"Automatic Behavior" A complex behavior or set of behaviors carried out by a person who appears to be awake but is actually between sleep and wakefulness. The behavior typically initiates while the subject is awake but continues into the semi-sleep state. The person awakens with no memory of performing these activities. Automatic behavior can be as simple as repeatedly deleting text just typed into a word-processing program, to as complex as driving a car for many miles and arriving at a destination with no memory of how the destination was reached.

"Cataplexy" Exclusive to narcolepsy. A sudden bilateral loss of tone or strength of all or some of the voluntary muscles. It can present itself as only a barely noticeable slackening of the muscles in the face to the dropping of the jaw or head. To this might be added weakness of the knees. If the entire body is involved, the person collapses in place. The person is likely to be fully awake, but unable to move or tell anyone what is happening. If it is possible for the person to talk during an attack, the speech is slurred. Vision is often impaired while hearing and awareness remain unaffected. These attacks usually are triggered by strong emotions such as exhilaration, anger, fear, surprise, orgasm, awe, embarrassment and laughter. A person’s effort to prevent the attacks by avoiding these emotions may greatly take away from the quality of a person’s life and severely restrict them emotionally if they go without treatment.

“Complete Clinical Picture” A complete image of a person and their medical condition that includes all of the signs and symptoms, the results of examinations and tests, complete medical history, etc.

“Daytime Nap Study” Also called a Multiple Sleep Latency Test (MSLT). A sleep study in which the patient is given a 20 minute opportunity to fall asleep four to five times, two hours apart while being monitored in a quiet, darkened room. It is a defining test for narcolepsy.

“Disrupted Nighttime Sleep” Is the inability to remain asleep throughout the night. The person may or may not experience full wakefulness and may or may not remember awakening.

"Hypnagogic and Hypnopompic Hallucinations”. The term “Hypnagogic” means at the beginning of sleep and Hypnopompic means when awakening from sleep. These kinds of hallucinations are really dreams while awake and can include any and all of the senses; vision, hearing, smell, taste, touch and motion. These events are believed to occur because the part of sleep when we dream for some reason happens when the person is awake. While the hallucinations are occurring they are perceived as actual events. However, once the person is fully awake, the events are usually (although not invariably) recognized as hallucinations. The experience may often be frightening but can be especially terrifying when accompanied by Sleep Paralysis.

“Idiopathic Hypersomnia” a chronic sleep disorder, or set of sleep disorders, in which the person has Excessive Daytime Sleepiness that is not defined as being due to another medically described cause. The sleepiness is usually not relieved by taking a nap or longer hours of sleep.
"Narcolepsy" is a complex neurological disorder marked by five major symptoms: Excessive Daytime Sleepiness (EDS); Cataplexy (C); Hypnagogic Hallucinations (HH); Sleep Paralysis (SP) and Disrupted Nighttime Sleep (DNS). It always includes both EDS and at least one form of REM Intrusion into Wakefulness (C, HH, SP).

“Overnight Sleep Study” also called a Polysomnogram (PSG). A sleep study usually performed all night in a sleep lab in which the subject is connected to a number of recording monitors and observed while being given the opportunity to sleep on a bed in a darkened, quiet room.

“Post Traumatic Hypersomnia” A chronic sleep disorder in which the patient experiences continued excessive daytime sleepiness usually not relieved by extra sleep or naps following physical trauma, usually to the head and/or neck. The condition may last for a number of months or become permanent.

“Recurrent Hypersomnia” Any of a number of chronic sleep disorders in which the person undergoes recurring episodes of days to weeks of more than the usual amount of sleep or excessive daytime sleepiness.

“Response to Medications” Any and all effects on the body or mind that are in response to the administration of a medicine. This includes both intentional desirable and unintentional undesirable reactions.

“Secondary Hypersomnia” A form of excessive daytime sleepiness that occurs as a result of or subsequent to a significant event such as trauma, illness, exposure to disease or toxin, etc.

“Secondary Narcolepsy” A form of narcolepsy or narcolepsy like symptoms that occurs as a result of or subsequent to a significant event such as trauma, illness, exposure to disease or toxin, etc.

"Sleep Paralysis" The temporary inability to voluntarily move at the onset of sleep or wakefulness.

“Sleepwalking” A kind of sleep disorder in which the subject engages in a complex behavior or set of behaviors such as walking, eating, driving, etc. while in a state between sleep and wakefulness.

“Uncontrollable Daytime Sleepiness” A symptom of narcolepsy, hypersomnia and other sleep disorders and illnesses. It is an extreme need for sleep that can not be denied or controlled.