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FROM THE EDITOR-IN-CHIEF

Right Ventricular Dysfunction in Hypertension, and the Risk and Remedies of Obstructive Sleep Apnoea among Young Persons

I have great pleasure in presenting this issue of the journal. In spite of the different challenges and obstacles including the difficult economic climate, we are continually striving to provide timely and consistent publications. We thank our editors, publishers, writers, and team members for their ongoing support and diligence. We also acknowledge the invaluable work of our esteemed reviewers.

In this edition, our readers may look forward to various excellent articles written by different authors from a variety of medical and surgical disciplines. These include, among several others, the report of the comparative study by Moronkola et al which assessed the impact of systemic hypertension on the structure and function of the right ventricle (RV) using transthoracic echocardiography. They enrolled 100 hypertensive individuals and 100 healthy controls and compared various RV parameters, including RV wall thickness, RV internal dimensions, tricuspid annular plane systolic excursion (TAPSE), right ventricular filling velocities, and RV systolic excursion velocity. Their findings revealed that hypertensive individuals exhibited significant structural and functional changes in the right ventricle, independent of other systemic complications.

The study serves as a reminder that, while the left ventricle tends to receive more attention in hypertensive patients due to its role in systemic circulation, the right ventricle can also

undergo significant changes. Right ventricular dysfunction has been shown to be an independent predictor of adverse outcomes in hypertensive patients, including heart failure, arrhythmias, and cardiovascular mortality.^{1,2} Assessing RV function can help identify individuals at higher risk of complications. Hence, investigating right ventricular dysfunction and abnormalities in hypertensive patients is crucial for risk stratification, treatment optimization, and monitoring of cardiac health, ultimately leading to improved outcomes and quality of life for affected individuals.¹

In another study by Karaye and colleagues, they examined the possible role of selenium deficiency as an independent risk factor for peripartum cardiomyopathy (PPCM). The study compared selenium levels and other pertinent parameters among PPCM patients and apparently healthy postpartum women. Selenium deficiency was independently associated with a 167-fold increase in the odds of PPCM, while unemployment and lack of formal education were also identified as independent risk factors. The findings suggest a potential justification for screening women of reproductive age for selenium deficiency, particularly in regions with high PPCM incidence. Additionally, the authors propose the need for appropriate clinical trials to evaluate the potential benefits of selenium supplementation in the prevention and treatment of PPCM.

The importance of addressing the issue of obstructive sleep apnoea (OSA) among young persons cannot be overemphasized given its potential impact on their cognitive function, mood, and overall quality of life. Untreated OSA in youth can lead to long-term health issues such as cardiovascular problems and impaired growth. Early detection and intervention are key to preventing these complications and improving their well-being. Oiwoh et al investigated the prevalence of obstructive sleep apnoea and its associated risk factors among young individuals aged 16-35 years in Ibadan, South Western Nigeria. The findings revealed a significant burden of OSA among the young population recruited from five tertiary institutions. Age and anxiety score were independently associated with sleep quality, while age, body mass index, neck cuff size, and depression score were associated with OSA risk. This sheds an important spotlight on OSA among young persons in this part of the world and highlights the need for appropriate primary and secondary preventive measures.

OSA can disrupt the normal sleep cycle, leading to daytime sleepiness and difficulty concentrating. In young people, this can impair academic performance and cognitive development, affecting their ability to learn and retain information.³ OSA has been associated with growth delays and developmental issues. By addressing OSA promptly, healthcare

providers can help support normal growth and development in young individuals.⁴ As emphasized by Oiwoh and colleagues, the modification of anthropometric and psychosocial factors may aid in reducing the likelihood of adverse outcomes related to OSA in this demographic.

The array of interesting articles in this edition has been evaluated and arranged for distribution to the larger scientific community and the general public with the assistance of our peer reviewers, editorial board members, and editorial staff. The WAJM continues to serve as a veritable avenue for our esteemed authors to disseminate their scholarly work in their effort to contribute to the corpus of current knowledge. We thus reiterate our invitation to authors to submit their complete original

research articles, case studies, review articles, and brief correspondence. Our commitment remains steadfast in our ongoing efforts to enhance the quality and efficiency of our services. Simultaneously, we are dedicated to cultivating a heightened level of satisfaction among our valued contributors. This pursuit is fundamental to our ethos, driving us to constantly refine and innovate in order to exceed expectations and deliver unparalleled value to all stakeholders. We seek the suggestions and continuous support of all stakeholders towards this end.

Professor G. E. Erhabor

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