

# Accepted Manuscript

What should we tell our worried patients with insomnia about blood pressure?

Julio Fernandez-Mendoza, Ph.D., CBSM

PII: S1087-0792(18)30108-4

DOI: [10.1016/j.smr.2018.07.001](https://doi.org/10.1016/j.smr.2018.07.001)

Reference: YSMRV 1114

To appear in: *Sleep Medicine Reviews*

Received Date: 1 July 2018

Accepted Date: 2 July 2018

Please cite this article as: Fernandez-Mendoza J, What should we tell our worried patients with insomnia about blood pressure?, *Sleep Medicine Reviews* (2018), doi: 10.1016/j.smr.2018.07.001.

This is a PDF file of an unedited manuscript that has been accepted for publication. As a service to our customers we are providing this early version of the manuscript. The manuscript will undergo copyediting, typesetting, and review of the resulting proof before it is published in its final form. Please note that during the production process errors may be discovered which could affect the content, and all legal disclaimers that apply to the journal pertain.



**What should we tell our worried patients with insomnia about blood pressure?**

In this issue of Sleep Medicine Reviews, Jarrin and colleagues [1] report on a systematic review of the cross-sectional and longitudinal association between insomnia, hypertension and abnormal blood pressure (BP) levels across 64 studies comprised of 26 to 162,121 adults ages 18-100 years old. The authors' criteria allowed for the inclusion of studies with different designs (e.g., epidemiologic, case-control), comorbid conditions, and definitions of insomnia or hypertension. This systematic review is timely and very much needed, given that only one meta-analysis had been published to date on the increased risk of incident hypertension associated with any form of insomnia [2]; however, it did not allow for disentangling the critical issues discussed by previous investigators [3-5] such as the definition of insomnia, its chronicity, its objective severity, the measurement of BP and definition of hypertension, and the presence of important confounders in previous studies [e.g., sleep disordered breathing (SDB)]. Although readers will find this systematic review dense, given its detailed analysis of the methodological aspects of the studies, they will also find that this review not only provides a deeper understanding of the state-of-the-science but also insight into what questions remain unanswered and what type of studies still need to be conducted in this area of sleep and public health research.

Jarrin and colleagues found, after a systematic review of the broad literature on the topic, that there is a strong association with hypertension when insomnia is frequent, chronic, and/or accompanied with short sleep duration or objective markers of arousal [1]. As the authors discuss, these findings appear to be in a continuum, so that the deeper the phenotyping of insomnia (i.e., severity, frequency, chronicity of symptoms and availability of objective sleep duration or other physiologic markers of arousal), the stronger the association with hypertension. Few studies have factored-in a large number of these phenotypic dimensions while controlling

Download English Version:

<https://daneshyari.com/en/article/8963406>

Download Persian Version:

<https://daneshyari.com/article/8963406>

[Daneshyari.com](https://daneshyari.com)