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Title: Clinical use of the fatigue severity scale on obstructive sleep apnoea patients

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Body: Introduction-Current obstructive sleep apnoea (OSA) definition includes daytime fatigue as a relevant symptom. The use of scales might be of help characterizing these subjective symptom allowing quantification and standardization as well as evaluation of treatment response. Aim-To evaluate the relation between fatigue scores and apnoea-hypopnoea index(AHI) and the impact of APAP treatment in that symptom. Methods-All patients with suspected OSA referred to our center between Feb-Mar 2012 were considered eligible. During first the appointment patients completed Fatigue Severity Scale (FSS) and Epworth Severity Scale (ESS) questionnaires, clinical history was collected and a polygraphic cardiorespiratory sleep study performed. If patients were started on APAP treatment with good compliance (>70%/days, >4hours/night) after 3 months of treatment the FSS and ESS questionnaires were repeated. Results-88 patients were included, 71.6% were male, with a mean age of 51.9±13.4 years. Mean values of FSS and ESS questionnaires were 34.64±14.5 and 8.47±5.0, respectively. In 24 (27.3%) patients OSA was excluded, OSA was diagnosed in 64 patients being mild in 25 patients (28.6%), moderate in 20 (22.7%) and severe in 19 (21.6%) patients. A statistically significant correlation was found between FSS score and AHI (r=0.263; p=0.05). Those patients with confirmed OSA but without excessive daytime sleepiness (ESS<10) (n=44), 43.2% had FSS>36. After 3 months of adequate APAP therapy (n=27) a significant reduction of FSS (p=0.004) and ESS (p=0.035) scores was found. Conclusion-The Portuguese version of the Fatigue Severity Scale seems to be helpful evaluating symptoms related to OSA, specially monitoring the impact of APAP treatment.