Aiming for an Ideal Drug-Induced Sleep Endoscopy (DISE) Scoring System

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Sponsorships or competing interests that may be relevant to content are disclosed at the end of this article.

Thank you for the letter in response to “Systematic Review of Drug-Induced Sleep Endoscopy Scoring Systems.” Nzekwu and Dijemeni outline several good discussion points regarding the practicality of creating an ideal scoring system and comparing results across centers.

First, it is nearly impossible to compare results across centers without a universally accepted method of scoring drug-induced sleep endoscopy (DISE) results. This is why the review emphasized the need for creating an ideal grading scale that would hopefully be accepted and used by multiple institutions. Difference in sedation techniques and dose administration should also be standardized, although this was beyond the scope of the review.

This brings us back to what an ideal DISE scoring system actually is. While the plethora of scoring systems can seem intimidating, newer systems in the pediatric world appear to be building on the limitations of previous systems. However, we agree that work by leaders in the field will be needed to standardize across institutions. In addition, a referential DISE scoring system would be ideal to assist both pediatric and adult practitioners alike in standardizing scoring.

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References