

Assessing Ongoing Symptoms in Your Patients With Narcolepsy



Narcolepsy impacts approximately

170,000

people in the US,

but recognizing ongoing symptoms
may be challenging¹⁻⁴

The questions on the following pages may help you evaluate how excessive daytime sleepiness (EDS) or cataplexy could be interfering with your patients' daily lives

[Learn more](#) about EDS and cataplexy

Excessive Daytime Sleepiness

EDS may manifest in different ways and interfere with patients' daily lives^{4,5}

- Inability to stay awake and alert throughout the day⁴
- Lapses in concentration^{4,6}
- Patients may describe as "tiredness" or "fatigue"^{4,6}
- Constant need for sleep⁴
- Unintended lapses into drowsiness or sleep⁴
- Automatic behaviors associated with microsleep episodes (eg, writing gibberish)^{4,7}

Ask your patients: Do you...



Fight to stay awake and alert throughout the day?⁴



Feel a constant need to sleep that you just can't shake?⁴



Feel like you'll doze off in everyday situations, like when you're at work, or riding in a car?^{4,8}



Wake up feeling refreshed, but it doesn't last?⁴

If your patients answer yes to any of these questions...

**Consider using the Epworth Sleepiness Scale (ESS)
to assess their daytime sleep propensity⁸**



The AASM recommends assessing sleepiness with a validated scale, such as the ESS, at every visit and documenting any change from baseline^{9,10}

Cataplexy

Cataplexy occurs in up to two-thirds of people with narcolepsy, but manifestations may differ widely among patients^{4,11,12}

Examples of cataplexy may include:

- Drooping of the eyelids¹³
- Muscle weakness in the face or neck^{4,13}
- Mouth opening or tongue sticking out¹³
- Facial jerks/grimaces^{4,13}
- Knee buckling^{4,14}
- Patients may describe as “losing muscle control,” “clumsiness,” or loss of grip^{3,14,15}

Ask your patients: Do you...



Experience sudden periods of muscle weakness with strong emotions or in certain situations?^{4,16,17}



Notice weakness in your face or neck, like jaw sagging or eyelids drooping?^{4,13}



Ever feel your knees buckle or give out?^{4,18}



Sometimes drop things or feel clumsy?^{3,18}

If your patients answer yes to any of these questions...

Talk to them about what cataplexy is and assess how cataplexy might be affecting their daily lives



Psychophysiological studies suggest that people with narcolepsy with cataplexy may suppress their own emotions to avoid triggering cataplexy^{19,20}



Talk to your patients with narcolepsy about how their symptoms like **excessive daytime sleepiness** or **cataplexy** are affecting them

[Find tips for living with narcolepsy to share with your patients](#)

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