Effects of periodic breathing were reported [8]. Blood pressure adverse effect on stroke volume (SV), central sleep apnea appears opposite hemodynamic effects: whereas OSA appears to have an ing to Yumino et al., obstructive and central respiratory events have dominant cause of daytime increases in blood pressure [10]. Notably, intermittent hypoxia (not repetitive arousals) appears to be theasion is common and strongly associated with DM2. Therefore, epide-

sion, and to identify the driving factor(s), using data from 679 pa-
tients. Despite the use of more antihypertensive drugs in these
diseases and included a huge number of patients.

To conclude, the paper discussed emphasizes the importance of continuous investigation of the interaction among diabetes, SDB, periodic breathing, obesity and blood pressure, and sheds light on the association between periodic breathing and blood pressure values above the currently recommended target for diabetes patients. This study represents a new horizon, but many questions remain. Alto-
gether, we are one step further in the battle to optimize blood pressure control in DM2, and hence still in the quest to find the holy grail.

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Conflict of interest

The ICMJE Uniform Disclosure Form for Potential Conflicts of Interest associated with this article can be viewed by clicking on the following link: https://doi.org/10.1016/j.sleepx.2020.100015.

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