Background: Snoring is the most common manifestation of Obstructive Sleep Apnea (OSA), characterized by episodes of upper airway obstruction during sleep. The gold standard examination for OSA is polysomnography (PSG). The Snoring, Tiredness, Observed apnea, high blood Pressure (STOP)-Body Mass Index (BMI), Age, Neck Circumference, and Gender (BANG) questionnaire is a screening tool to predict whether snoring patient had an OSA. The Apnea Hypopnea Index (AHI) is the number of apneas and hypopneas per hour. This index has been used to define the severity of sleep apnea syndrome.

Objective: To determine the correlation between STOP-BANG questionnaire score and AHI in snoring patient who underwent PSG at Saiful Anwar General Hospital Malang.

Patients and Methods/Material and Methods: This retrospective study was conducted in snoring patients who underwent PSG at Saiful Anwar General Hospital Malang from 2014 to 2016. The correlation between STOP-BANG questionnaire and AHI were analyzed using a Spearman’s correlation.

Results: There were 32 patients involved in this study. The majority of patient is male (53.1%), STOP-BANG questionnaire with intermediate risk is 18 patients (56.3%), and moderate OSA are 12 patients (37.5%). There was significant correlation between STOP-BANG questionnaire and AHI (p<0.05).

Conclusion: There was significant correlation between STOP-BANG questionnaire and AHI in snoring patients who underwent PSG at Saiful Anwar General Hospital Malang Indonesia.

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SHIFT 1 - SLEEP DISORDERS
Neutral or positive mood are associated to non-restless legs syndrome (RLS) movements
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Background: RLS is a prevalent and distressing disease diagnosed upon patient’s complaints. Although the International RLS study group provides strict criteria to improve an accurate diagnosis, people and non-specialized health professional still confuse RLS with some movements frequently found in people without RLS. We attempted to classify those reported movements according to the moving joint, side and posture of the legs, and mood associated to movement.

Results: Sleep specialists reported 12 most frequent possible movements people without RLS reports while describing their suspected RLS. We classified them according to the moving joint as foot based, knee based, hip based, and combined. Regarding the side, movements were unilateral or bilateral. Legs posture during movements were:

Figure 1.