

# Assessing Excessive Daytime Sleepiness (EDS) Is an Important Measure for Quality Patient-Centered Care

According to the American Academy of Sleep Medicine (AASM), one of the major objectives of narcolepsy treatment should be to alleviate daytime sleepiness, with the goal of producing the “fullest possible return of normal function for patients at work, at school, at home, and socially.”<sup>1</sup>

To aid in your conversations with patients, consider asking the following questions<sup>2,3</sup>:

Do you still...



Fight to stay awake and alert throughout the day?



Feel a constant need to sleep that you just can't shake?



Feel likely to doze off in everyday situations like when you are at work, or riding in a car?



Wake up feeling refreshed, but it doesn't last?

## Administer the Epworth Sleepiness Scale (ESS) at Every Visit

AASM-recommended measures of the quality of patient-centered care include the assessment of sleepiness with a validated scale, such as the ESS, at every visit and documenting any change from baseline.<sup>4,5</sup>

- The ESS is an 8-item questionnaire by which patients rate their perceived likelihood of falling asleep during usual daily activities.<sup>3</sup>
- Each of the 8 items on the ESS is rated from 0 (would never doze) to 3 (high chance of dozing), with a maximum potential score of 24.<sup>3</sup> ESS scores greater than 10 are indicative of EDS.<sup>6,7</sup>

### Interpreting ESS Scores<sup>7</sup>

**Normal Daytime  
Sleepiness**

ESS score  $\leq 10$

**Mild  
EDS**

ESS score 11-12

**Moderate  
EDS**

ESS score 13-15

**Severe  
EDS**

ESS score 16-24

### References

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6. Johns M, Hocking B. *Sleep*. 1997;20(10):844-849.
7. Johns M. About the ESS. <http://epworthsleepinessscale.com/about-the-ess/>. Accessed August 11, 2019.



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US-WAK-2000106/May 2020

[Download an editable form of the ESS](#) to send to your patients for completion before each visit