Title The place of and conditions for carrying out polysomnography and respiratory

polygraphy in sleep disorders

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Reference ISBN number 978-2-11-128554-5, link to full report: http://www.has-sante.fr/portail/jcms/c 1056842/the-

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Aim

In the context of the medical control of healthcare spending, the aim of this assessment requested by the Caisse nationale d'assurance maladie des travailleurs salariés (CNAMTS [National Health Insurance fund for salaried workers]) is to specify the indications and non-indications for polysomnography and respiratory polygraphy and the conditions for carrying out these examinations.

Conclusions and results

The content of these two procedures was first defined and a distinction was made between medical and technical aspects of these examinations.

main indications and non-indications for polysomnography and respiratory polygraphy were listed for the following categories of sleep disorder: respiratory sleep disorders (including obstructive apnoea/hypopnoea syndrome), insomnia, hypersomnia, parasomnia, circadian rhythm disorders and sleep-related motor disorders. The following conditions for carrying out the examinations were specified:

- supervision methods: polysomnography and respiratory polygraphy can be carried out unsupervised, subject to certain conditions;
- interpretation of the examinations: it cannot be based solely on an automated analysis. Automated analysis can be only the first step in producing the final analysis of the examinations. It cannot replace a systematic manual analysis of the raw data for all parameters by a doctor with expertise in sleep medicine;
- presentation of the results: for each examination, a complete record must be produced by responsibility of the doctor who interprets the results; the report lists the main items that such a record must contain; and
- professional expertise: this has been specified for each of the parts (technical and medical) of the two procedures.

The results from the economic literature contained in this report did not provide any guidance for decisions regarding the place of polysomnography and respiratory polygraphy, or indeed much simpler examinations consisting of just one or two measurements.

The detailed conclusions of this assessment report can be consulted in the short text published on the HAS website.

Methods

This is a study based in part on a critical analysis of the empirical scientific literature (guidelines, technological assessments, systematic reviews) published between January 1990 and December 2011, and on a review of the economic literature published between January 2000 and December 2011. An analysis was also made of the databases on medical procedures that were available and relevant to this subject (prescription, reimbursement, etc.). This study is also based on the well-argued position of a multidisciplinary working group of 16 experts. The report was reviewed by group of 20 experts. The report was examined by the Commission d'évaluation économique et santé publique (CEESP) and the Commission nationale d'évaluation des dispositifs médicaux et des technologies de santé (CNEDiMTS), then validated by the HAS Board.

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