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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.'

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Sir - We read with interest the article by Raman *et al.* which describes the utility of a screening questionnaire, together with anthropometric measurements of obesity and neck circumference to predict sleep-disordered breathing (SDB) in children and adolescents.¹ 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**nororing, **T**rouble **B**reathing, **U**n-Refreshed) tool which we had previously developed as a risk assessment tool for identifying children with SDB-related perioperative respiratory adverse events (PRAE).² In their paper, the authors incorrectly state that the 5 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 (SRBD-PSQ)³ to identify which factors were the most predictive of PRAE. From this analysis, 5 factors emerged which comprise the STBUR scale. As such, selection of the STBUR items was statistically not arbitrarily based.

Disclosures/conflicts of interest

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