수면다원검사의 움직임 규칙



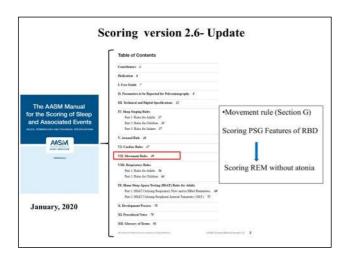
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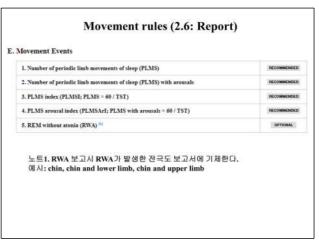
부산의대 신경과학교실

Movement rule

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Movement rules (Version 2.5->2.6)

- · A. Technical specifications
- B. Scoring Periodic Limb Movements in Sleep (PLMS)
- C. Scoring Alternating Leg Muscle Activation (ALMA)
- D. Scoring Hypnagogic Foot tremor (HFT)
- E. Scoring Excessive Fragmentary Myoclonus (EFM)
- F. Scoring Bruxism
- G. Scoring PSG Features of REM Sleep Behavior Disorder (RBD)
 - ->Scoring REM Without Atonia (RWA)
- H. Scoring the PSG Features of Ryhthmic Movement Disorder



Scoring Periodic Limb Movements in Sleep (PLMS)

1. Define a significant Leg movement(LM)

a. The minimum duration of a LM event is 0.5 seconds

b. The maximum duration of a LM event is 10 seconds

c. The minimum amplitude of a LM event is an 8µV increase in EMG voltage above resting EMG (duration of at Least 0.5 seconds)

d. The timing onset of the onset of a LM event is defined as the point at which there is an 8µV increase in EMG voltage above resting EMG

e. The timing of the ending of a LM event is defined as the start of a period lasting at least 0.5 seconds during which EMG does not exceed 2µV above resting EMG.

Onset threshold

Onset threshold

Onset threshold

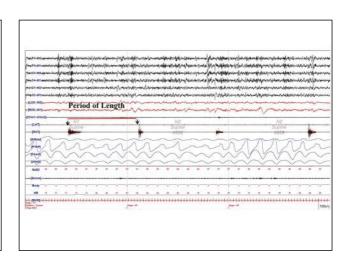
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2. Define a PLM series

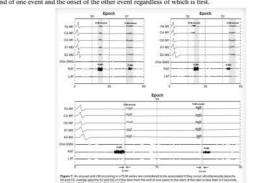
- a. The minimum number of consecutive LM events needed to define a PLM series is 4LMs
- b. The period of length between LMs (defined as the time between onsets of consecutive LMs) to include them as part of a PLM series is 5 to 90 seconds.
- c. Leg movements on 2 different legs separated by less than 5 seconds between movement onsets are counted as a single leg movement. The period length to the next LM following this group of LMs is measured from the onset of the first LM to the onset of the next.



양쪽 하지의 근전도에서 관찰된 처음 2개의 LMs은 5초 미만의 간격을 두고 있어 1개로 간주하고, 각 LM 사이의 간격(Period length)은 첫번째 LM과 3 번째 LM의 시작을 기준으로한다.

3 PI M associated arousals

An arousal and a limb movement that occur in a PLM series should be considered associated with each other if they occur simultaneously, overlap, or when there is < 0.5 Secs between the end of one event and the onset of the other event regardless of which is first.



4. LM and breathing events

2007 년

-> An LM should not be scored if it occurs during a period from 0.5 seconds preceding an apnea or hypopnea to 0.5 seconds following an apnea or hypopnea

2012 년 (V 2.0)

-> An LM should not be scored if it occurs during a period from 0.5 seconds preceding an apnea or hypopnea, RERA or sleep-disordered-breathing event to 0.5 seconds following an apnea or hypopnea

2017년 (V 2.4)

-> An LM should not be scored if it occurs during a period from 0.5 seconds preceding an apnea or hypopnea, RERA or 0.5 seconds following an

apnea or hypopnea

Stage N2 Stage W Stage N1

PLMS를 계산할 때 중간에 Waking 이 있어도 Waking이 90초 미만으로 period length 기준을 만족하면 Waking보다 선행하는 LM을 포함하여 같은 PLMS series로 간주한다. 즉 그림에서 5개의 LM이 있으나 4번째 waking에 있는 LM은 PLM 수로 포함하여 계산하지 않는다. 나머지 4개의 LM만 동일한 PLM series에 있는 PLM 수로 포함하여 계산한다. •Note 1. Limb movement에 사용된 근전도 진폭의 정의는 안정기 상태(resting EMG) 에서 근전도 진폭이 $10\,\mu V$ 를 넘어서 얻어진 게 아니어야 한다.

•Note 2.Periodic Limb Movements(PLM) 가 10초 미만 간격으로 일어나고, 각각의 PLM이 각성을 동반한다면 처음 동반되는 각성만 PLM과 관련된 각성으로 간주한다. 그러나 2개의 LM은 5초 이상 간격을 두고 발생하였다면 2개로 간주한다.

Scoring Alternating Leg Muscle activation (ALMA)-optional

- ALMA must have at least 4 muscle burst
- The minimum ALMA frequency is 0.5Hz
- The maximum ALMA frequency is 3.0Hz

Note 1. ALMAs alternating between legs

Note 2. The usual range for duration of ALMA is 100-500 msec.

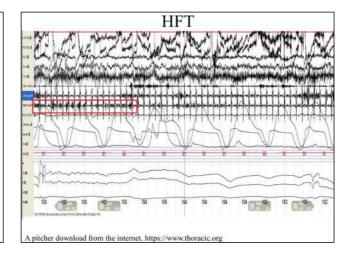
Note3. ALMA may simply be a benign movement phenomenon associated with characteristics EMG patterns as there have been no reported clinical consequences.

Scoring Hypnagogic Foot Tremor(HFT) -optional

- HFT must have at least 4 muscle burst.
- The minimum HFT frequency is 0.5Hz
- The maximum HFT frequency is 4.0Hz

Note1. The usual range for duration of hypnogogic foot tremor is 250-1,000msec.

Note2. HFT may simply be a benign movement phenomenon associated with characteristic EMG patterns as there have been no reported clinical consequences.



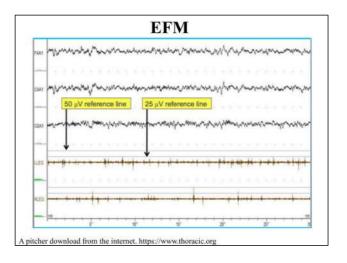
Scoring Excessive Fragmentary Myoclonus (EFM)-optional

- EMG burst last less than 150 msec
- At least 20 minutes of NREM sleep with EFM must be recorded.
- · At least 5 EMG potentials per minute be recorded.

Note1. EFM may be a benign movement phenomenon associated with a characteristic EMG pattern as there have been no reported clinical consequences

Note2. In many cases no visible movements are present. Gross, Jerk-like movements across the joint spaces are not observed. When minor movements across a joint space is present, the movement resembles the small twich like movements of the fingers, toes, and the corned of the mouth intermttenrly seen in REM sleep in normal individuals.

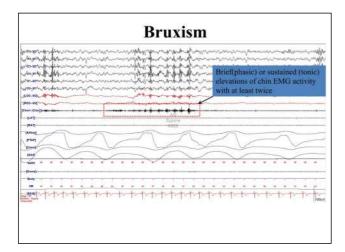
Note3. In some cases when visible movement is present, the EMG burst duration may be >150 msec.



Scoring Bruxism

- Brief(phasic) or sustained (tonic) elevations of chin EMG activity with at least twice the amplitude of background EMG
- Brief elevation of chin or masseter EMG: 0.25-2seconds in duration, at least 3 in a regular sequences
- Sustained elevations of chin or masseter EMG >2sec
- At least 3seconds of stable background chin EMG before a new episode of bruxism
- Can be scored reliably by audio in combination with PSG by a minimum 2audible tooth grinding episodes/ night of PSG in the absence of epilepsy

Masseter muscle for detecting bruxism Figure 4. Placement of electrodes on the masseter muscle for detecting broader for the content of selectrodes on the masseter muscle for detecting broader for some for som



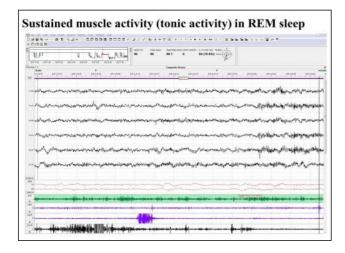
Scoring REM Without Atonia (RWA): Version 2.5

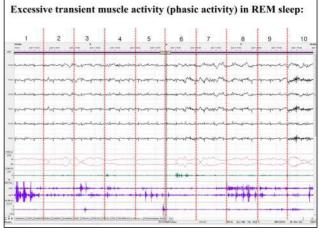
- Sustained muscle activity (tonic activity) in REM sleep
- : Chin

at least 50% of the duration of the epoch having a chin EMG amplitude greater than the minimum amplitude of NREM

Excessive transient muscle activity (phasic activity) in REM sleep
 Chin and limb

at least 5(50%) of the mini-epochs contains bursts of transient muscle activity. Excessive transient muscle activity bursts are 0.1-5 seconds and at least 4 times as high in amplitude as the background EMG activity





Scoring REM Without Atonia (RWA): Version 2.6

- Sustained muscle activity (tonic activity) in REM sleep
 - : Chin

at least 50% of the duration of the epoch having a chin EMG amplitude at least two times greater than the stage of R atonia level (or lowest amplitude in NREM, if no stage of R atonia is present), Multiple segments may contribute to the total duration, but each segment must be greater than Seconds

- Excessive transient muscle activity (phasic activity) in REM sleep
 : Chin and limb
 - at least 5(50%) of the mini-epochs contains bursts of transient muscle activity. Excessive transient muscle activity bursts are 0.1-5 Secs and amplitude at least two times greater than the stage of R atonia level (or lowest amplitude in NREM, if no stage of R atonia is present)
- Any chin EMG activity
 activity with a minimum amplitude two times greater than the stage of R atonia level
 (or lowest amplitude in NREM, if no stage of R atonia is present) without regard duratic
 activity (including burst of 5–15 Secs)

Scoring REM Without Atonia (RWA): Version 2.6

- · Sustained muscle activity (tonic activity) in REM sleep in chin EMG (recommended)
- Excessive transient muscle activity (phasic activity) in REM sleep in chin and limb EMG(recommended)
- At least 50% of 3 secs mini-epochs contain any chin activity (defined as in rule any chin
 EMG activity) or limb activity (burst of EMG activity 0.1-5secs in duration and
 amplitude at least two times greater than the stage of R atonia level or lowest amplitude
 in NREM, if no stage of R atonia is present) (acceptable)

Scoring RWA index as the % of stage R epochs: Version 2.6 - optional

- Note 1. The definition of sustained and transient muscle activity are based on duration rather than morphology.
- Note 2. If a PLM is scored as part of a PLM series, it should not be counted in determining if
 an epoch has RWA
- •Note 3. Based on SINBAR Group recommend in criteria; Sleep 2012;25(6):835-847
- Note 4. Epoch containing RWA with sustained chin activity as defined above may not meet criteria for R, but in these case, the epoch can still be scored as stage R if other criteria for stage R are met or if the epoch is contiguous with an epoch scored as stage R.
- Note 5. If electing to measure RWA, the leads used to determine the presence of RWA should be included in the PSG report(e.g., chin, chin and limb, chin and upper limb)

| Table 3. Concentrate of PODAS propriete Internate IRID and contrate | Valuation | Valuat

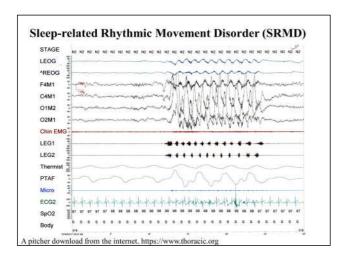
Flexor digitorum superficialis Figure 2: Placement of digitarian superficials to descript tements by the description of the desc

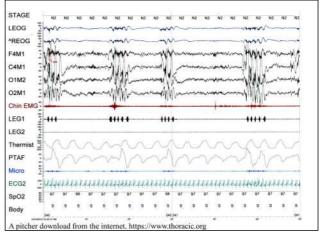


Scoring the PSG Features of Rhythmic Movement Disorder

- •The minimum frequency for scoring is 0.5Hz
- •The maximum frequency for scoring 2.0Hz
- •The minimum number required for a cluster or rhythmic movement: 4
- •The minimum amplitude: 2times the background EMG activity

Scoring the PSG Features of Rhythmic Movement Disorder - **O 2018 American Academy of Sleep Medicine. All rights reserved. Rhythmic movement disorder 평가 시 paraspinal muscle에 부착하는 전국의 위치





정리

- Movement rule은 이전과 비교하여 version 2.5에서
 any chin EMG activity & RWA의 정량화에 대한 내용
 이 추가 되었다.
- 2. Movement rule에 나와 있는 event는 수면다원검사후 비디오 영상이나 소리 확인이 필요하다.