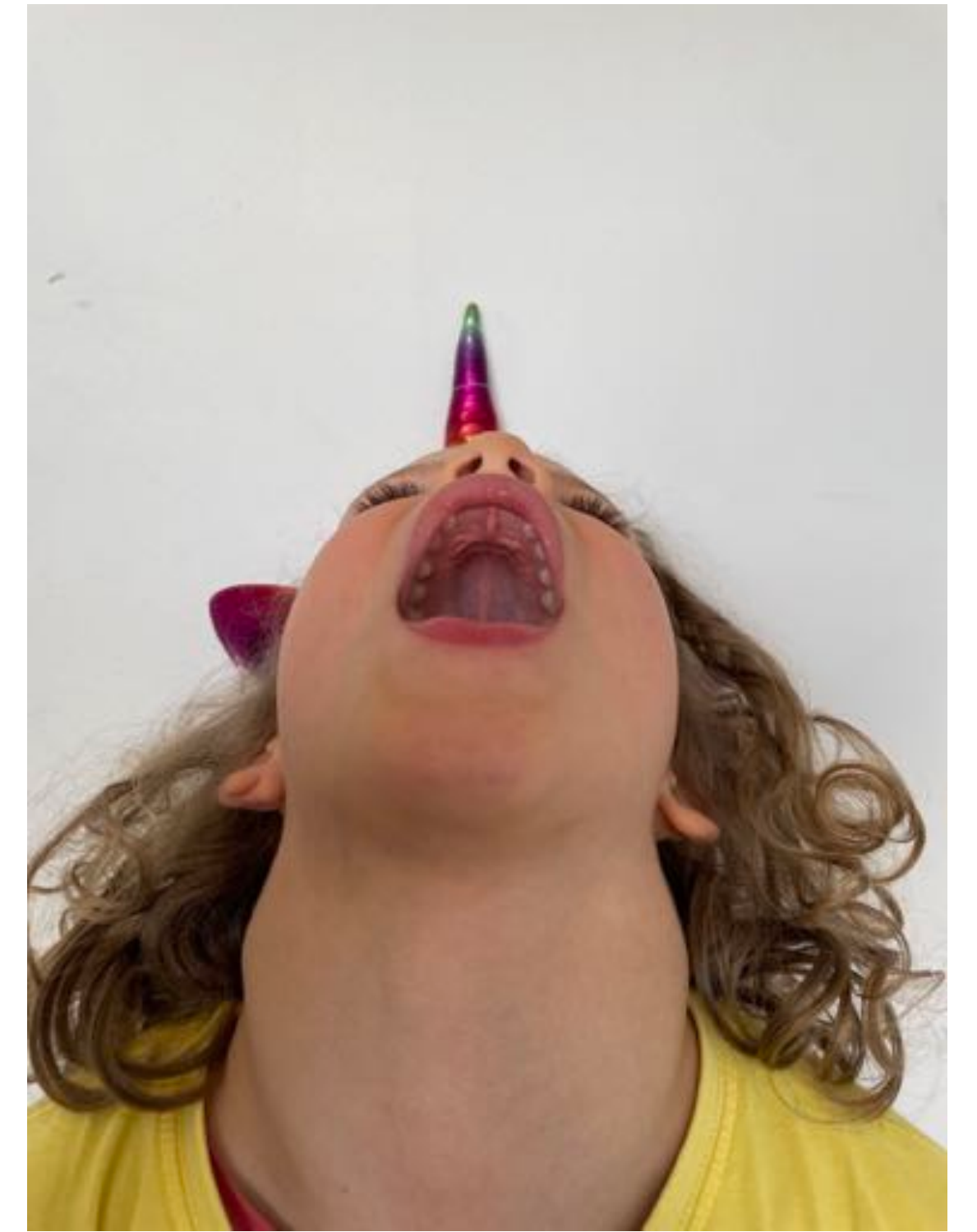
# Examination

- Photos



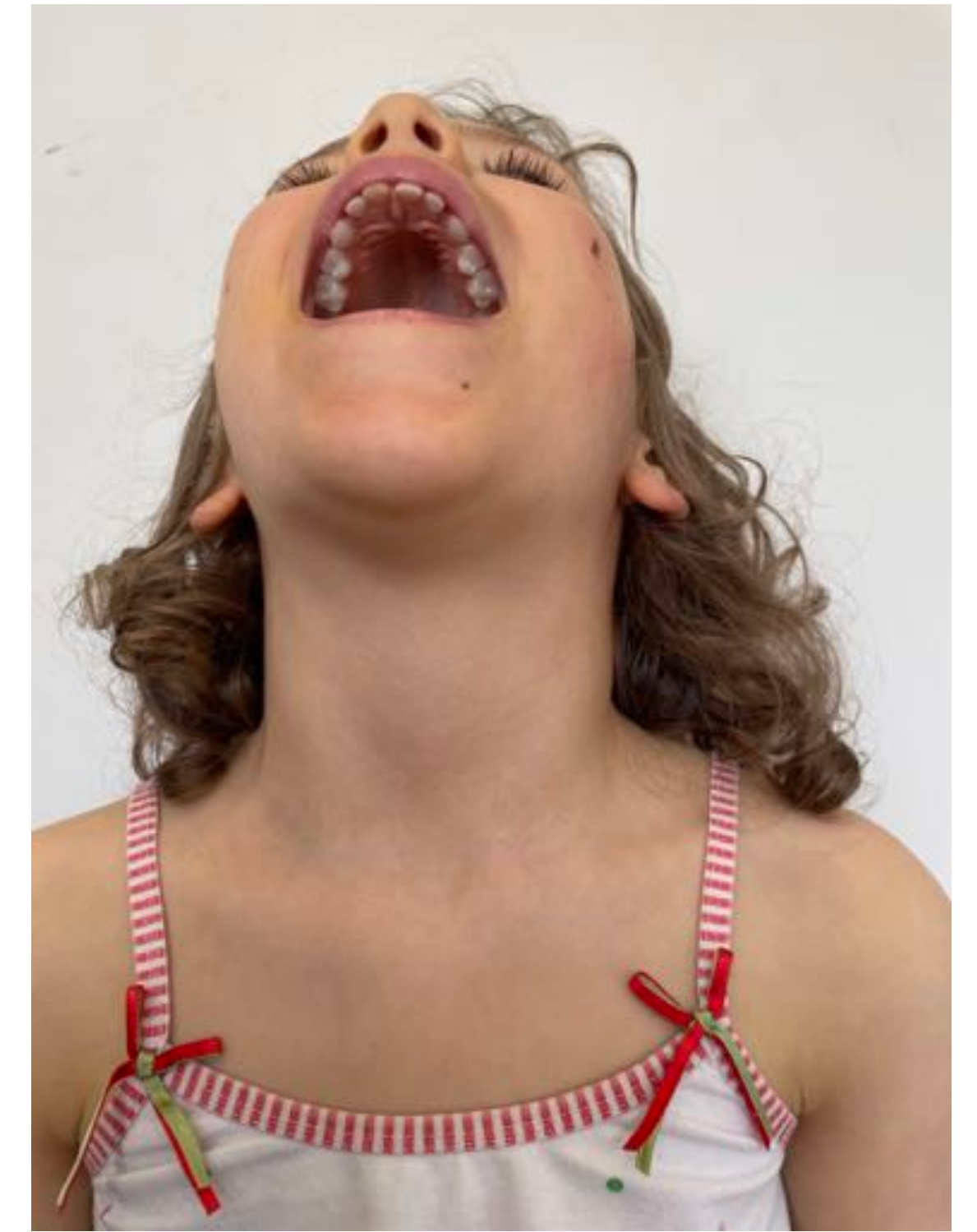


**Cranial  
vertebral  
relationships**





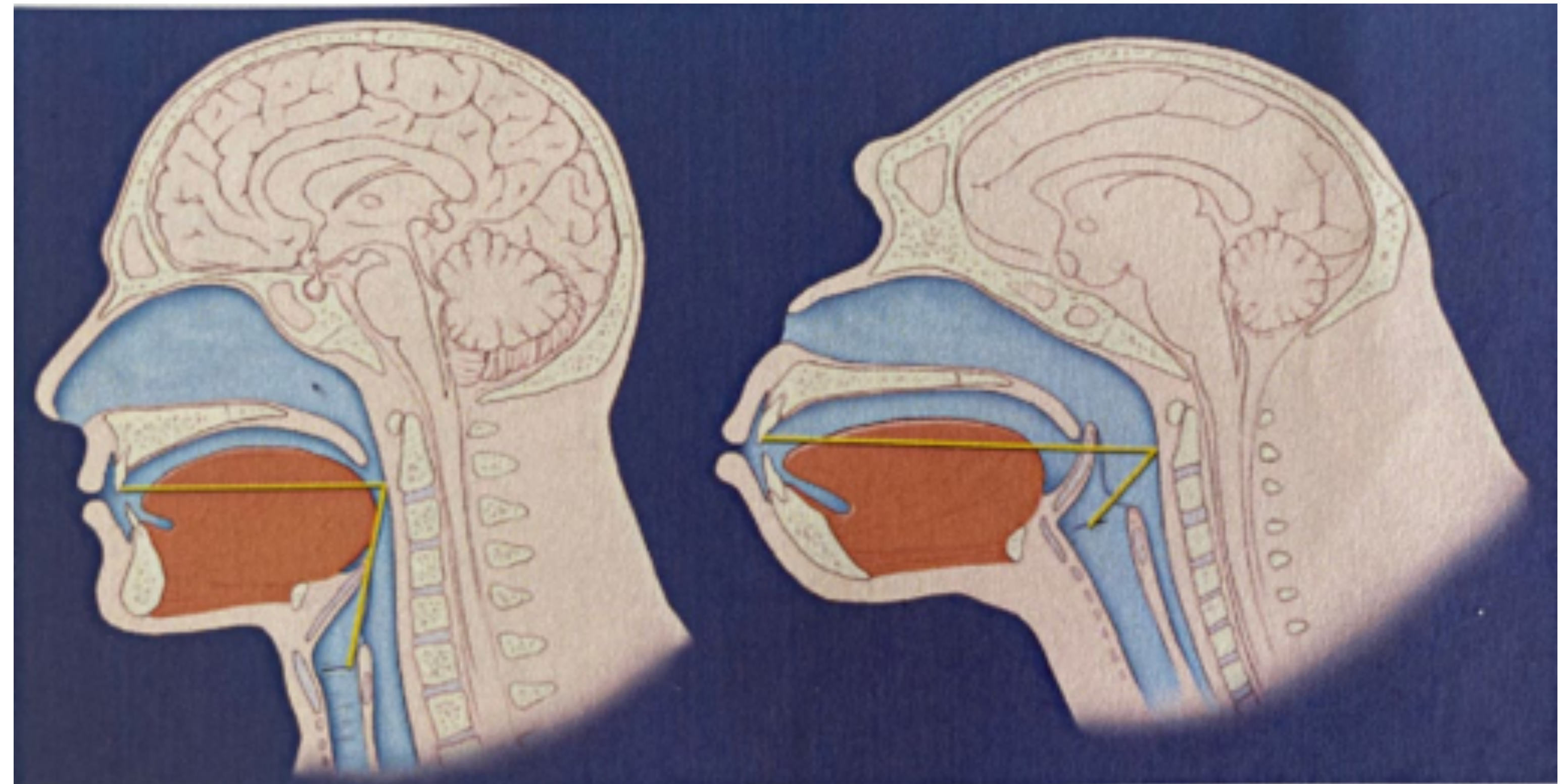
**Cranial  
vertebral  
relationships**





Cranial  
vertebral  
relationships

# Risk factors



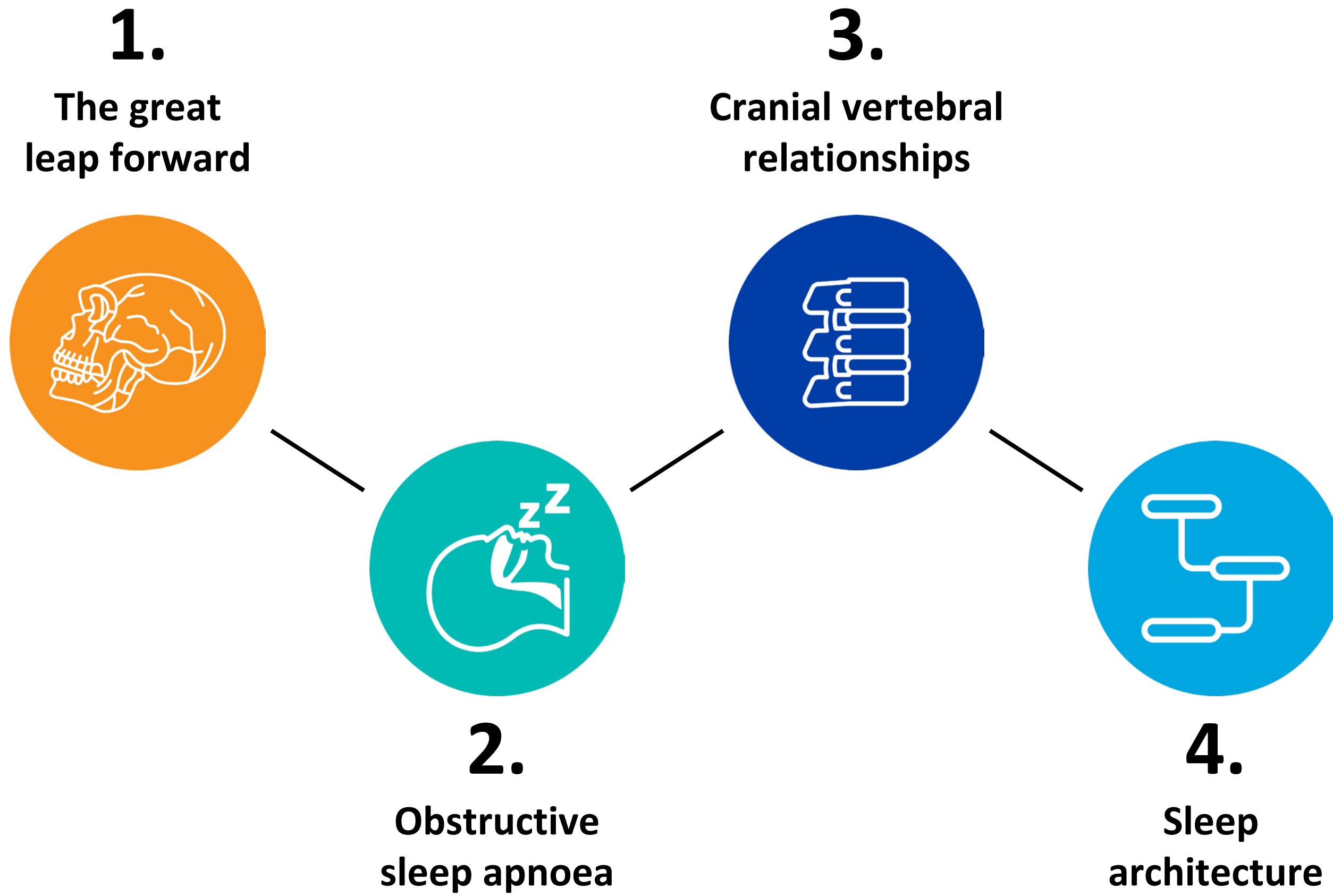


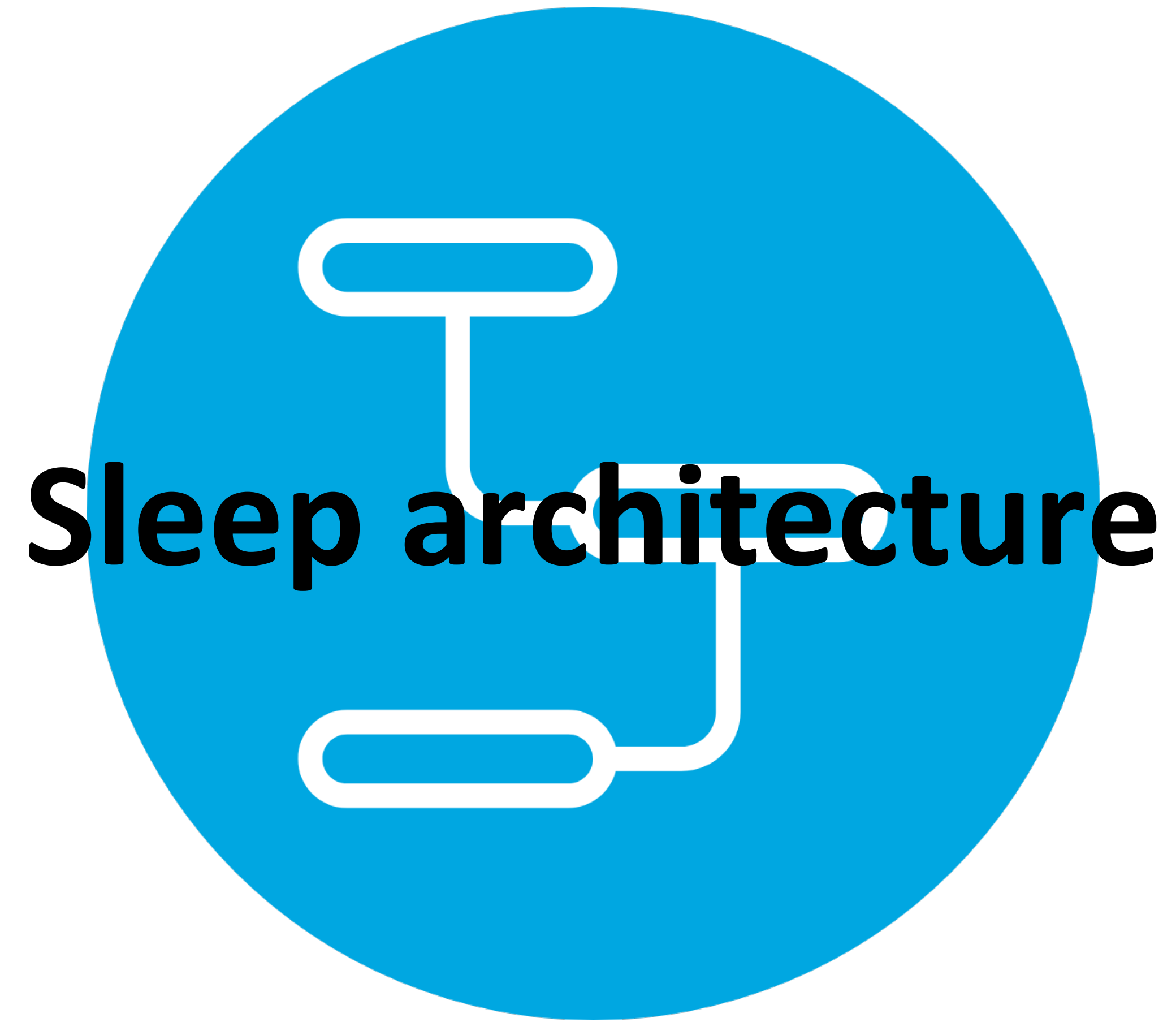
Cranial  
vertebral  
relationships

# Examination

- Photos
- Nose —> Breatheright strip
- Oral / tongue —> Mouth tape
- TMJ —> Aqualiser + “69”
- Swallow

# Sleep deep dive



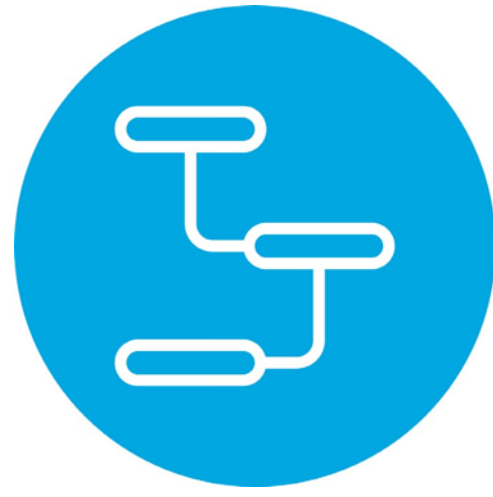






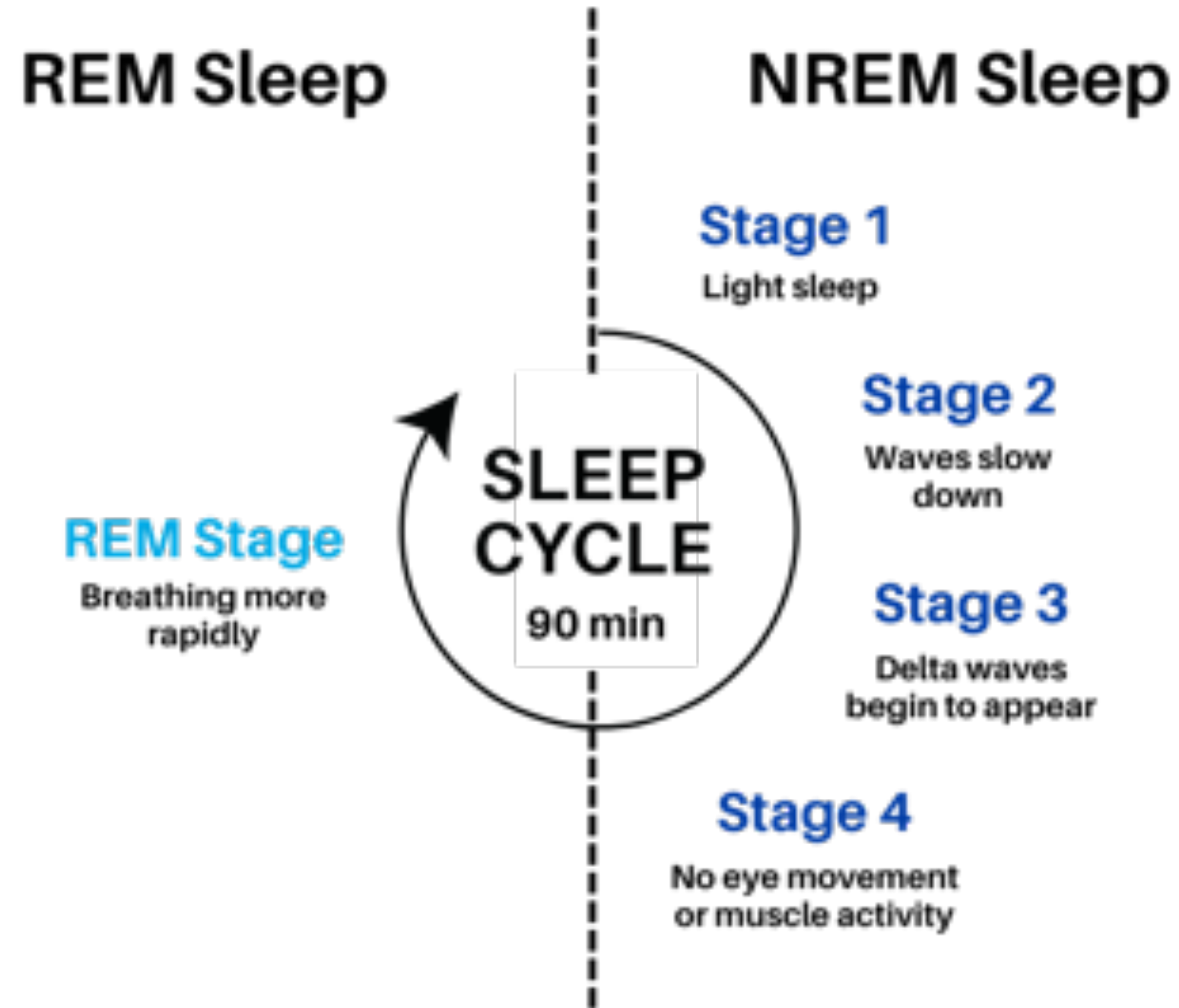
Cerebral war

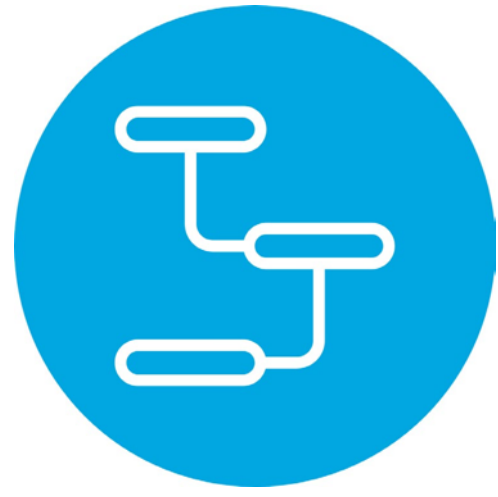




Sleep  
architecture

# The sleep cycle

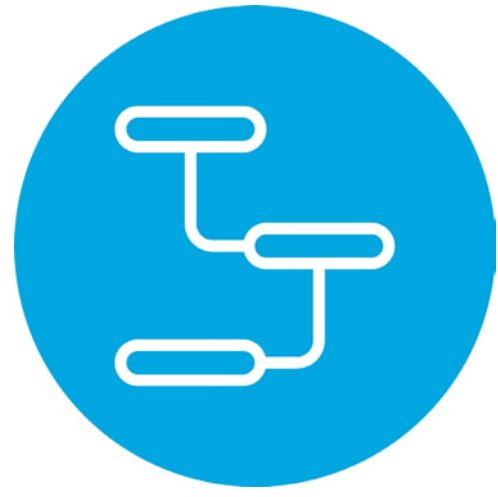




Sleep  
architecture

# Decrease REM

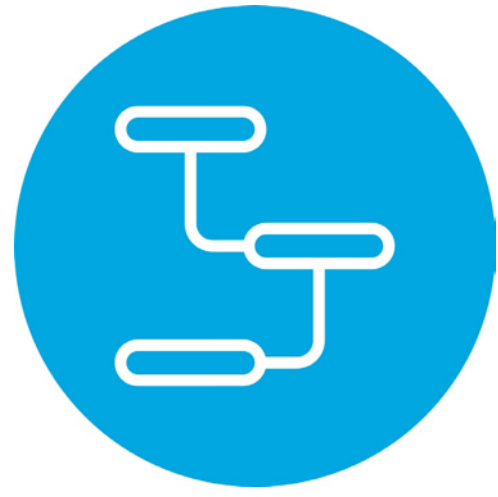
- Cut sleep short
- 6 hours sleep
  - = 25% total sleep
  - = 75% of REM
- Dopaminergic pathways (reward)



Sleep  
architecture

# REM - dream sleep

- Breathing rate is variable
- No muscle tone (> risk of collapsibility)
- Poor response to low blood gasses
- Pain states cause arousal
- Emotional wellbeing
  - anxiety
  - depression



Sleep  
architecture

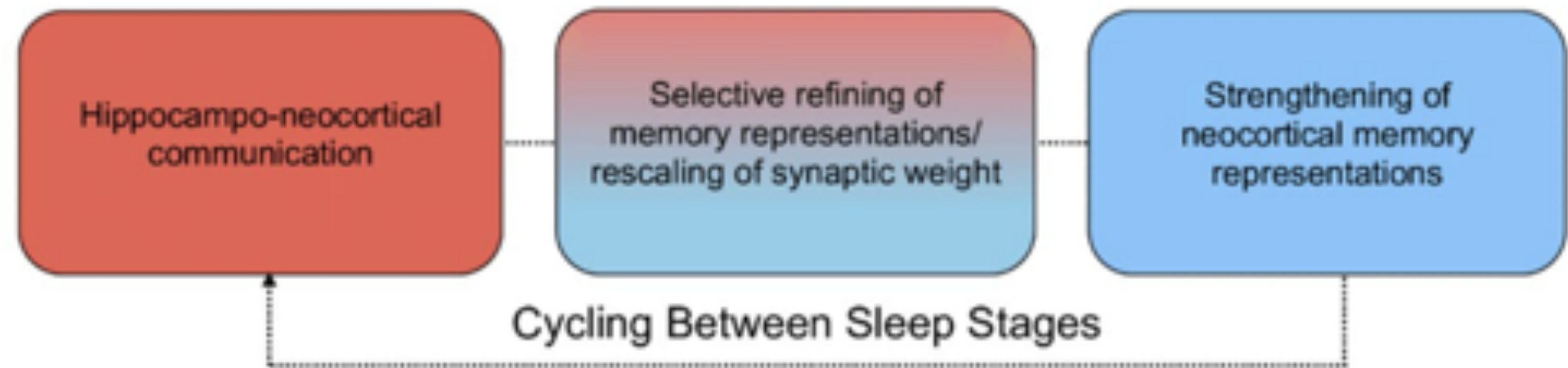
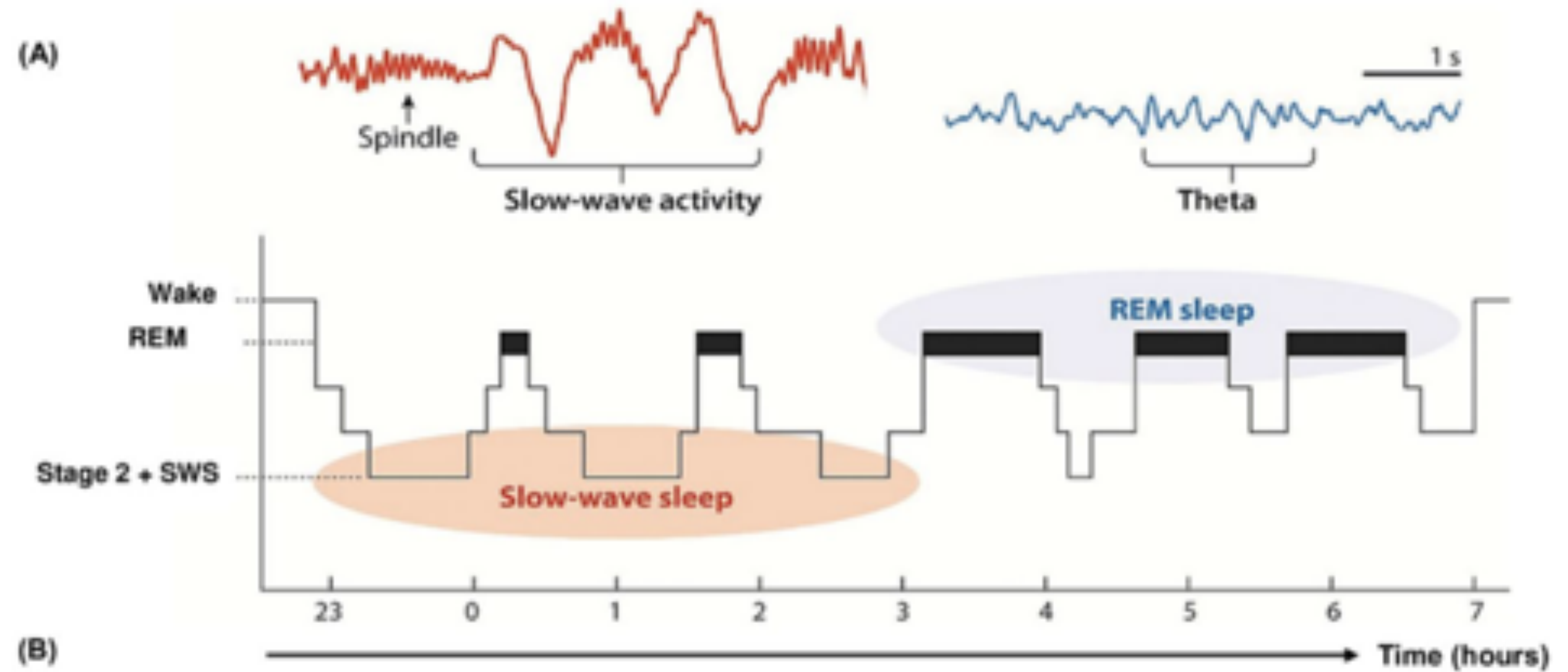
# NREM - deep sleep

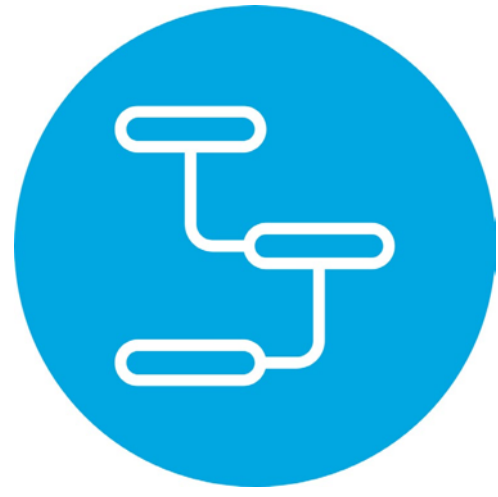
- Safest
- Stable
- Less apnea
- Lowest heart rate



Sleep architecture

# NREM vs REM



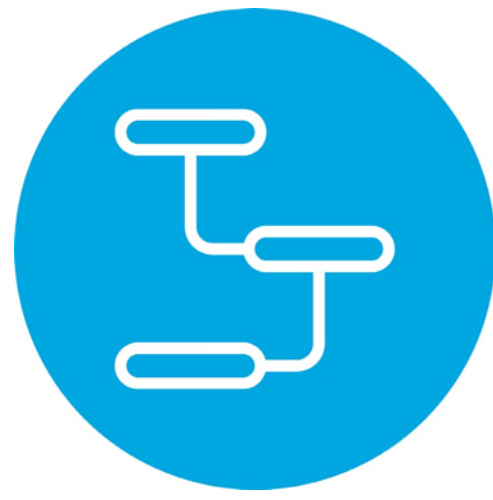


Sleep  
architecture

# Macro Architecture

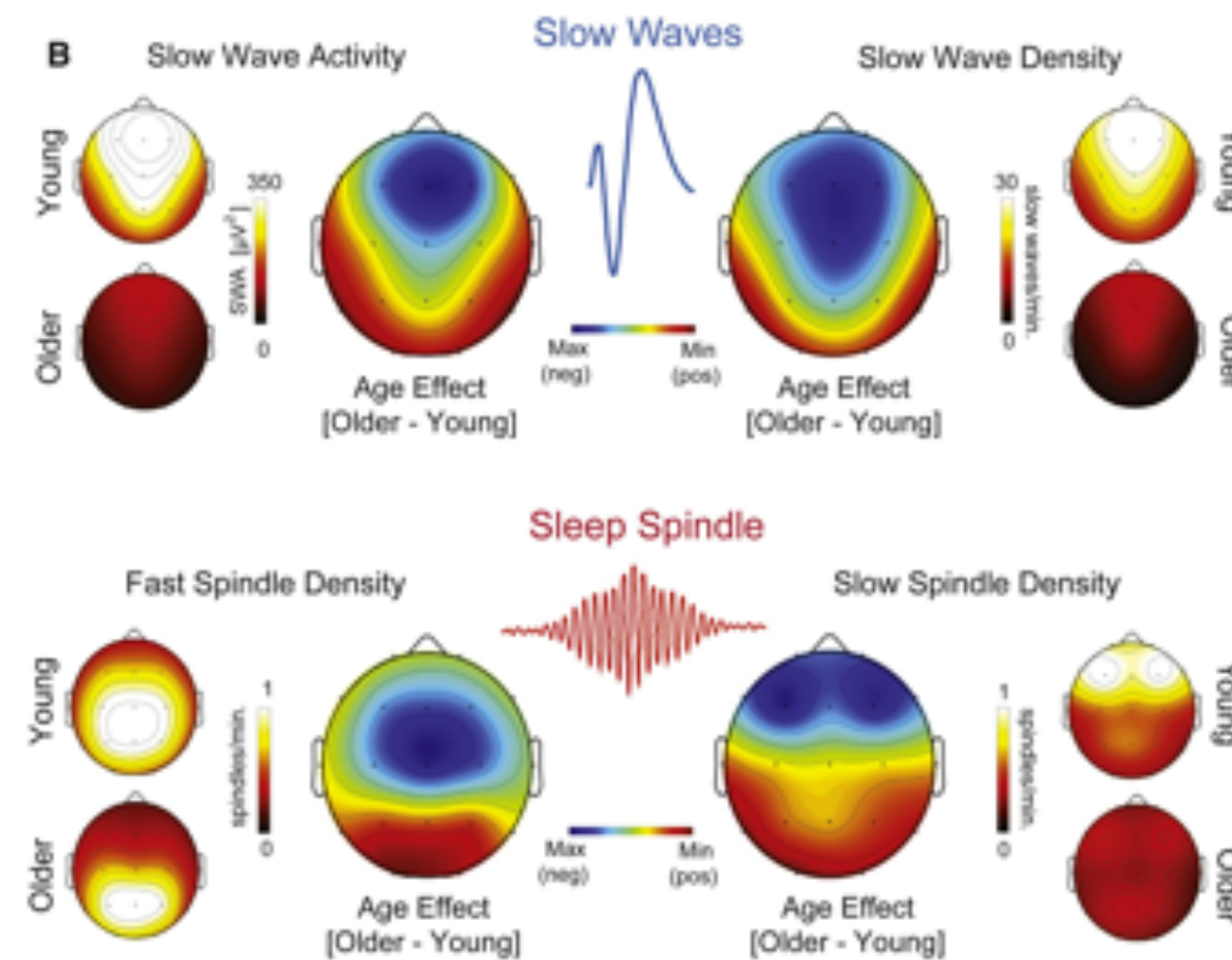
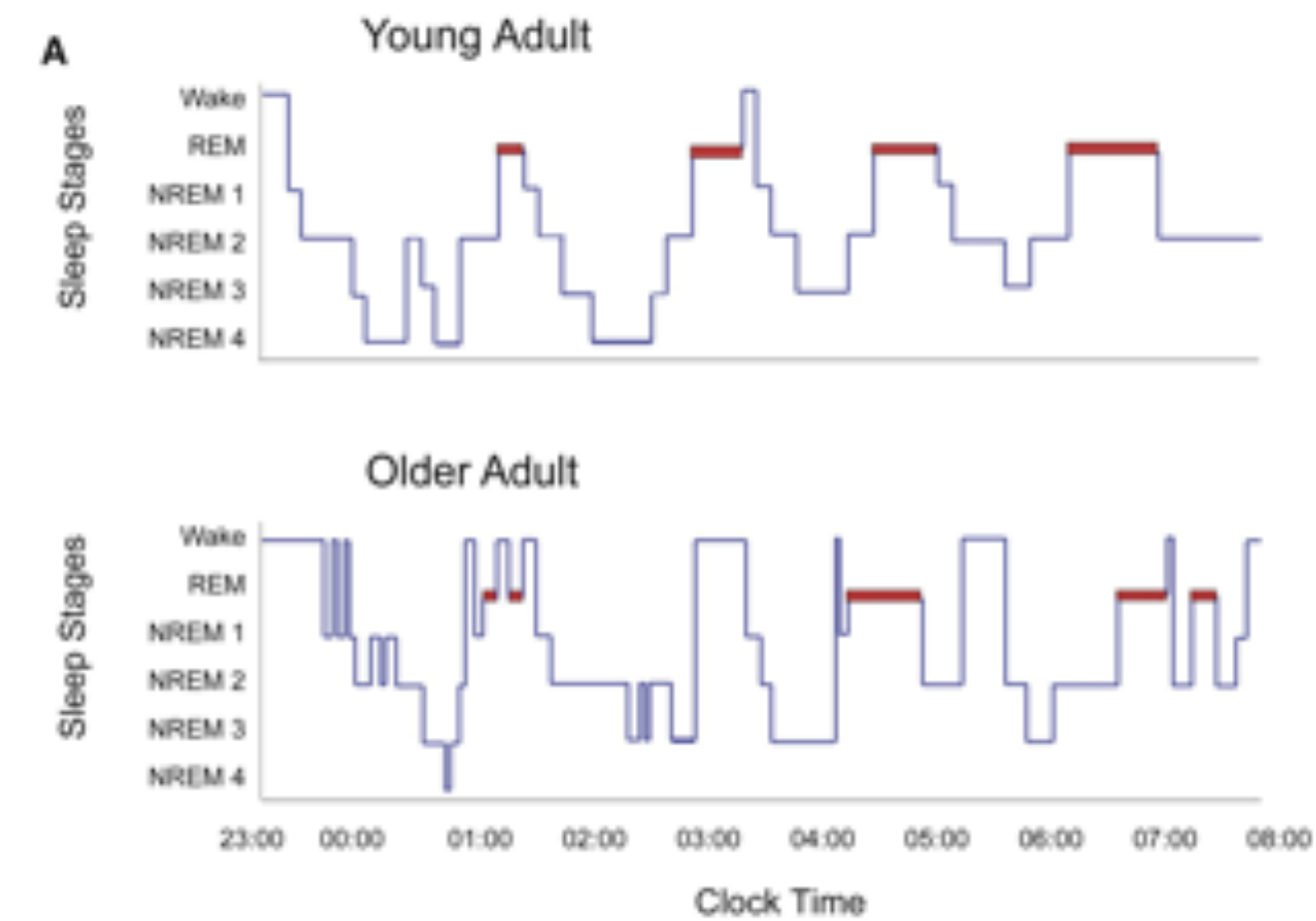
- 20 min to fall asleep
- Sleep time 7.5 hours
- Sleep cycle 90 min
- NREM 75% (50% light, 25% deep)
- Babies
  - lots of sleep cycles
  - lots of REM
- GERD, Gastro Esophageal Reflux Disease

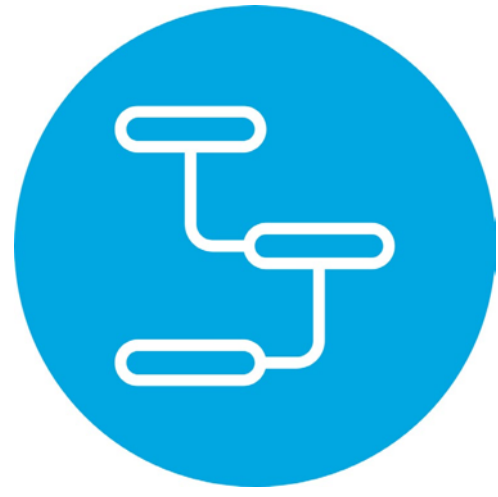




## Sleep architecture

# Sleep hypnogram and age

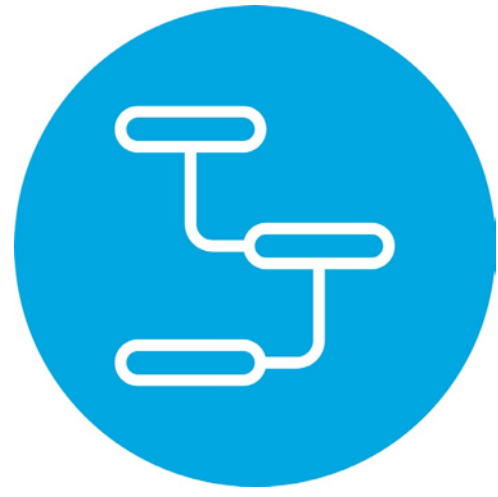




Sleep  
architecture

# Micro Architecture

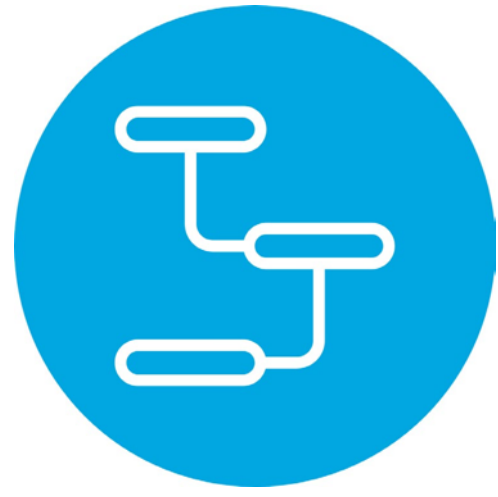
- Arousal and movement
  - Kick sheets
- Sleep position
  - Back vs side



Sleep  
architecture

# Alcohol and medication

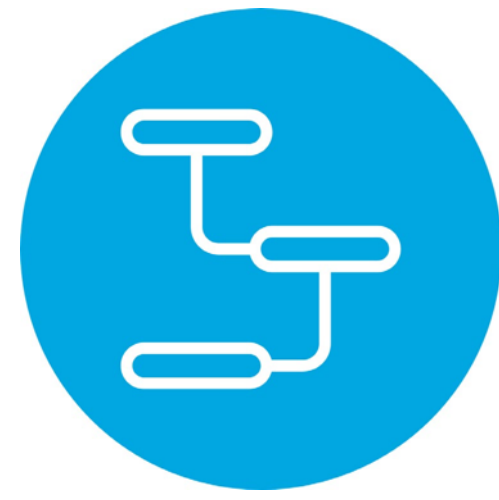
- Antidepressants decrease REM
- Pain meds/stimulants/coffee decrease REM
- Sleep medication
- Kids on stimulants
  - > sleep fragmentation
  - > latency
  - < length
  - wake up early



Sleep  
architecture

# Sleep studies

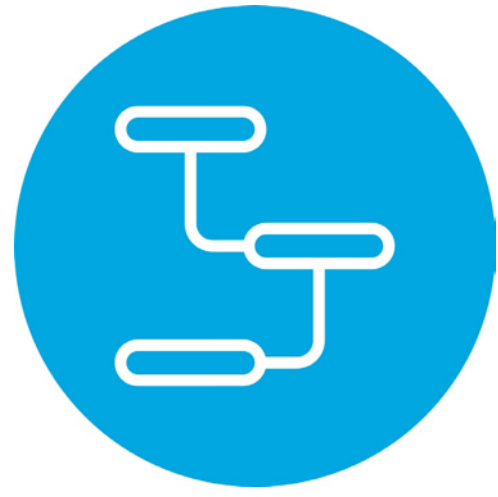
- Apnoea and hypo-apnoea events
- Measure of disturbance
- Hypoxia / arousal / fragmentation
- One figure vs whole story



Sleep  
architecture

# Respiratory event

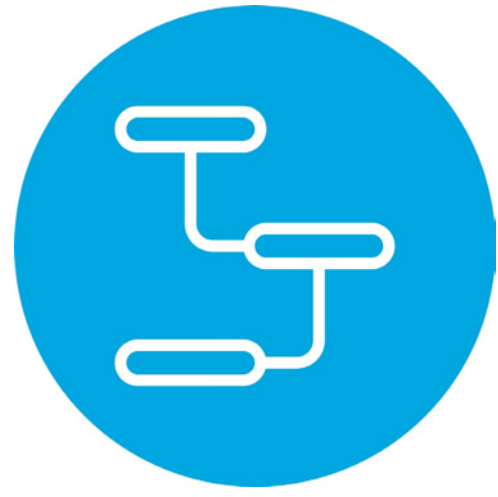




Sleep  
architecture

# What is a PSG

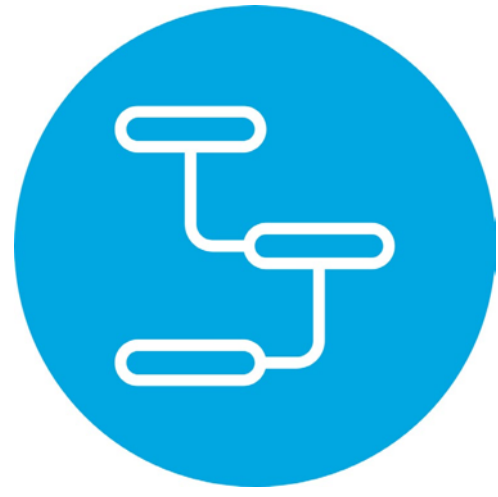
- PolySomnography Graph
- Measures:
  - Sleep medication
  - Eye movements
  - EMG - arousals
  - EEG - brain activity / sleep stages
  - ECG - heart rate / systolic PoP predictor
  - O2 saturation
  - Thoracic effort



Sleep  
architecture

# What is a PSG

- Photo of PSG textbook

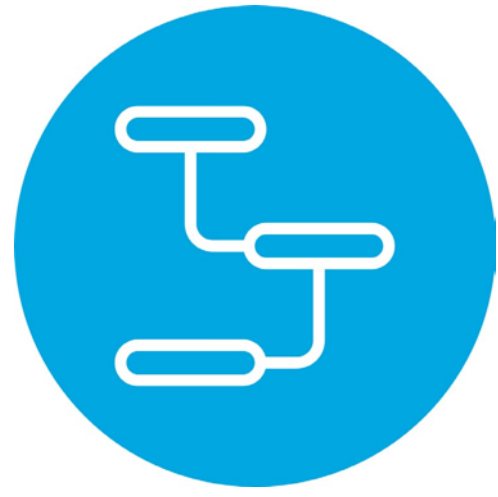


Sleep  
architecture

# What is a home sleep study



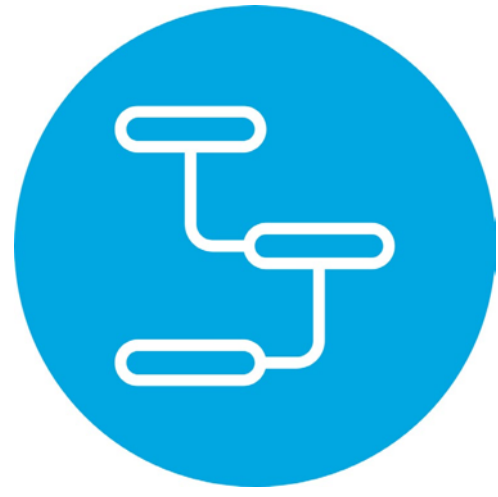




Sleep  
architecture

# Architecture summary

1. Amount of time in stages
2. Fragmentation
3. Awake during sleep
4. Leg movement (random or periodic)
5. Arousals
6. Circadian

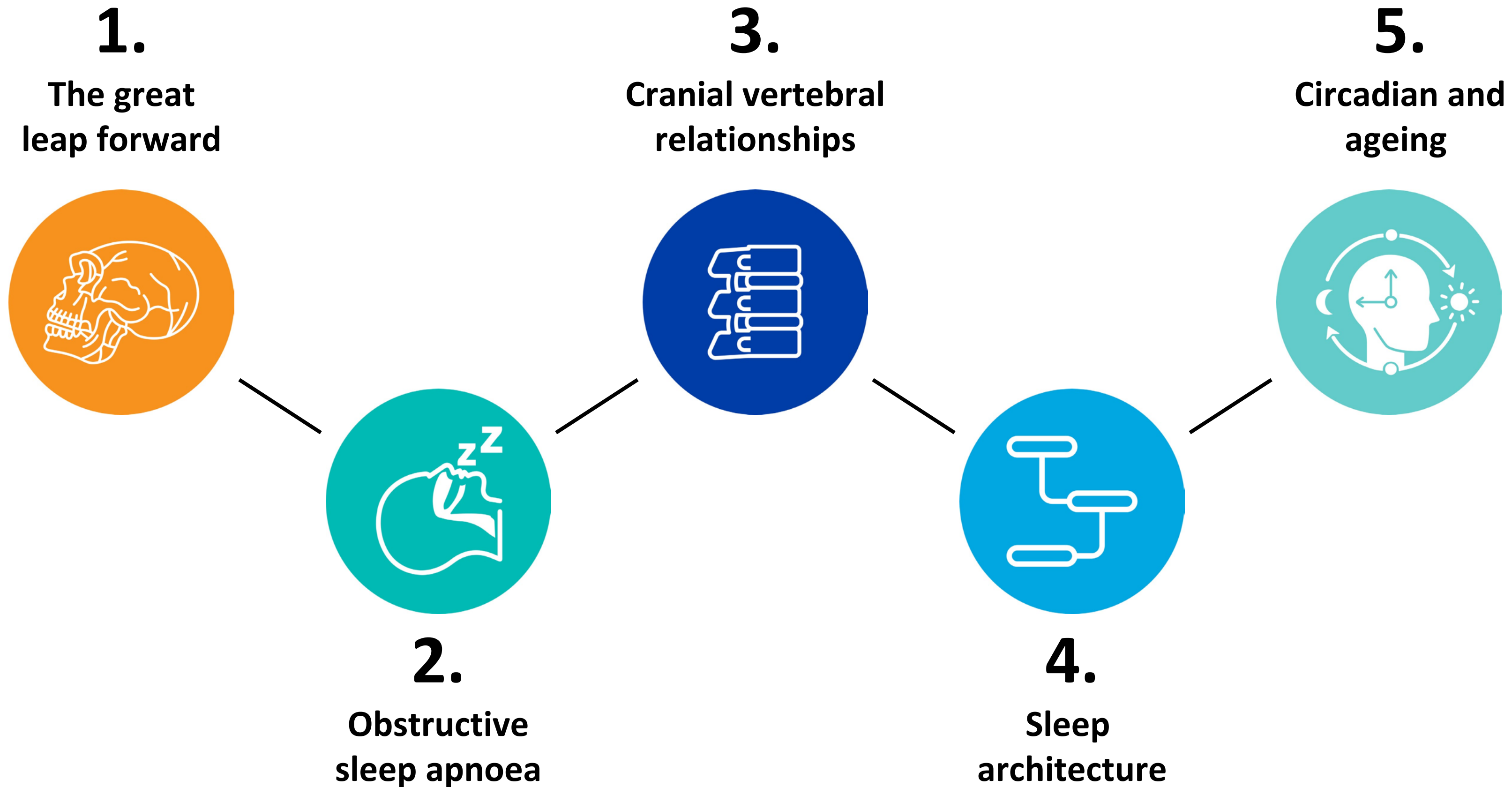


Sleep  
architecture

# Treatment

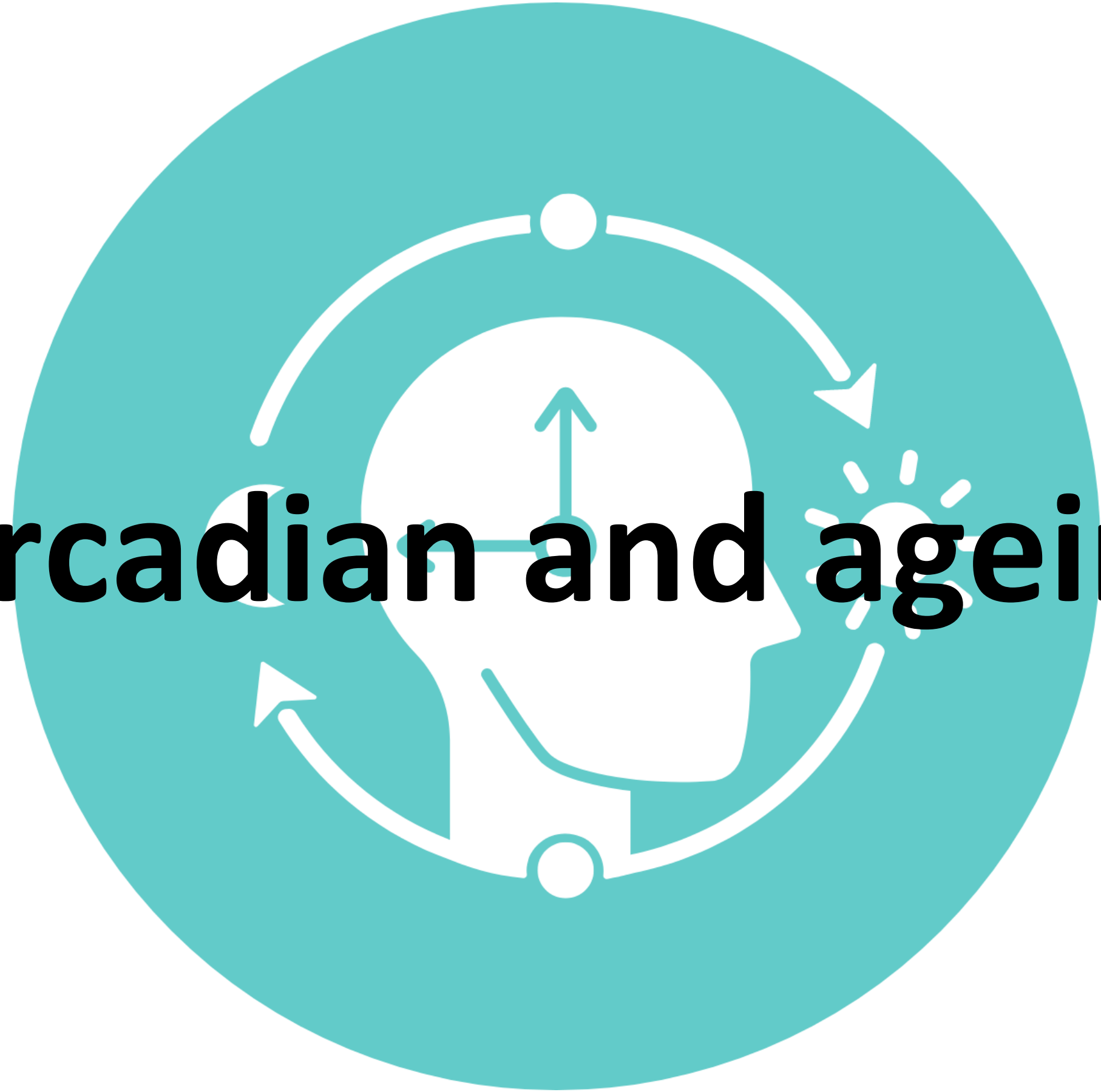
- Sleep orthotic
  - Somnomed
  - Orentus
- CPAP
  - Continuous positive airway pressure
  - Blowing up a balloon
  - Poor compliance
- Lifestyle

# Sleep deep dive





# Circadian and ageing





**Circadian  
and ageing**

# Have you ever wondered...

How does your body know  
when to sleep?

How do you know if you're getting  
enough sleep?



# The cave experiment

15 people were put in a cave in France for 40 days and 40 nights

They had no sunlight. It was 10 degrees.

They had no technology.

No contact with family and friends.

No updates on the pandemic.

They relied on their biological clocks to know when to wake up, go to sleep and eat



# The cave experiment

The findings

Two-thirds of the participants expressed a desire to stay in the cave longer



Circadian  
and ageing

# Our body clock

Our bodies keep their own time -  
Endogenous Clock

On average our clock runs at  
24hr and 15min

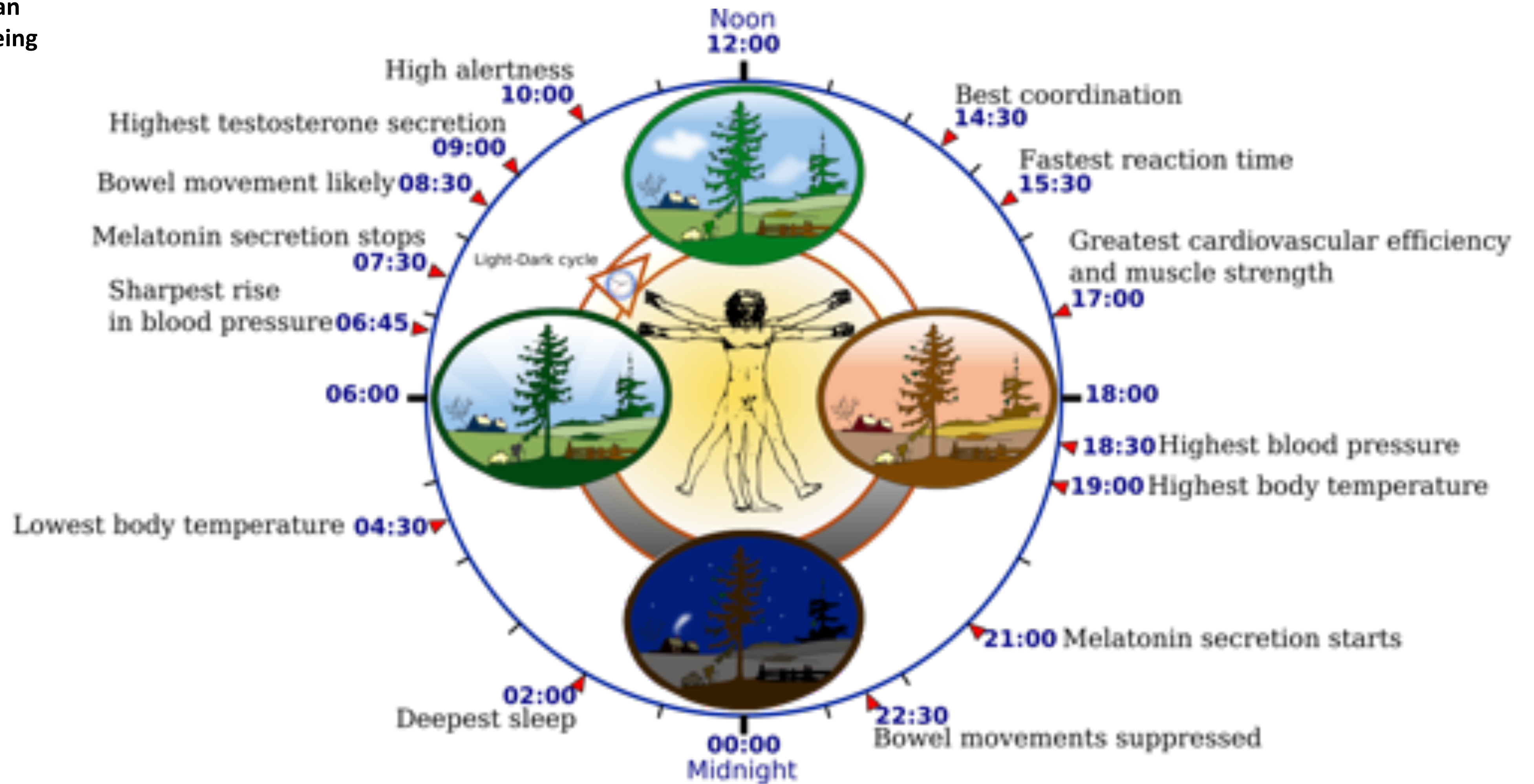
Daylight is the most reliable repeating signal in  
our environment for us to set our clocks to





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and ageing

# The circadian rhythm





Circadian  
and ageing

# The circadian rhythm

Your lowest body temperature is at 4am

There are hormone changes over a 24hr cycle

There are changes in behaviour

Your fastest reaction time is later in the day



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and ageing

# The circadian rhythm

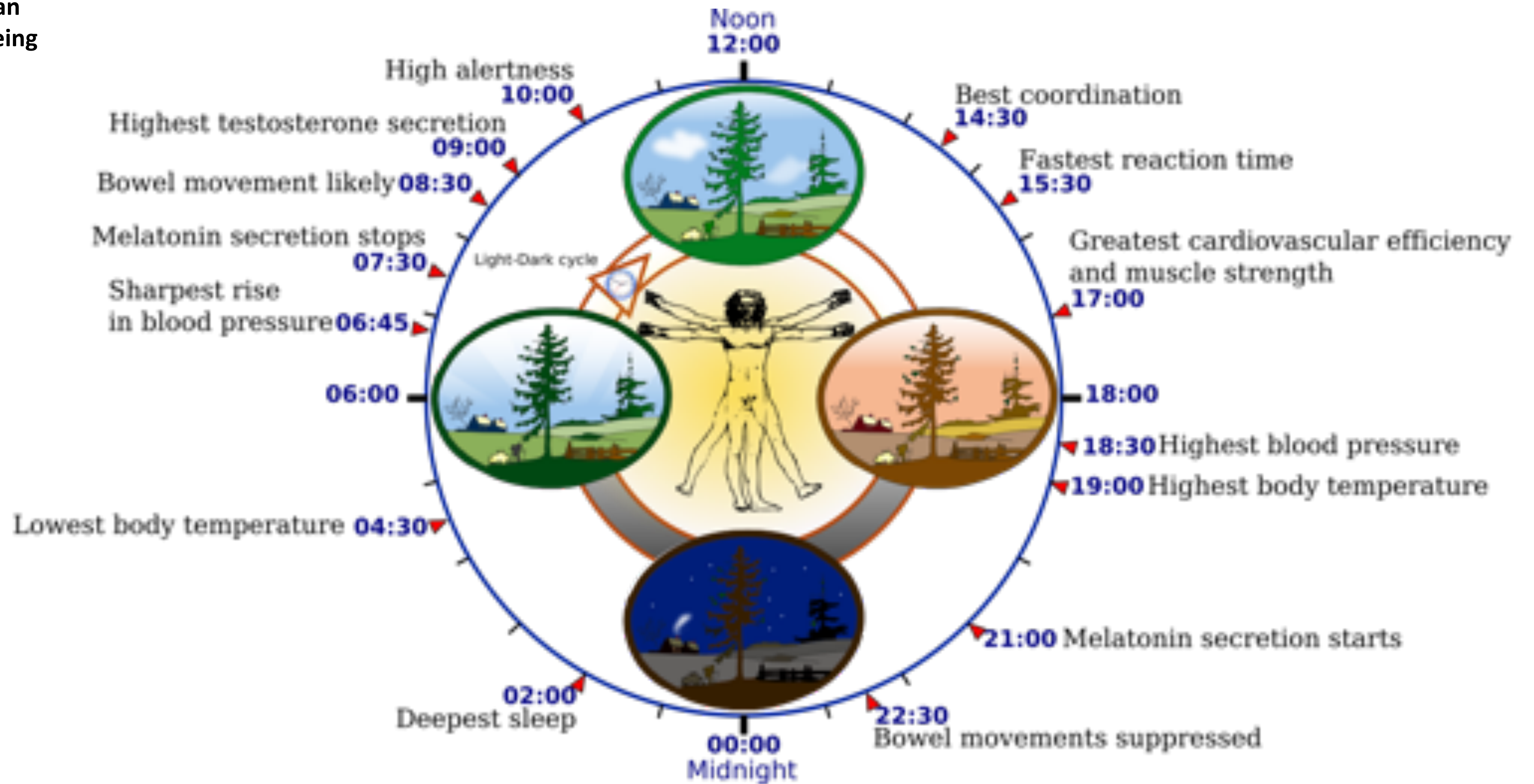
Your sharpest rise in blood pressure occurs just before you wake in the morning

This works with timing of the regulation of every cell in our bodies



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and ageing

# The circadian rhythm





**Circadian  
and ageing**

# The circadian rhythm







It's jazz baby



Circadian  
and ageing

# The circadian rhythm

*“The jazz edition”*

When it comes to Circadian Rhythm we can't jazz it up because we knock our bodies out of synch

If you turned on your technology in the middle of the night you shut down your melatonin secretion.





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and ageing

# The circadian rhythm

*“The jazz edition”*

If you travel overseas this is called jet-lag.

New time zone? Your SCN can only readjust about 1 hour per 24hr cycle.

How about Social Jet-lag?

Mon - Fri awake at 6am

Sat - Sun awake at 9am

That's a 3 hour time delay.



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# Physiological strain

Learning and memory deficiency

Type 2 diabetes

How we process pain

Cancers



**Circadian  
and ageing**

# The Wolverine diet





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and ageing

# Ageing

In Australia 20% of the population is  
> than 65 years

57% of these report difficulty staying asleep

> age = < light exposure = < activity outdoor  
= live in the dark = cataract

Poor circadian rhythm



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# Chronic sleep deficiency

< Alertness

< Energy

< Performance

= Pathological ageing



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# Insufficient sleep

> Oxidative stress

> Inflammation

> Neurotoxins

Vascular disorders

Insuline resistance

Alzheimer



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# Neurodegenerative conditions

In all these conditions the disruption of sleep is exaggerated

Sleep becomes distributed over 24hrs

60% of people with Alzheimer have at least 1 associated sleep disorder (most of them insomnia)



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# Risks factors of sleep disturbances

- Insomnia predicts AD
- SDB predicts AD
- Sleep fragmentation predicts AD
- They play distinct roles in dementia pathology





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and ageing

# Alzheimer

- Amyloid and Tau protein
- $< \text{sleep} = < \text{flushing} = >$  amyloid build up
- Plaques in the brain
- Plaques kill surrounding neurons
- They affects some parts of the brain
- Effects on the MPFC



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and ageing

# Medial prefrontal cortex

- CEO of the brain
- Epicentre for generating NREM  
(deep) Sleep
- Impacted during chiropractic adjustments



# Questions you can ask

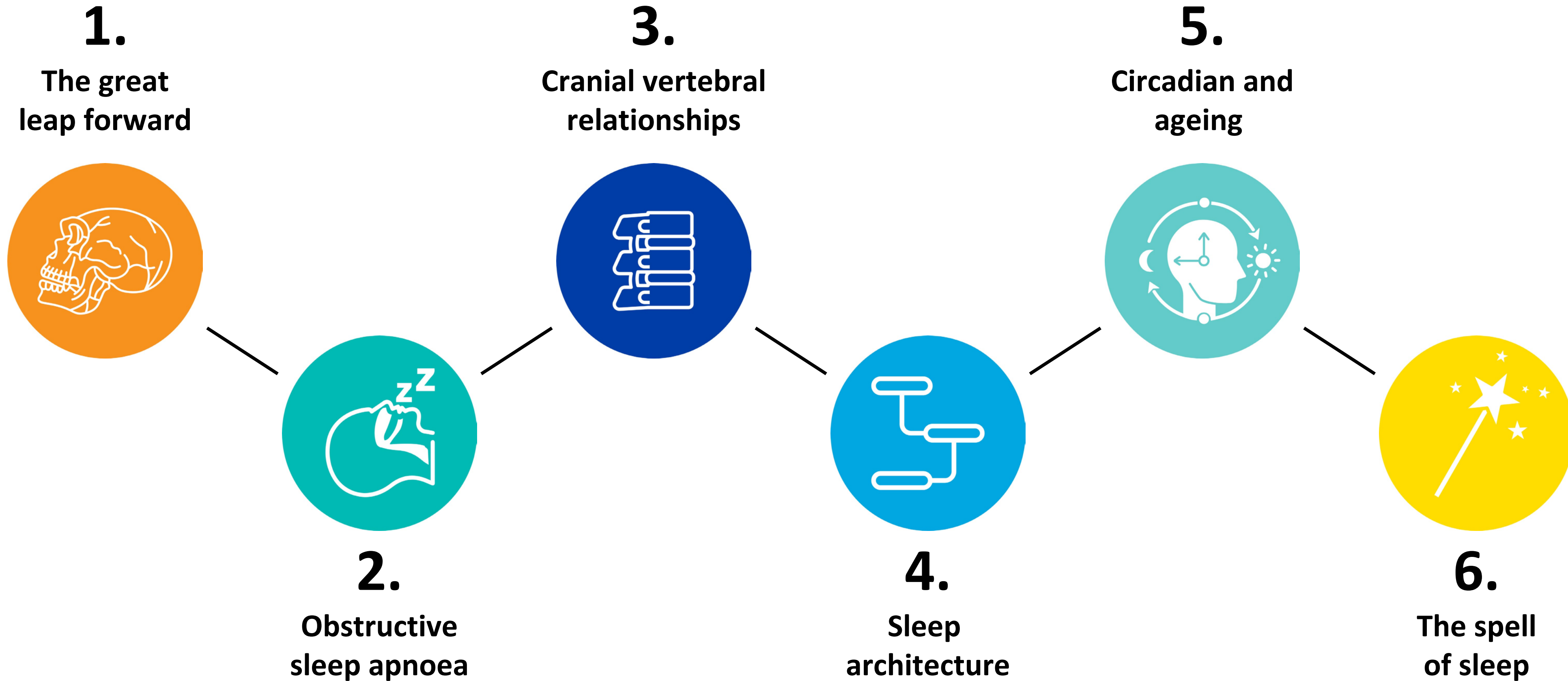
**Are you forgetful?**

= memory problems

**Do you wake refreshed?**

= compromised sleep

# Sleep deep dive





**The spell of sleep**



The spell  
of sleep

# 3 sleep hormones

1. Melatonin
2. Adenosine
3. Cortisol



# Melatonin

At **dusk**, melatonin is the hormone that tells the brain “it’s time to go to sleep”

At **dawn**, even with our eyelids closed, melatonin is a break pedal that tells your brain “you have reached the finish line”

**Daylight** is the most reliable repeating signal in our environment for us to set our internal circadian clock to.





# Melatonin - the iPad effect

50% drop in melatonin secretion

Melatonin peak will present 3hrs later

Sleep is mistimed so the REM sleep decreases





# Melatonin - the iPad effect

2-3 days recovery time

Trigger for insomnia and anxiety

The brain associates the bedroom as the place to be awake



The spell  
of sleep

# Adenosine

Adenosine is the sleepiness hormone.

= Sleep pressure signal

= Your desire to sleep



# Adenosine

Sleep breaks down adenosine – takes 8hrs

If adenosine is still in your system you wake tired and rusty

You carry the sleep load (sleep pressure) into the next day



# Adenosine - the coffee effect

Coffee is the 2<sup>nd</sup> most traded commodity in the world after oil

Caffeine attacks and blocks adenosine receptors masking sleep

It takes 5-7hrs for caffeine to break down in our system



# Adenosine - the coffee effect

Caffeine is found in:

- Dark Chocolate
- Ice cream
- Weight loss pills
- Pain killers

Decaf does not mean no caffeine



# Cortisol

Cortisol is the stress hormone.

= helps you stay awake





# Cortisol spikes

Cortisol spikes are biomarkers for insomnia

Late evening cortisol spike (2nd wind)  
= sleep onset insomnia

Cortisol spike in the middle of the night  
= sleep maintenance insomnia





The spell  
of sleep

# Bedroom routine

## Lighting vs cave dark

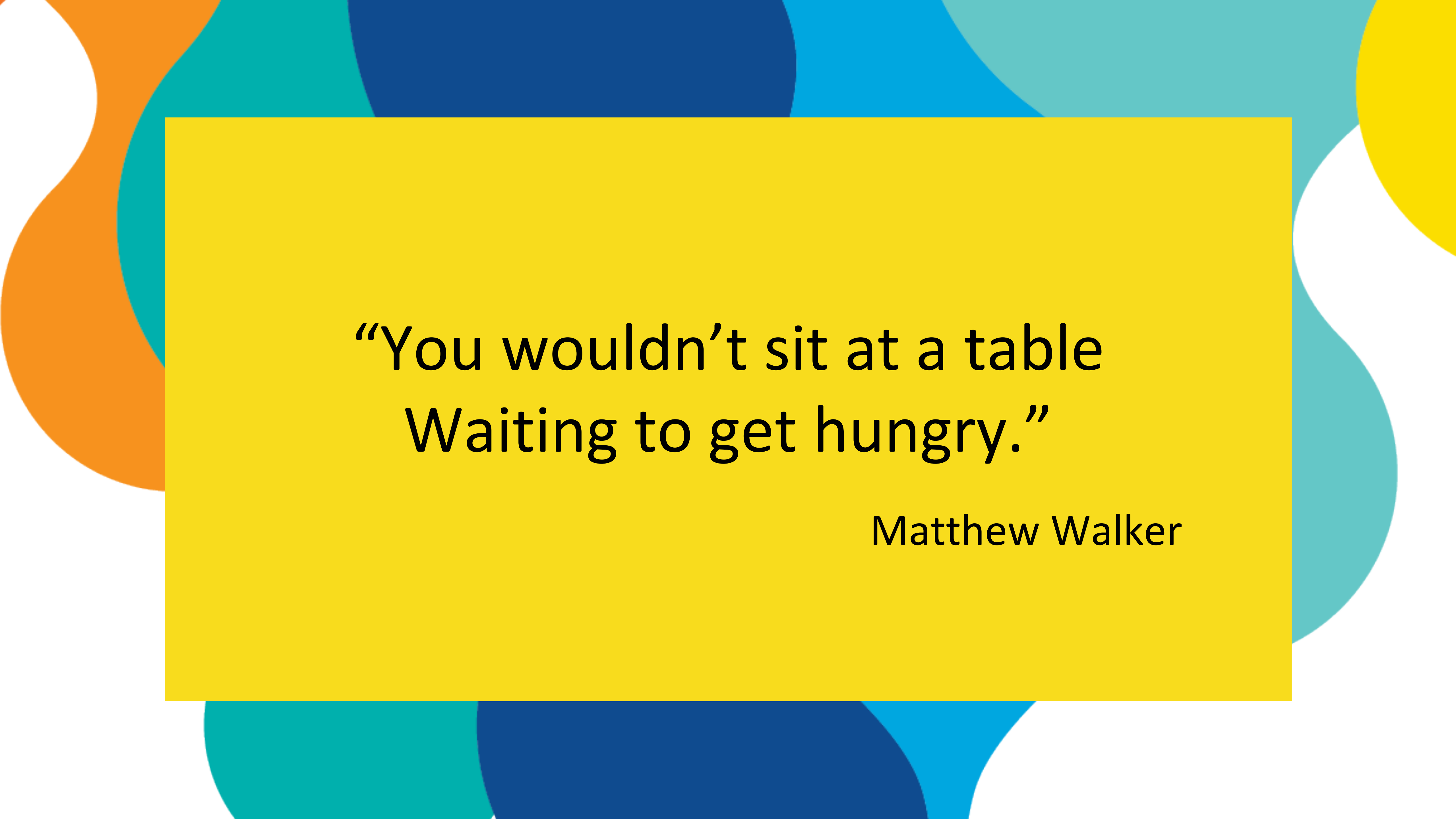
Street lights - hall lights - alarm clocks

## Technology rules

## Activities

The bedroom is for sleeping and sex





“You wouldn’t sit at a table  
Waiting to get hungry.”

Matthew Walker



The spell  
of sleep

# What you can ask?

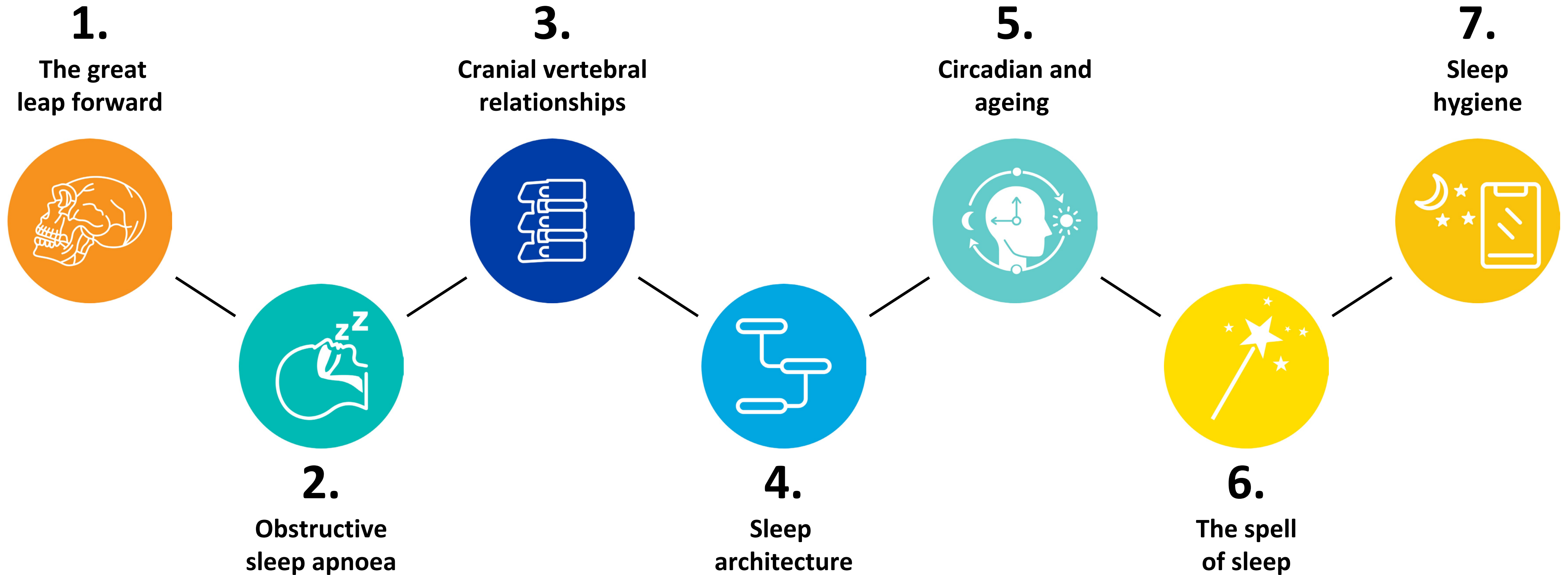
“How long does it take you to fall asleep?”

(Sleep onset insomnia)

“How long does it take you to fall back to sleep?”

(Sleep maintenance insomnia)

# Sleep deep dive





**Sleep hygiene**



Sleep  
higiene

# The 4 keys to sleep hygiene

1. Regularity
2. Continuity
3. Quantity
4. Quality



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# The 4 keys to sleep hygiene

## 1. **Regularity**

Consistency of your sleep ritual

## 2. **Continuity**

Is your sleep fragmented?

Are you waking in the night?

Do you fall back asleep?



Sleep  
higiene

# The 4 keys to sleep hygiene

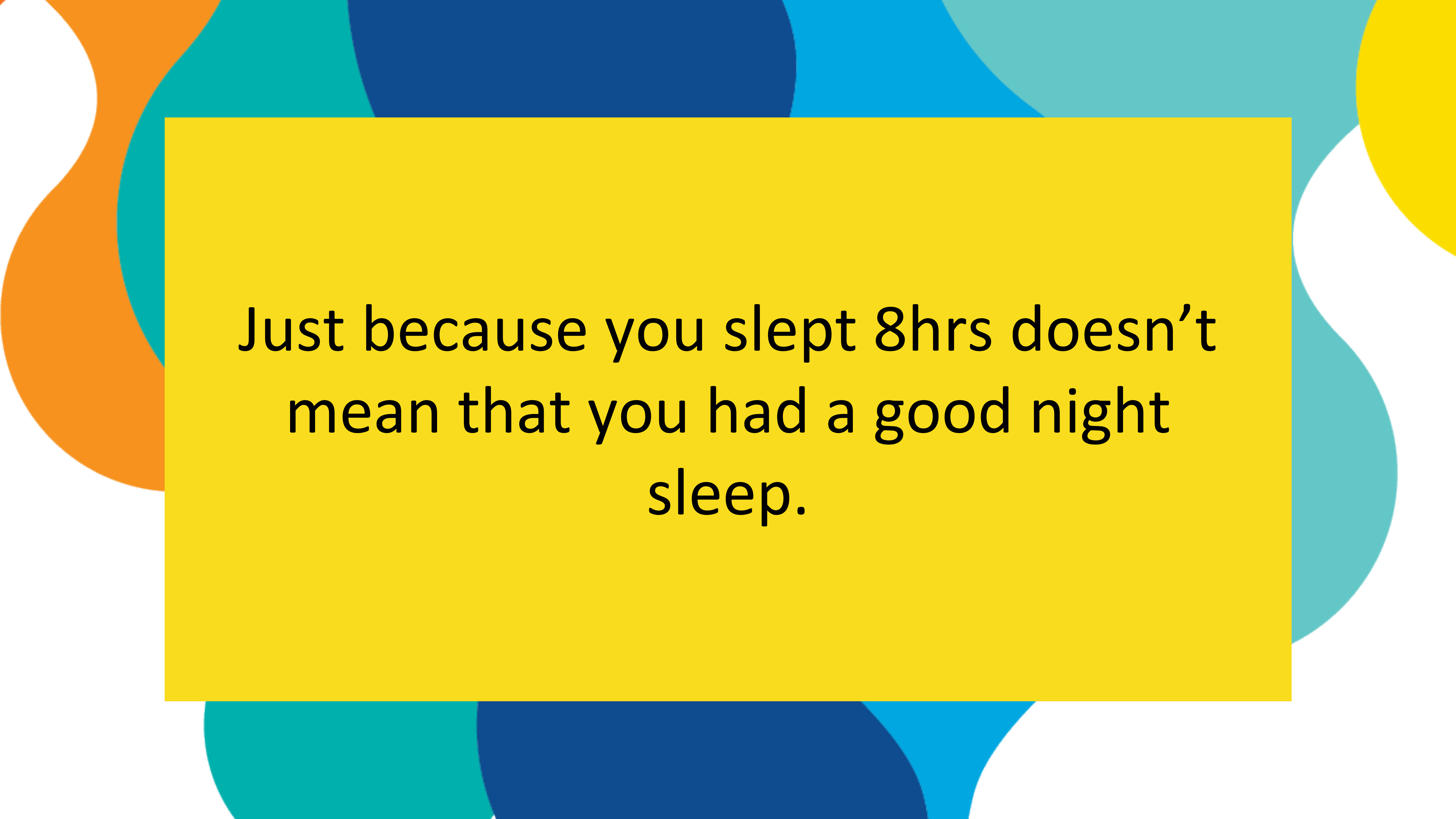
## 3. **Quantity**

How much sleep are you getting?

How much of the different stages?

## 4. **Quality**

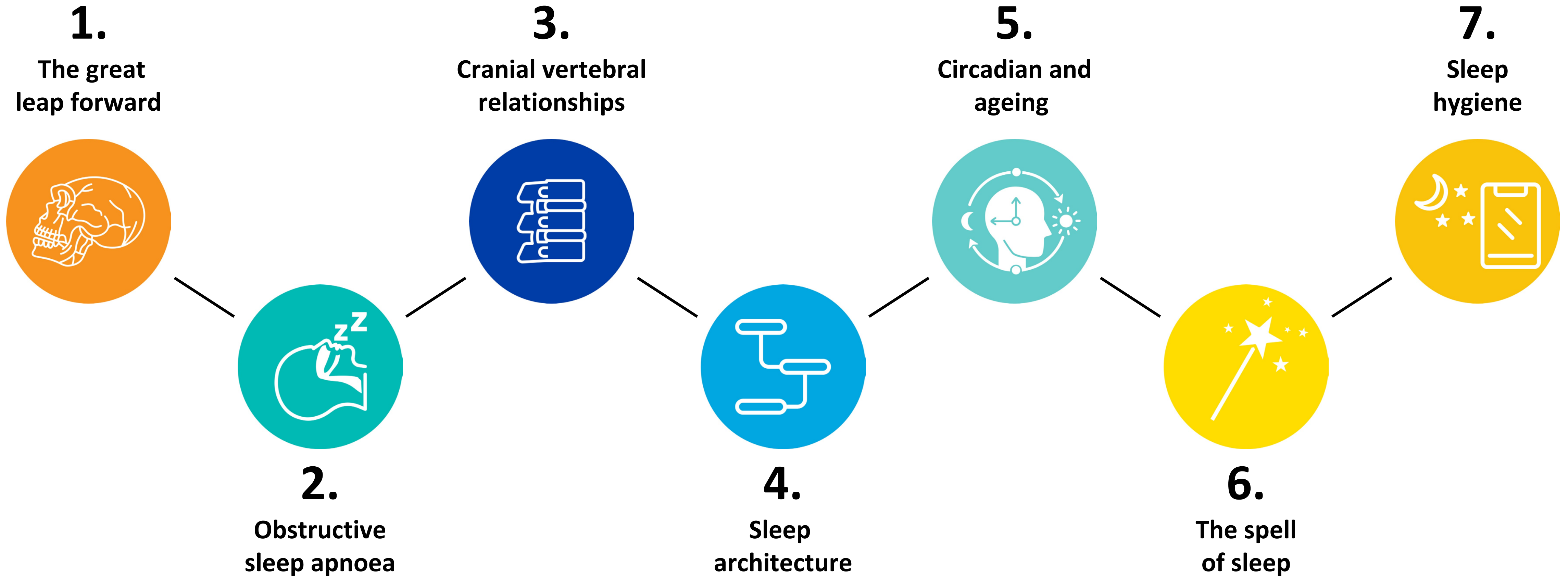
What is your sleep architecture?



Just because you slept 8hrs doesn't  
mean that you had a good night  
sleep.



# Sleep deep dive





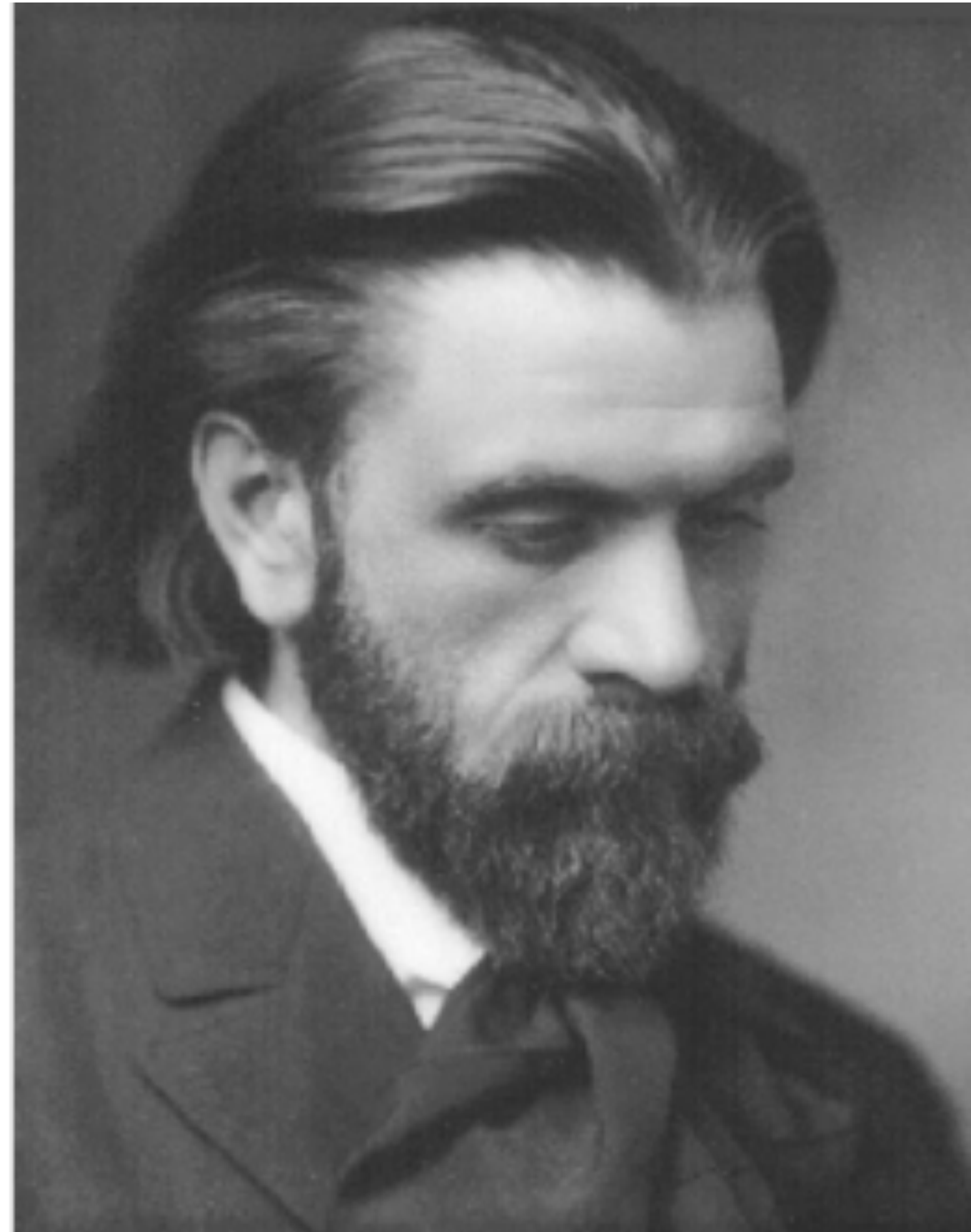
# Your challenge

Monday morning  
start a conversation

When was the last  
time you woke up  
feeling refreshed?



# The big idea - Dr BJ Palmer





# The story of accumulation

Small things

become

Our habits

become

Our lifestyle



# Remember the stats?

By the time you are 65:

8 out of 10 people live with 1 illness

7 out of 10 people live with 2 illnesses

**This is what we're working with!**









## Remember the stats?

Sleep apnoea is as common  
as diabetes.

50% of men 40-85 yrs

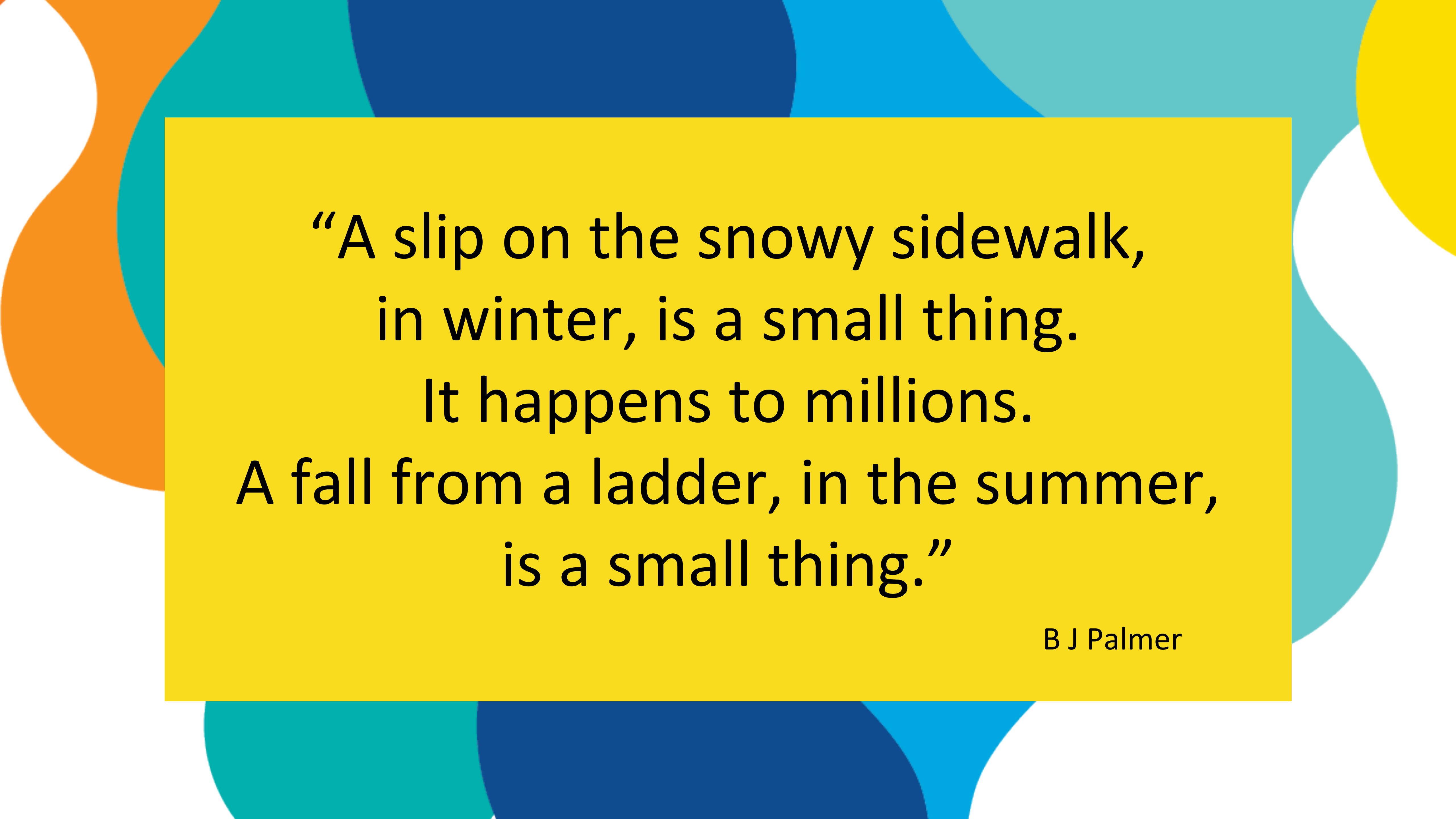
23% of women

Increasing over the past two decades

**This is what we're working with!**

The brain two gears:  
Day time  
Night time





“A slip on the snowy sidewalk,  
in winter, is a small thing.  
It happens to millions.  
A fall from a ladder, in the summer,  
is a small thing.”

B J Palmer

Why shave?



**Who are the best people to deal  
with sleep?**



**Thank  
You**

**Brett Lillie** 