

The Association Between Habitual Sleep Duration and Blood Pressure Control in United States (US) Adults with Hypertension [Letter]

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Dear editor

We have read the research article entitled “The Association Between Habitual Sleep Duration and Blood Pressure Control in United States (US) Adults with Hypertension” written by Oguguet et al.¹ We would like to congratulate the authors on this successful article and make some contributions. There are four strengths of this study: 1) it underscores the importance of adequate sleep as a potential factor in managing hypertension, which is a common and often difficult-to-control condition. 2) this study states that chronic sleep duration of less than 6 hours is associated with reduced chances of controlling blood pressure. This provides valuable information that can inform clinical recommendations and encourage healthcare providers to assess and discuss sleep habits with hypertensive patients. 3) this study supports the idea that interventions aimed at increasing sleep duration may benefit individuals with hypertension, potentially resulting in better blood pressure control and overall cardiovascular health. 4) This study considered a variety of potential confounders, including demographic, socioeconomic, and health factors, which strengthens the validity of its findings and provides a deeper understanding of the relationship between sleep duration and blood pressure control.

However, we identified two limitations of this study that need to be addressed in future research: 1) this study has identified, in particular, differential associations between sleep duration, blood pressure (BP) control, and demographic factors such as age and gender. For example, although experimental studies show an association between sleep restriction and increased blood pressure, information regarding how differences in age or gender influence the association between sleep duration and blood pressure control in individuals with hypertension is limited. In addition, the association between short sleep time and hypertension risk appears to decrease with age and is stronger in women than men. To address this, future research should focus on longitudinal studies (such as periodic data collection, analysis of changes, and understanding causal relationships) and specific demographics (such as different ages, gender differences, different ethnic groups, different socioeconomic statuses, and geography) which can provide more detailed insight into how sleep duration impacts blood pressure control across different age groups and gender. This can help design interventions more effectively.^{2–6} 2) this study shows a relationship between short sleep and hypertension. Future research should incorporate strategies (such as a regular sleep schedule, limited caffeine and nicotine consumption, a comfortable sleep environment, and limited use of electronic devices) to support adequate sleep duration, which may be a valuable adjunct to hypertension management modalities.^{7,8} This will require a change in clinical practice to include sleep health as a standard component of hypertension care.

In conclusion, this study provides important insights into the potential role of sleep duration in supporting hypertension management.

Disclosure

The author reports no conflicts of interest in this communication. The author alone is responsible for the content and writing of the paper.

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