

Abstract in English

Introduction: Narcolepsy with cataplexy is a lifelong disorder characterized by sleep-wake instability and cataplexy. The disease results from a hypocretin deficiency. Most studies of narcolepsy with cataplexy deal with the time of diagnosis, and only minimal research has been done on the long-term development and condition in old age.

Objective: To describe the symptoms and comorbidities of adult patients with narcolepsy with cataplexy, their development in adulthood with respect to the pathophysiological context and particular focus on old age.

Methodology: The main part of the dissertation consists of three separate studies on patients with narcolepsy with cataplexy. In the first and second studies the results were compared with age and sex matched controls without sleep disorder. The first compiled results of a structured interview on the development of clinical symptoms of narcolepsy patients over 60 years of age and their general health status, standardized scales and questionnaires to assess depression, anxiety, cognition, health-related quality of life, and a physical fitness test. The second study analyses polysomnographic records of patients and controls over the age of 55 years. The third study investigated hypnagogic hallucinations and sleep paralysis and compared the outcomes of patients in different age groups.

Results: There was no clear trend in the intensity of symptoms of narcolepsy with cataplexy. A higher incidence of arterial hypertension and type 2 diabetes was found in narcolepsy with cataplexy patients compared to controls. Patients were found to have poorer physical fitness, more frequent smoking, higher BMI and higher rates of depression according to the Geriatric Depression Scale. Higher rates of REM sleep behavior disorder and periodic limb movements in sleep were also found. Seniors with narcolepsy did not lag behind their peers in social and leisure activities. Their cognitive performance was comparable to controls. Nevertheless, these patients rated their quality of life according to the VAS EQ-5D worse than controls.

Conclusion: Symptoms of narcolepsy with cataplexy, comorbid diseases and other problems known at a younger age accompany narcolepsy patients even in advanced age, despite established symptomatic treatment and many years of adaptation. Analysis of the development of symptoms and the spectrum of comorbidities and their status in old age did not lead to a change in the understanding of pathophysiology of narcolepsy with cataplexy.