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Comment on 'Utility of screening questionnaire, obesity, neck circumference, and sleep polysomnography to predict sleep-disordered breathing in children and adolescents

Sir—We read with interest the article by Raman *et al*. (1) which describes the utility of a screening questionnaire, together with anthropometric measurements of obesity and neck circumference to predict sleep-disordered breathing in children and adolescents. While we fully acknowledge that this study is a timely and important addition to the pediatric literature, we must respectfully disagree with their characterization of the STBUR (**S**noring, **T**rouble **B**reathing, **U**n-**R**efreshed) tool which we had previously developed as a risk assessment tool for identifying children with sleep-disorded-breathing-related perioperative respiratory adverse events (PRAE) (2). In their paper, the authors incorrectly state that the five items that comprise the STBUR tool were arbitrarily selected. However, as clearly described in our paper, we had conducted a factor analysis of items from the Sleep-Related Breathing Disorder subscale of the Pediatric Sleep Questionnaire (3) to identify which factors were the most predictive of perioperative respiratory adverse events. From this analysis, five factors emerged which comprise the STBUR scale. As such, selection of the STBUR items was statistically not arbitrarily based.

Ethics approval

This letter did not require ethical approval.

Funding

The study received no external funding.

Conflict of interest

The authors report no conflict of interest.

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