DEFINITION

1. **Narcolepsy** is defined as a syndrome that is characterised by abnormal sleep tendencies including excessive daytime sleepiness and often disturbed nocturnal sleep.

CLINICAL MANIFESTATIONS

2. The narcoleptic tetrad (**Gélineau's Tetrad**) consists of –

    2.1. **excessive daytime sleepiness with sleep attacks (narcolepsy)**. This is the hallmark of narcolepsy. On average a patient will fall asleep between 2 and 6 times during the day, but up to 20 or 30 episodes may be experienced. Attacks last on average around 10 or 20 minutes, but may be as brief as 1 minute or as long as 2 hours. The attacks are described as irresistible and may occur while eating, standing or driving. The patient can be roused as from normal sleep. Night-time sleep is frequently disturbed.

    2.2. **episodes of sudden falling associated with emotion (cataplexy)**. This is an abrupt but reversible paralysis into which a narcoleptic patient may be precipitated by emotional events. The severity varies from total paralysis with collapse to the ground to merely a sagging of the jaw or dropping of the head. Consciousness is preserved but the patient may see double. Laughter and anger are the commonest triggers, but any emotion may precipitate an attack.

    2.3. **sleep paralysis**. In **sleep paralysis** the patient becomes totally unable to perform a voluntary movement despite remaining awake and aware. It may occur on falling asleep (hypnagogic) or on awakening (hypnapomic). Such episodes can be extremely frightening. Episodes rarely last more than 10 minutes and are usually much shorter.

    2.4. **hypnagogic hallucinations**. Hypnagogic hallucinations almost always involve visions, although they may involve noises, voices, melodies or psychic hallucinations.

3. In addition to the above, other symptoms can be experienced. These include automatic behaviour, lapses of memory and "blackouts". In the latter the patient may continue activity which does not demand extensive skill but may make frequent mistakes.

AETIOLOGY

4. Narcolepsy begins in adolescence or early adulthood and is lifelong. It is more common in males. Virtually every patient develops excessive daytime sleepiness and sleep attacks, about two-thirds experience cataplexy, about a third suffer hypnagogic hallucinations and about a sixth have sleep paralysis.

5. All patients with narcolepsy studied so far express the major histocompatibility antigen HLA DR2 compared with about a quarter of controls. This confirms the genetic origin. Between 10 and 40 per cent of patients give a history of a similar disorder amongst other family members.

CONCLUSION

6. **Narcolepsy** is a condition which is characterised by abnormal sleep tendencies including excessive daytime sleepiness and often disturbed nocturnal sleep. The condition is genetically determined.

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