Introducing a New Classification for Drug Induced Sedation Endoscopy (DISE):
PTLTbE System

Nish Mehta, Rishi Mandavia, Henry Zhang, Zi-Wei Liu, Bhik Kotecha, Vik Veer

Background

Drug induced sedation endoscopy (DISE), was first described by Croft & Pringle in 1991 and it has since become one of the most widely used methods of investigating the upper airway during sleep worldwide. Numerous classification systems have been described, but no one system has been agreed upon. The authors believed there was a niche for a new classification system in which the inter observer reliability was high whilst still providing the information needed to communicate the obstructive level clearly to the reader

Objectives

To assess the benefit of a new classification system for DISE

Methods

Perceived ambiguity appeared to be most prevalent issue in many of the classification systems for juniors. For this reason a visual classification system was adopted as it seemed to provide the easiest method of remembering the system. PTLTbE (Palate, Tonsils, Lateral pharyngeal wall, Tongue base, Epiglottis), was finally decided upon as the name of the classification system. Class 0 in any of the levels denotes no obstruction or normal so P0 T0 L0 Tb0 E0 would be considered a completely normal examination with increasing severity from class 0 to class 2 at each level.

Results

A statistical package (IBM SPSS statistics version 24) was used to analyse the interobserver reliability agreement between 16 assessors on 5 different DISE videos. In assessing the presence of collapse at different levels of upper airway collapse the overall kappa coefficient was 0.873.

Conclusions

PTLTbE classification has shown to have an excellent interobserver agreement across 16 different assessors when assessing 5 DISE videos.