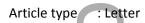
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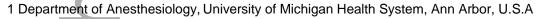
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Comment on 'Utility of screening questionnaire, obesity, neck circumference, and sleep polysomnography to predict sleep-disordered breathing in children and adolescents.'



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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.<sup>\*1</sup> 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 SDB-related perioperative respiratory adverse events (PRAE).<sup>2</sup> 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)<sup>3</sup> 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**

This letter did not require ethical approval. The authors report no conflicts of interest.

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