

Manuscript Number: 87197 R1

World Journal of Clinical Cases

High Risk for Obstructive Sleep Apnea and Risk of Hypertension in Military Personnel: The CHIEF Sleep Study

Dear Editor:

Thank you very much for the opportunity to revise our manuscript. We have revised our paper using point-by-point response to the reviewers' comments and highlighted in red as follow.

Dear Author(s), Please make the following changes to your paper:

- (1) The title of the article should be revised to better reflect the purpose of the current investigation.

**Response**

Thank you very much for your kindly comment.

The title has been adjusted as “High Risk for Obstructive Sleep Apnea and Risk of Hypertension in Military Personnel: The CHIEF Sleep Study” as you suggested.

- (2) When they first appeared in the paper, some abbreviations used in the study abstract were not clarified. I hope that this flaw be fixed, whether at the level of the study abstract or elsewhere in the paper.

**Response**

Thank you very much for your kindly comment.

We have revised the abbreviations throughout the paper as you suggested.

- (3) The study's introduction must be written in three paragraphs and include the following information: \*The first paragraph discusses the significance of the current study. \*The second paragraph describes the knowledge gap that the current study is attempting to fill. \*The third paragraph describes the present research problem and how it will be solved within the context of the current study's purpose.

**Response**

We have rewritten the Introduction section as you suggested.

- (4) This sentence appears in the paper's statistical analysis section: The study design and protocol were approved by the Mennonite Christian Hospital Ethics Committee (No. 16-05-008) in Hualien, Taiwan, which was performed in accordance with the Helsinki Declaration, as revised in 2013. All participants were informed the nature of the study and gave written informed consent, should be removed from this section and added to the study population section.

**Response**

We have moved the statement from the statistical analysis section to the end of the study population section as you suggested.

- (5) Instead of opening each paragraph with the term Table, as shown in the paper's results section, rephrasing of the texts in the entire results section is required.

**Response**

Our paper has received professional English editing by the American Journal of Experts (AJE) and we believed that the content of the results section has been revised as you suggested.

- (6) What are the current study's strengths? What are the current study's possible future directions? Please respond to these two questions in the discussion section's final paragraph.

**Response**

We have responded to the two questions in the discussion section's final paragraph as you suggested.

“Polysomnography should be used to define OSA for its relationship with hypertension risk in future studies. In contrast, our study had some strengths. Our study population was obtained from the military and had similar living circumstances, e.g., diet and training status, possibly minimizing the naïve bias. Second, since our health examinations were comprehensive, the adjustments in the models were believed to be accurate.”

- (7) The conclusion section should be modified to clarify whether or not the current study's aim was met, i.e. whether or not the current research problem was solved.

**Response**

We have revised our conclusion section as you suggested.

“Our findings suggest that in Asian military young adults, high risk for OSA, as assessed by the Berlin Questionnaire, accounted for 8.0 % of the population and was associated with a higher probability of uncontrolled BP levels, defined by the JNC 7 criterion. Notably, the association was not related to obesity or older age. As the specific population of Asian military subjects we studied, how night activity confounded the association in the military requires further study.”

- (8) Some references should be changed because they are out of date. Because there are 36 references, I recommend using just references from 2023 and at least five years before that, while removing any redundant old references that do not assist the current study topic.  
//Good Luck//

**Response**

Thank you very much for your kindly comment.

We have updated many of the latest references as you suggested.