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| **Outils** | **Clientèles** | **‘’Cut-Off’’ ou résultats de l’étude** | **Population** | **Références** |
| **The Epworth Sleepiness Scale (ESS)** |  | RESULTS: In OSA patients, the ESS weakly correlated with the apnea-hypopnea index (r=0.224; P=0.05; n=120) and negatively with mean sleep latency. For untreated patients (test-retest), the mean (+/- SD) average score was unchanged (10.3+/-6.0 to 10.8+/-6.5; P=0.35; n=56) after a median of seven months. With continuous positive airway pressure use, the mean score decreased from 12.4+/-6.8 to 7.6+/-5.0 after 40.2 months (P<0.0001; n=68). For all subjects, the ESS score obtained by the physician was less than that of the self-administered result (9.4+/-5.9 versus 8.5+/-5.8; P<0.0001 [paired t test]; n=188). CONCLUSIONS: In a sleep clinic population, the French version of the ESS performed similarly to the English version. However, the systematic underscoring during physician administration may be important to consider in the research setting if questionnaire administration methods are not consistent. | Consecutive OSA patients presenting to the sleep clinic at a tertiary care centre completed a self-administered questionnaire containing the ESS. During the medical interview the same day, one of three pulmonologists who specialized in sleep medicine administered the ESS. | The Epworth Sleepiness Scale: self-administration versus administration by the physician, and validation of a French versionKaminska, Marta Jobin, VincentMayer, PierreAmyot, RobertPerraton-Brillon, MelanieBellemare, Francois Canadian Respiratory Journal 17 (2) : 17-34, 2010 |