

LETTERS TO THE EDITOR

Reply to “Impact of obstructive sleep apnea on left ventricular mass index in men with coronary artery disease”

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We thank Dr. Huang and colleagues¹ for their attempt to use “hypoxic burden”^{2,3} to assess the impact of obstructive sleep apnea on the left ventricular mass index in men with coronary artery disease. We caution the readers, however, that the hypoxic burden developed by Huang et al in this paper¹ is substantially different from the original hypoxic burden developed by our lab^{2,3} and referenced by Huang.¹ For example, for a similar sleep apnea severity in the Sleep Heart Health Study (SHHS) [n = 5,792; apnea-hypopnea index = 13.1 (6.7–23.8) compared to 12.7 (6.1–26.2) events/h in Huang et al¹], the values for hypoxic burden are vastly different [SHHS: 35.3 (18.7–61.2) vs 7.9 (2.4–24.7) % min/h in Huang et al.¹]. This suggests a very different methodology for the determination of hypoxic burden by Huang et al than was used in our previous studies. Thus, the hypoxic burden–related findings in Huang et al¹ should be interpreted with caution until their methods for calculating this metric are fully understood.

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DISCLOSURE STATEMENT

All authors have seen and approved the manuscript. Work was performed at Brigham and Women's Hospital and Harvard Medical School. The authors report no conflicts of interest.