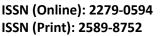
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# Descriptive Study of Sleep Disorders in Psychiatric Female Patients: A Cross-Sectional Study

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#### Abstract

Sleep disorders are prevalent among individuals with psychiatric conditions and can significantly impact their mental and physical health. This study aimed to describe the prevalence and types of sleep disorders in female psychiatric patients, assessing the relationship between different psychiatric conditions and sleep disturbances. A total of 120 female patients, aged 18-55 years, diagnosed with various psychiatric conditions such as depression, anxiety, schizophrenia, and bipolar disorder were included. Data was collected using the **Pittsburgh Sleep Quality Index (PSQI)** and the **Insomnia Severity Index (ISI)**. The study revealed that 75% of the participants experienced some form of sleep disturbance, with insomnia being the most common (45%). Anxiety and depression were significantly correlated with poor sleep quality, while schizophrenia and bipolar disorder also showed notable disruptions in sleep patterns. The results suggest that sleep disorders are common among female psychiatric patients, and improving sleep quality should be an integral part of psychiatric treatment. **Keywords:** Sleep disorders, psychiatric patients, insomnia, anxiety, depression, female patients, cross-sectional study.

# Introduction:

Sleep disturbances are a common yet often overlooked issue in psychiatric patients. The relationship between sleep and mental health is bidirectional, meaning that psychiatric disorders can exacerbate sleep problems, and poor sleep can, in turn, worsen psychiatric symptoms (1). Sleep is essential for physical health, cognitive function, and emotional well-being, making its disruption in psychiatric patients particularly concerning (2).

Among psychiatric disorders, depression, anxiety, schizophrenia, and bipolar disorder have been widely associated with various sleep disturbances (3). Insomnia, hypersomnia, and disrupted sleep-wake cycles are frequently reported by psychiatric patients, and these disturbances can contribute to the severity and duration of the psychiatric disorder (4). Female psychiatric patients may be more vulnerable to sleep issues due to hormonal differences, caregiving responsibilities, and social pressures, which may further complicate the management of their psychiatric conditions (5).

This study aims to investigate the prevalence of sleep disorders among female psychiatric patients, explore the types of sleep disorders they experience, and examine the correlation between these disorders and different psychiatric conditions. Understanding the nature of sleep disturbances in psychiatric females is crucial for improving their treatment and quality of life.

# Aim and Objectives

# Aim:

To describe the prevalence and types of sleep disorders in female psychiatric patients.

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### **Objectives:**

- 1. To assess the prevalence of sleep disorders (e.g., insomnia, hypersonnia, fragmented sleep) in psychiatric female patients.
- 2. To explore the relationship between sleep disorders and specific psychiatric conditions in female patients.

# **Materials and Methods**

This was a cross-sectional study conducted at a psychiatric hospital, involving 120 female patients aged 18-55 years, diagnosed with common psychiatric conditions such as depression, anxiety, schizophrenia, and bipolar disorder. All patients were assessed for sleep disturbances using the **Pittsburgh Sleep Quality Index (PSQI)**, which evaluates the quality and patterns of sleep over the past month, and the **Insomnia Severity Index (ISI)**, which measures the severity of insomnia.

- Female patients aged 18-55 years.
- Diagnosed with a primary psychiatric condition (depression, anxiety, schizophrenia, or bipolar disorder).
- Patients who agreed to participate and provide informed consent.

### **Exclusion Criteria:**

- Patients with primary sleep disorders unrelated to psychiatric conditions (e.g., sleep apnea).
- Patients with severe physical illnesses or cognitive impairments that would interfere with participation.

Data collection involved a structured interview, and clinical details of psychiatric conditions were reviewed. The data obtained from PSQI and ISI were analyzed to assess the prevalence and type of sleep disturbances among the participants.

#### **Inclusion Criteria:**

#### Results

Table 1. I revalence of Sicep Disorders in Female 1 sycillatile 1 attents				
Type of Sleep Disorder	Number of Cases (%)			
Insomnia	54 (45%)			
Hypersomnia	21 (17.5%)			
Fragmented Sleep	25 (20.8%)			
No Sleep Disorder	20 (16.7%)			

Table 1: Prevalence of Sleep Disorders in Female Psychiatric Patients

The study found that 75% of the participants experienced some form of sleep disorder. Insomnia was the most prevalent, affecting 45%

of the participants, followed by fragmented sleep in 20.8%, and hypersonnia in 17.5%.

<b>Psychiatric Condition</b>	Insomnia (%)	Hypersomnia (%)	Fragmented Sleep (%)
Depression	35 (58%)	10 (16.7%)	12 (20%)
Anxiety	18 (60%)	5 (16.7%)	7 (23.3%)
Schizophrenia	15 (60%)	3 (12%)	7 (28%)
Bipolar Disorder	8 (50%)	3 (18.8%)	4 (25%)

Among the psychiatric conditions, depression and anxiety were associated with the highest rates of insomnia. Schizophrenia and bipolar disorder were also linked to significant sleep disturbances, particularly fragmented sleep.

#### Discussion

The findings of this study highlight that sleep disorders are highly prevalent among female psychiatric patients, with 75% of participants experiencing some form of sleep disturbance. The most common issue was insomnia (45%),

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followed by fragmented sleep (20.8%) and hypersomnia (17.5%). These findings are consistent with previous studies, which have shown that sleep disturbances are widespread among psychiatric patients (6, 7).

The relationship between sleep disorders and psychiatric conditions was also evident. Depression and anxiety were associated with a high prevalence of insomnia, which is consistent with the literature that links depression to significant sleep disturbances (8). Schizophrenia and bipolar disorder also contributed to sleep issues, with these patients more likely to report fragmented sleep, which is often linked to mood instability and psychotic symptoms (9, 10).

The high prevalence of insomnia in female psychiatric patients may be influenced by various factors, including hormonal fluctuations, stress, and societal pressures. Female patients may also be more likely to internalize their symptoms, leading to a delay in seeking treatment for sleep disturbances (11). Moreover, sleep disturbances can exacerbate psychiatric symptoms, creating a vicious cycle that can impair treatment outcomes and quality of life (12).

It is important for clinicians to address sleep disturbances in female psychiatric patients as part of their overall treatment plan. Addressing sleep disorders can improve psychiatric outcomes, reduce the burden of illness, and enhance patients' quality of life.

# Conclusion

In conclusion, sleep disorders are highly prevalent among female psychiatric patients, with insomnia being the most common issue. The findings of this study suggest that addressing sleep disturbances should be a priority in the management of psychiatric conditions in females. Healthcare providers should regularly assess sleep quality and consider the impact of psychiatric medications on sleep, as improving sleep can contribute to better mental health and overall well-being.

#### References

- 1. Taylor DJ, Lichstein KL, Durrence HH, et al. Epidemiology of insomnia, depression, and anxiety. Sleep. 2005;28(11): 1464-1473.
- Buysse DJ, Reynolds CF 3rd, Monk TH, et al. The Pittsburgh Sleep Quality Index: A new instrument for psychiatric practice and research. Psychiatry Res. 1989;28(2): 193-213.
- 3. Nofzinger EA, Buysse DJ, Germain A, et al. Functional neuroimaging evidence for hyperarousal in insomnia. Am J Psychiatry. 2004;161(11): 1911-1918.
- 4. Thase ME. Sleep disturbances in depression. Int J Psychiatry Med. 2006;36(1): 41-52.
- 5. Kaplan K, Hennessey D, Roberts M, et al. The role of gender in the sleep disturbance and psychiatric disorders. Psychosomatics. 2007;48(3): 254-259.
- Pigeon WR, Pinquart M, Conner K. Metaanalysis of sleep disturbances and depression in adults. J Psychosom Res. 2012;74(1): 1-9.
- Tanskanen P, Hintikka J, Lehtonen J, et al. Sleep disturbances and depression: A population-based study. Sleep Med. 2004;5(1): 6-10.
- Zalsman G, Oquendo MA, Brent DA, et al. Sleep and suicide risk in psychiatric patients. Sleep Med Rev. 2006;10(2): 221-228.
- Yatham LN, Waraich P, Tohen M. Bipolar disorder: An overview. Can J Psychiatry. 2004;49(2): 76-87.
- 10. Cadenhead KS, Swofford N, Bhat A, et al. Sleep disturbances in schizophrenia: Implications for symptom severity and cognition. Schizophr Bull. 2011;37(3): 517-524.
- Troy M, Donnelly M. Gender differences in depression and sleep disturbances. Women Health. 2011;51(4): 278-288.
- 12. Van Someren EJ. Circadian and sleep disorders in aging. Ann N Y Acad Sci. 2000;919: 281-289.