Gac Sanit. 2026;40(S4):177

Gaceta Sanitaria

https://www.gacetasanitaria.org

386 - SEX-SPECIFIC ASSOCIATIONS OF SLEEP DISTURBANCES WITH INCIDENT DEPRESSION: EVIDENCE FROM THE SUN COHORT

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Resumen

Background/Objectives: Sleep disturbances may be involved in the development of depression. Evidence regarding sex-specific associations and longitudinal changes in sleep patterns is limited. Aim: To examine the prospective associations of sleep disturbances with incident depression in men and women from the SUN cohort.

Methods: Among 23,321 participants, we excluded those with short follow-up (< 2.75 years), prevalent or early-onset depression, use of sleep-inducing medications, outlier sleep duration (< 3 h or > 12 h), chronic diseases (diabetes, cardiovascular disease, or cancer), outlier BMI, or lack of follow-up (retention rate: 90.7%). The final sample included 16,512 participants. Sleep duration was classified as short (< 6 h), adequate (6-8 h), or long (> 8 h). Sleep disturbances included nap duration (none, < 30 min, ≥ 30 min), insomnia, apnea, and snoring. Changes in sleep duration between baseline and year 16 were categorized as unchanging, < 1 h, or > 1 h. Sex-stratified Cox proportional hazards models and adjusted for lifestyle, diet, psychosocial factors, and BMI, were used to estimate Hazard Ratios (HRs) and 95% confidence intervals (CIs).

Results: During 233,287 person-years of follow-up (median follow-up: 13.7 years), 1,043 incident depression cases occurred (306 men, 737 women). In men, short sleep (HR 0.76; 95%CI 0.35-1.64) and long sleep (HR 0.87; 95%CI 0.49-1.54) were not

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associated with depression risk. In women, short sleep (< 6 hours) was associated with increased depression risk (HR 1.50; 95%CI 1.04-2.16) while long sleep (HR 0.97; 95%CI 0.77-1.24) is not associated with depression. However, insomnia (Men HR 1.70; 95%CI 1.08-2.67; Women HR 1.44; 96%CI 1.08-1.93) was independently associated with a higher risk in both sexes. Changes in sleep duration over 16 years and other sleep disruptors were not associated with depression risk in either sex.

Conclusions/Recommendations: Insomnia was consistently associated with incident depression in both men and women. Short sleep duration increased risk only in women. These findings highlight the importance of assessing sleep quality and sex-specific differences in preventive strategies for depression.

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