

Purpose The scale assesses the severity of insomnia using diagnostic criteria set forth by the International Classification of Diseases (ICD-10). The eight-item questionnaire evaluates sleep onset, night and early-morning waking, sleep time, sleep quality, frequency and duration of complaints, distress caused by the experience of insomnia, and interference with daily functioning. A shorter version of the questionnaire, consisting of the first five items alone, may also be used.

Population for Testing The instrument has been validated in patients with insomnia and with control participants aged 18–79 years.

Administration Requiring between 3 and 5 min for administration, the scale is a self-report, pencil-and-paper measure.

Reliability and Validity An initial study evaluating the psychometric properties of both the long and shorter versions of the scale [1] found an internal consistency ranging from .87 to .89 and a test-retest reliability of .88 – .89. In terms

of the instrument's validity, results on the AIS correlated highly with scores obtained on the Sleep Problems Scale (.85–.90).

Obtaining a Copy A copy can be found in the developers' original article [1].

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Scoring Respondents use Likert-type scales to show how severely certain sleep difficulties have affected them during the past month. Scores range from 0 (meaning that the item in question has not been a problem) to 3 (indicating more acute sleep difficulties). Developers Soldatos and colleagues [2] suggest a cutoff score of 6, which correctly distinguished between insomnia patients and controls in 90% of cases.

Athens Insomnia Scale

Instructions: This scale is intended to record your own assessment of any sleep difficulty you might have experienced. Please, check (by circling the appropriate number) the items below to indicate your estimate of any difficulty, provided that it occurred at least three times per week during the last month.

Sleep induction (time it takes you to fall asleep after turning-off the lights)

0: No problem 1: Slightly delayed 2: Markedly delayed 3: Very delayed or did not sleep at all

Awakenings during the night

0: No problem 1: Minor problem 2: Considerable problem 3: Serious problem or did not sleep all

Final awakening earlier than desired

0: Not earlier 1: A little earlier 2: Markedly earlier 3: Much earlier or did not sleep at all

Total sleep duration

0: Sufficient 1: Slightly insufficient 2: Markedly insufficient 3: Very insufficient or did not sleep at all

Overall quality of sleep (no matter how long you slept)

0: Satisfactory 1: Slightly unsatisfactory 2: Markedly unsatisfactory 3: Very unsatisfactory or did not sleep at all

Sense of well-being during the day

0: Normal 1: Slightly decreased 2: Markedly decreased 3: Very decreased

Functioning (physical and mental) during the day

0: Normal 1: Slightly decreased 2: Markedly decreased 3: Very decreased

Sleepiness during the day

0: None 1: Mild 2: Considerable 3: Intense

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References

1. Soldatos, C. R., Dikeos, D.G., & Paparrigopoulos, T.J. (2000). Athens insomnia scale: validation of an instrument based on ICD-10 criteria. *Journal of Psychosomatic Research*, 48(6), 555–560.
2. Soldatos, C. R., Dimitris, G. D., & Paparrigopoulos, T.J. (2003). The diagnostic validity of the Athens insomnia scale. *Journal of Psychosomatic Research*, 55, 263–267.

Representative Studies Using Scale

- Szelenberger, W., & Niemcewicz, S. (2000). Severity of insomnia correlates with cognitive impairment. *Acta Neurobiologiae Experimentalis*, 60(3), 373.
- Novak, M., Molnar, M., Ambrus, C., Kovacs, A., Koczy, A., Rempert, A., Szeifert, L., Szentkiralyi, A., Shapiro, C. M., Kopp, M. S., & Mucsi, I. (2006). Chronic insomnia in transplant recipients. *American Journal of Kidney Diseases*, 47(4), 655–665.