

Федеральноегосударственноебюджетное образовательноеучреждение высшегообразования олгоградскийгосударственный медицинский унив

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Фонд оценочных средств ОТЧЕТ по производственной практике (научноисследовательская работа)

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Report

On manufacturing practices

(Research work)

TOPIC- SLEEP WAKE QUESTIONNAIRE

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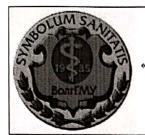
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INTRODUCTION:

Sleep disorders, if untreated, increase the risk for the development of obesity, diabetes, cardiovascular disease, and depression and negatively impact the course and treatment of these chronic conditions once developed.1-4 With the prevalence of sleep disorders at 10–40% in the general population,5 the detection and treatment of sleep disorders is important for the maintenance of wellness and may serve as a means to reduce the onset and burden of chronic diseases and the overall cost of health care.

As important as this opportunity for prophylaxis may be, most medical providers do not inquire about their patients' sleep quality or quantity. This may be due, in part, to a lack of training and expertise regarding the assessment and treatment of sleep disorders.



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This may also be due to the understandable constraints on providers' time in primary care settings. Time constraints could be overcome, however, if a brief, comprehensive and psychometrically sound sleep disorders screening questionnaire were available.

If this were the case, then it might be possible to put the assessment of sleep disorders into regular practice in a manner that is akin to what has occurred with depression in the last decade.

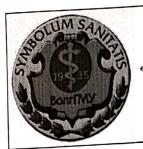
It can lead to fever and patient may feel like less hungry. The person works overnight are found to have mental disorders. They are found to be less healthy and found that their vital activity is found to slow down and their aging process has found to be increased and are found to be obese.

Their accumulation of fats on skin increases and their insulin resistance increases, their LDL in the body increases which leads major heart problems. Mostly heart is found to be a common problem in these patients and the clotting disorders have a broad spectrum like intravascular, thrombosis, thromboembolism, deep vein thrombosis, artherosclerosis and plagues formation.

Materials and Methods for examination of sleep wake cycle.

a) Questioning method of examination.

The examination methods of SAS are divided into two stages, they are simple examination which can be done at home and hospitalized examination. First, if there is a possibility of SAS by interview from a doctor, do the simple examination at home. In the simple examination, attaching specialized instruments to the wrist, fingers and nose for collect respiration, snoring, SpO2



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(blood oxygenation level) and heart rate data before going to bed. The doctor analyzes the data to determine whether it is SAS. Second, if doctor diagnose that it is SAS by the result of simple examination, get hospitalized to do a highly accurate examination by PSG for observe condition of sleeping quality and respiration.

b) Instrumental method

Electromyogram, electrooculogram and electroencephalogram which measures the activity of muscles, REM and brain waves respectively. The patient is held back in laboratory and made to sleep in pleasant environment, with the help of brain wave machine place on the side of ears brain waves are measured and muscle activity clips placed on all the limbs.

Actigraphy is a non-invasive method of monitoring human rest/activity cycles. A small actigraphy unit, also called an actimetry sensor, is worn for a week or more to measure gross motor activity. The unit is usually in a wrist-watch-like package worn on the wrist.

The questionnaire was prepared to know about the information about sleep during the daytime in this questionnaire. I have included the items which are based on the previous survey and according to worldwide accepted scales. It is totally having 3 main parts. The first part of the questions consist of the enquiry about living area of the person, academic performance, pattern on which basis the candidate is sleeping, amount of intake of caffeine, bad habit like smoking, time which the person is scheduled to do his daily basic needs and usual habits.

In the second part; this part consist of the world wide accepted scores for measuring the level of sleepiness scale to measure the day duration of sleeping. The scale which I took for experiment focus on the studying students



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in which they falling in the bed to sleep in 8 various types and they were given score significantly.

Literature review

Literature review is based on research question and the planned examination of the sleep cycle.

It consist the methods of sleep wake cycle and detailed information about the method of examination

The questioned mentioned below is related to the sleep and sleeping habits which affects his or her behaviour and living lifestyle. It's easy questioning method to assess the sleep wake pattern data. The parents or other subjects help is accumulating the answers to following question.

We should make a good capacity of understandable on the basic knowledge of sleep diseases in their trainings due to the course they study in medicine, more essential for the students of medical college. This is provided to increase personal knowing of learners. While they study about the sleep disorders in med-school. Which may also help for their own health condition and they will take care of the student performance in the academic. They will be getting self-awareness on the disorders of sleep and general studies gain them a knowledge that which appear and factors are more for the sleep disorders, so improving the education style may be helpful in beneficial contribution & invention in the world. Hereby we should give them a sample evidence for condition of the problem, there we should start a detailed study in the criteria to explain & expand ideas to the innovation to educate more peoples for the education based on the sleep for those who are still in med-school, and to identify those who undergo of this risk, and to make the life of student better.

Sleep wake questionnaire



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- 1) Usually you wake up quickly and easily in the morning?
- 2) If you are awakened from sleeping, it is easy for you to fall back asleep again?
- 3) If you get up too early for several days in a row, then you need to make up for lost sleep?
- 4) If the work is interesting, you are happy to work at night and rest during the day?
- 5) Some mornings it takes you a long time to wake up?
- 6) Sometimes you wake up too early in the morning and can't fall back asleep?
- 7) During the day you can fall asleep almost as quickly as at night?
- 8) You can usually fall asleep after something has upset me?
- 9) You are easily awakened in the morning by an alarm clock?
- 10) It is difficult for you when you have to change my normal sleeping schedule?
- 11) If you are awakened during the middle of the night, you can easily get back to sleep?
- 12) You rarely wake up with the unpleasant thought that it is time to get up?
- 13) When you are sleepy neither coffee nor strong tea can prevent me from falling asleep quickly?
- 14) It is easy for you to change the time you go to sleep or get up?
- 15) Sometimes you can't sleep because you are too worried?



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- 16) If you don't get enough sleep at night, you can always make up for it with a nap after lunch?
- 17) Frequently you don't want to wake up in the morning?
- 18) Sometimes sleeping in the daytime gives you a headache?
- 19) Very rarely do you take a nap after lunch, even if you have the opportunity?
- 20) you usually sleep "like a log" at night?
- 21) Frequently, your alertness level in the evening is higher than in the morning?
- 22) If you wake up too early in the morning, it is difficult for you to fall back asleep?
- 23) For you, a nap is a poor alternative for a night's sleep?
- 24) If you lie down in the daytime, you can quickly fall asleep?
- 25) Sometimes, before falling into a sound sleep, you wake up a couple of times?
- 26) You like to get up very early in the morning?
- 27) It is easier for you to finish my work early in the morning than late at night?
- 28) When you are sleepy neither coffee nor strong tea can prevent me from falling asleep quickly?

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29) Sometimes it is hard for you to work in the late evening?



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- 30) You are in a bad mood when you have to alter my normal sleeping schedule?
- 31) If it is possible, you enjoy taking a nap?
- 32) Usually, just before the time you go to sleep, your performance is still rather high?
- 33) It is rather easy for you to shift the time you sleep or wake?
- 34) At the beginning of the night you are easily awakened by any noise?
- 35) Missing sleep doesn't usually put you in a bad mood?
- 36) In the evening you usually think out worse than in the morning?
- 37) You are OK on the day followed by just a half-night sleep?
- 38) If you sleep enough every night, it's hard for you to fall into a sound sleep during the day?
- 39) You seldom feel sleepy late in the evening?
- 40) It is difficult for you to wake up by myself at a certain designated time?
- 41) If you worry about something during the evening, you cannot sleep well at night?
- 42) Often in the evening you feel very tired?
- 43) If you have to wake up early during the week, you wake early on the weekends as well?
- 44) If you go to bed at my usual time, you fall asleep very quickly?
- 45) Sometimes it is difficult for you to get things done in the evening?



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- 46) Sometimes you wake up too early in the morning and can't fall back asleep?
- 47) You are usually in a better mood in the evening than during the daytime?
- 48) If you don't get enough sleep one night, you can very easily catch up on my sleep the next night?
- 49) You are always sure that you will get up at the scheduled time in the morning?

The result of the patients questioning

64 random children from a society of India were taken into consideration. The report involved parents was made up of 23 males and 27 females of age between 9 month and 3 years and 3 months and average age 19 months, SD 7), of whom maximum were aged between 9 and 21months and least between 21 and 34 months.

Question is on sleep behaviour in the first years of life

The investigation of sleep behaviour in the first years of life. It is a clinical tool, deriving from the clinical experience of several people, specialists in developmental neurology, and from a review of previous sleep questionnaires reported in the literature, and it was designed, developed and revised at the Department of Child Neurology and Psychiatry



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The preliminary analysis of the data was based on calculation of the frequency of the parents' responses to the items contained in the sleep behaviour questionnaire, and of the percentage distribution and mean values of these responses.

Table 1 -falling asleep and number of nocturnal awakenings

		Mean	S.D.
Duration of nocturnal crying fits		12	13
in minutes			
Time to fall asleep in minutes		13	11
Number of rights awakening per we	ek	3	1
Maximum duration of awakenings	a childre	75	81
in minutes			
Number of nocturnal awakenings		1.6	1.5
Per min			
Per month, frequency of nocturnal			
crying fits		al la caretta de proces	

The above table describes about the characteristics of the children's nocturnal awakenings and the mean time taken to fall asleep, show that these children do not experience difficulty falling asleep and the normal duration is under 18 min but that they do record a quite high mean number of awakenings per night and per week and a rather high frequency of nocturnal crying fits, even though



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the mean duration of these awakenings is not particularly protracted which does not exceed than 16 min.

Table 2 Sleep behaviour

Difficulty in sleeping 25%

Children awake due to crying 49%

Use of drugs for sleep 8%

Insufficient sleep of child 19%

The above table shows that 49% of the children wake during night due to crying and appear very frightened, and that 25% of children's sleep as a problem that is difficult to manage according to their parents given regards. The most important observation to note is that 8% of parents use drugs to help their child sleep and the drug used by parents mostly is "Halcion".

According to the findings only 19% of the children face difficulty in sleeping and face day time sleepy behaviour and has behavioural problems like irritability and drowsiness in maximum cases.

Table 3 Location of the child for sleep

With parents 45%

Sharing room with siblings 20%

Sleeping alone 35%



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According to the above observation, these children are reported by their parents to be lively or calm when awake, whereas only 9% are reported to be excessively lively. The reports confirm that many of the children do not sleep alone in most cases sharing their parents' bedroom; whereas only 35% of the children sleep alone, and 45% sleep in their parents' room, 20% share a room with siblings.

Table 4 sleeping and waking patterns

Feels sleepy after waking up	73%
Goes to bed on same time everyday	47%
Has a pattern for falling asleep	93%
Always need parent attention to fall asleep	48%
Always need same parent to fall asleep	69%
Sudden awakening during sleep	81%
Special attention to make the child to fall asleep again	46%

Information of sleep an wake habits, used both by the children themselves and by their parents, in order to favour the children's sleep and to get them back to sleep following nocturnal awakenings; it emerged that only around 47% of the children are put to bed at a regular time and that 69% are always put to bed by the same person. In 46% of cases, activities are performed to get the children to sleep and in nearly 48% of cases, the children are taken into their parents' bed for this purpose.



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Table 5 disturbing sleep hours

Whole sleep hours 11%

Falling asleep 20%

Nocturnal sleep 69%

The above observation shows that the parents cited nocturnal sleep as the most disturbing sleep phase in 69% of cases, whereas falling asleep in 20% and all sleep hours in 11% were reported.

DISCUSSION

The result after the following analysis of the children's examination shows maximum children have a problem with their sleep due to irregular sleeping patterns and waking patterns. Few amount of children had a proper sleeping and waking pattern according to the above analysis which plays a crucial role in child's overall development. A few children had a day time sleep disorder which lead to children behaviour issues and showed behaviours crying and irritated.

Some child were diagnosed with sleep apnea which was usually due to irregular sleeping pattern during night as well as during daytime. Monitoring the overnight sleep with their taking their brain and muscle activity into consideration shows a very detailed information about overnight mental development and their motor development. Some children found to be very disturbed and irritated do to their sleep disturbance which delays the child mental and physical growth.



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Hence proper sleeping and waking habits plays a crucial role in the child growth as maximum time during childhood (10-12hours) is under sleep.

The high level ESS scores denoting the persons and they had disturbance in cycle of Circadian that provokes the persons to be tired & pathological pairing of the functions. There should be some arrangements for the prevention from the disorder for the proper cycle of resting period and to get away from negative results of low sleeping period.

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