

This story is based on real patient experiences.



Not actual patient. Model is for illustrative purpose only.

A PATIENT'S STORY

At the start of the Iraq war, Ron's unit was managing the best they could. Ron was doing well, until things spiraled out of control when Ron's squad leader was killed. His squad leader was as close as a brother to him.

Ron remembers an explosion, everyone scrambling, then quickly it was calm again. But within 24 hours everyone had to focus on getting back to work. Ron had to push what happened out of his head because he needed to concentrate on his next mission. There wasn't time to process what happened and the impact that it had on him.

While Ron was on active duty, he was able to keep what he saw, and the emotional impact of losing such a close friend out of his thoughts. He had nightmares, but he seemed to manage despite them.

When Ron returned home, he wasn't able to set the nightmares aside. Ron was a very social person before the war; however, once he returned home his friends noticed that he was more withdrawn and seemed nervous, moody, and on edge. These changes affected his wife and kids, and he stopped participating in family routines. He avoided going to family get-togethers, and conversations became more and more tense; even over routine decisions like where to go to eat. At first, being around people seemed to help him avoid thinking about his military experiences; however, after a few months, he started to remember things he had previously pushed out of his mind. He began having recurring nightmares about combat which became an increasing problem and prevented him from getting adequate sleep. The nightmares were horrible. He sometimes dreamt he was feeling physical pain, and then would suddenly awaken with that same pain. Loud noises and crowds would increase his paranoia. Ron's wife eventually stopped sleeping in the same bed as him. She couldn't get the sleep she needed to do her job and take care of their family.

Eventually he stopped talking to those friends and family he was so close to. He felt he couldn't discuss his problems with anyone and didn't want to burden them with what he was feeling. Ron reached the point where he felt the insomnia and nightmares were slowly killing him. He felt there was nothing left for him in this world, and he began to seriously think about suicide. He went from enjoying 10 mile runs to not even being able to run 2 miles. He felt increasingly alone, and every week the nightmares seemed to happen more and more often. Some weeks he would have two or three nightmares a week, and other weeks he would have two or three nightmares each night.

At its worst, Ron was having recurring nightmares, and self-medicating with alcohol: it was the only way he could go to sleep and not dream. He would drink each night until he passed out on the couch. When he woke up, he felt exhausted and weary, but at least didn't have to face the nightmares. His doctor put him on a prescription drug, but he felt lethargic in the mornings and could not exercise while taking it: he was still trying to hold on to running. It was the one thing he used to enjoy. Ron soon stopped taking the meds. It wasn't worth it. He also tried Imagery Rehearsal Therapy, but hated talking about his nightmares. For the two weeks he tried it, his nightmares got worse, and he stopped. His nightmares and insomnia impacted his personal and his ability to work. He has been unable to hold a steady job, and his friends and family seem even more distant than ever.

RON ISN'T AN ABNORMAL PATIENT. LIKE SO MANY OTHERS, HE HAS STRUGGLED CONTINUALLY WITH HIS NIGHTMARES. HE'S STILL LOOKING FOR A SOLUTION.



NIGHTWARE

NightWare.com

Important Safety Information

INTENDED USE/INDICATION FOR USE

The NightWare digital therapeutic is indicated to provide vibrotactile feedback on an Apple Watch based on an analysis of heart rate and motion during sleep for the temporary reduction of sleep disturbance related to nightmares in adults 22 years or older who suffer from nightmare disorder or have nightmares from post-traumatic stress disorder (PTSD). It is intended for home use.

CONTRAINDICATIONS

If you have acted out your nightmares (i.e. sleepwalking, violence) do not use NightWare and contact your Healthcare Provider.

WARNINGS

- NightWare is not a standalone therapy for PTSD. The device should be used in conjunction with prescribed medications for PTSD and other recommended therapies for PTSD-associated nightmares and nightmare disorder, according to relevant consensus guidelines.
- If daytime sleepiness occurs, contact your Healthcare Provider.
- If you feel drowsy, do not drive or operate heavy machinery. Contact your health care provider.
- If the watch vibration causes awakenings not associated with nightmares, please contact your Healthcare Provider.

- If nightmares persist, worsen, or recur, contact your Healthcare Provider.
- If skin irritation occurs, discontinue use of the watch and contact your Healthcare Provider.
- Your watch may disturb your bedpartner. Try not to expose your bedpartner to the watch at night.
- Do not wear the watch too tightly, it should feel comfortable and snug, not tight on your wrist.
- Wear the watch only when you are planning to go to sleep; do not wear it while reading or watching TV in bed as this may trigger false alerts.
- Use the NightWare watch every night.
- Not intended for use by individuals under age 22.
- The long term safety and effectiveness of the NightWare device has not been established.
- The long term effects of the NightWare device use on the sleep architecture have not been established.

PRECAUTIONS:

- Do not drop or crush the smartphone or watch.
- Be sure to charge the smartphone and watch every day.

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