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**Sleep disorders increase the risk of nonalcoholic liver disease:**

**A nationwide population-based cohort study in Taiwan**

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**Objective:** There are several systematic reviews and meta-analyses on the relationship between sleep duration and the risk of nonalcoholic liver disease (NAFLD); however, the results are inconsistent. The aim of this study is to investigate the causal relationship between sleep disorder and NAFLD.

**Methods:** We conducted a population-based study using Taiwan National Health Insurance Research Database for the period from 2000 through 2013. We identified the patients with sleep disorders diagnosed in the three consecutive months during 2000 and 2005 and the equal number of patients without sleep disorders were randomly selected as the comparison cohort. The patients were followed up from the index date to the date of NAFLD diagnosed, loss follow-up, or the end of 2013. Cox proportional hazards regression models were used to estimate the risk of NAFLD for the sleep disorders cohort adjusted by sex, age, and comorbidities, such as diabetes mellitus, dyslipidemia, hypertension, ischemic heart disease, depression, and anxiety. We further plotted the cumulative incidence curves to describe the possibility of causal relationship.

**Results:** There were a total of 33,045 patients identified in the sleep disorders cohort. The crude and adjusted hazard ratio (AHR) of subsequent NAFLD in the sleep disorders cohort was 2.26 (95% confidence interval [CI] =1.92-2.67) and 1.78 (95% CI = 1.46-2.16). Other independent risk factors included male gender (AHR =1.31, CI= 1.12-1.54), age 40-59 years (AHR 1.49, CI= 1.21-1.82), and dyslipidemia (AHR 2.51, CI= 2.08-3.04). The cumulative incidence curves of sleep disorders cohort did not show the temporal relationship between event and effect, which might infer to “web of causation” instead of a ‘‘causal chain”.

**Conclusion:** Sleep disorders increase the risk of nonalcoholic liver disease, probably through a web of causation model.

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