



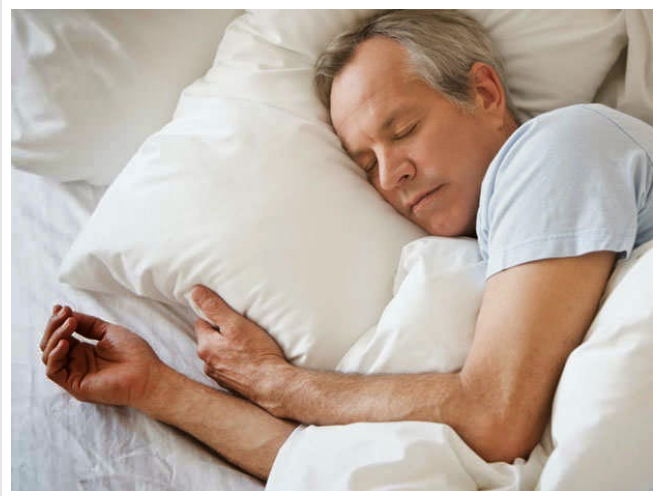
7 FOX NEWS

Research brings upside down: The siesta can kill you - Who is at risk

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Researchers from the Department of Public Health of the University of Cambridge found that people of middle and old age, sleeping every afternoon, have higher rates of dying prematurely. This is the finding of a study published in the journal *American Journal of Epidemiology*. The study of the Department of Public Health, University of Cambridge comes to reverse what we currently know about the benefits of the nap energy.

Dr. Yue Leng and colleagues found that the more one sleeps noon greater risk of premature death faces! The risk was higher for middle-aged compared with older people. Thus, individuals 40-65 years, who slept every day for over an hour, had almost twice the risk of premature death compared with those who slept at noon.



Specifically, the researchers put under medical surveillance for 13 years more than 16,000 people in the UK, where generally there is habit nap, and correlated with the frequency of the lifetime of volunteers.

Specifically, individuals 40-79 years of age who slept at noon daily for less than an hour, on average, 14% greater probability (compared with those who slept all afternoon) to die within 13 years period of the study. When the siesta lasted more than an hour, the risk was even greater, ie those who slept daily after meals for over an hour, had 32% greater chance of premature death.

Indeed, the siesta appeared to be associated with an increased risk of death from respiratory diseases. Those who slept less than a daily noon time, had 40% increased risk of premature death from respiratory diseases, the proportion reached 56% for those who slept more than an hour.

Scholars have speculated that the siesta may be associated with a general deregulation of the organization but have not come up with exactly how explain the higher mortality rates. On the other hand, however, the study shows that the vast majority (about 85%) of those who sleep afternoons less than an hour, do not face an increased risk of death.