List of variables

BMI:	Body mass index
PSQI:	Pittsburgh Sleep Quality Index score
bdi_ws:	Beck Depression Inventory score (without sleep-related items)
a_tst:	Total Sleep Time (min), first sleep laboratory night
b_tst:	Total Sleep Time (min), second sleep laboratory night
insomnia_type:	Difficulties to fall asleep (onset), difficulties to maintain sleep (maintenance), difficulties to fall asleep and to maintain sleep (mixed)
diabetes:	Type 2 diabetes (fasting plasma glucose level of ≥ 126 mg/dl, diabetes medication, or a previously established diagnosis) (1 = yes, 0 = no)
diabetes_med:	Patients who received diabetes medication (1 = yes, 0 = no)
glucose:	Fasting plasma glucose level
hypertension:	Hypertension (systolic blood pressure of ≥ 140 mm Hg, a diastolic blood pressure of ≥ 90 mm Hg, antihypertensive medication, or a previously established diagnosis) (1 = yes, 0 = no)
hypertension_med:	Patients who received antihypertensive medication (1 = yes, 0 = no)
systolic_RR:	Systolic blood pressure (mm Hg)
diastolic_RR:	Diastolic blood pressure (mm Hg)
a_sei:	Sleep Efficiency Index (%), first sleep laboratory night
b_sei:	Sleep Efficiency Index (%), second sleep laboratory night
a_sol:	Sleep onset latency (min), first sleep laboratory night
b_sol:	Sleep onset latency (min), second sleep laboratory night
a_waso:	Wake after sleep onset (min), first sleep laboratory night
b_waso:	Wake after sleep onset (min), second sleep laboratory night
a_noa:	Number of awakenings, first sleep laboratory night
b_noa:	Number of awakenings, second sleep laboratory night
a_arousal_index:	Arousal index (h^{-1}), first sleep laboratory night
b_arousal_index:	Arousal index (h^{-1}), second sleep laboratory night
a_apnea_index:	Sleep apnea index (h^{-1}), first sleep laboratory night
a_plmsa_index:	PLMS arousal index (h^{-1}), first sleep laboratory night
a_st1:	Stage 1 (% SPT), first sleep laboratory night
b_st1:	Stage 1 (% SPT), second sleep laboratory night
a_st2:	Stage 2 (% SPT), first sleep laboratory night

b_st2:	Stage 2 (% SPT), second sleep laboratory night
a_sws:	SWS (% SPT), first sleep laboratory night
b_sws:	SWS (% SPT), second sleep laboratory night
a_rem:	REM (% SPT), first sleep laboratory night
b_rem:	REM (% SPT), second sleep laboratory night
insomnia_duration:	Duration in years
erythrocytes:	Erythrocytes
haemoglobin:	Haemoglobin
haematocrit:	Haematocrit
mcv:	Erythrocyte mean corpuscular volume (MCV),
leukocytes:	Leukocytes
thrombocytes:	Thrombocytes
creatinine:	Creatinine
alt:	Alanine aminotransferase (ALT),
gammagt:	Gamma glutamyl transferase (γGT),
tsh:	Thyroid stimulating hormone (TSH)
alcohol:	(1 = yes, 0 = no)

The dataset is basis of the retrospective study “Insomnia with objective short sleep duration is associated with longer duration of insomnia in the Freiburg Insomnia Cohort compared to insomnia with normal sleep duration, but not with hypertension”.

Abstract

Study Objectives: To replicate the association between insomnia with objective short sleep duration and hypertension, type 2 diabetes and duration of insomnia.

Design: Retrospective case-control study.

Setting: Department of Psychiatry and Psychotherapy, Medical Center – University of Freiburg

Participants: 328 patients with primary insomnia classified according to DSM-IV criteria (125 males, 203 females, 44.3 ± 12.2 years).

Interventions: N/A

Measurements: All participants were investigated using polysomnography, blood pressure measurements, and fasting routine laboratory.

Results: Insomnia patients with short sleep duration (< 6 hours) in the first night of laboratory sleep presented with a longer duration of insomnia compared to those with normal sleep duration (≥ 6 hours) in the first night of laboratory sleep. Insomnia patients who were categorised as short sleepers in either night were not more likely to suffer from hypertension (systolic blood pressure of ≥ 140 mm Hg,

diastolic blood pressure of ≥ 90 mm Hg, or a previously established diagnosis). Data analysis showed that insomnia patients with objective short sleep duration were not more likely to suffer from type 2 diabetes (fasting plasma glucose level of ≥ 126 mg/dl, or a previously established diagnosis). However, the diabetes analysis was only based on a very small number of diabetes cases. As a new finding, insomnia patients who were categorised as short sleepers in either night presented with increases in liver enzyme levels.

Conclusions: The finding on insomnia duration supports the concept of two distinct sub-groups of insomnia, namely insomnia with, and without, objectively determined short sleep duration. However, our data challenges previous findings that insomnia patients with short sleep duration are more likely to suffer from hypertension.