Abstract

This descriptive study aimed to explore sleep quality of elderly during hospitalization and describe factors perceived by hospitalized elderly as sleep interference. One hundred elderly patients who met the inclusion criteria were recruited from six medical wards of two hospitals in Medan, during January to March, 2003. Subject’s personal data, health information, sleep history, sleep quality, and factors interfering with sleep were obtained by structured interview.

The majority of subjects reported experiencing sleep latency longer than 60 minutes (57%), total sleep time less than 5 hours (62%), awakening three times or more through the night (80%), very shallow sleep (55%), not at all satisfied with sleep (51%), not feeling refreshed in the morning (52%), and feeling fatigued and sleepy during the daytime (46%). Moreover, seventy seven percent of the subjects considered their sleep as poor. In addition, paired t-test analysis revealed that the sleep quality of the subjects during hospitalization and at home were significantly different (p < .001).

Factors interfering with sleep during hospitalization included physiological, routine nursing interventions, environmental, and psychological factors. The most prevalent and highest level sleep interference in physiological factors were caused by pain, dyspnea, and cough. The majority of subjects perceived that routine nursing
interventions at night; checking vital signs, nurses attending to other patients, and giving treatments, interfered with their sleep at a low level of sleep interference. Likewise, environmental factors including noise from all sources, hot room temperature, and bright light were commonly reported as sleep interference at the low and moderate level. In psychological factors, twenty four percent of the subjects experienced anxiety, while forty three percent reported depression during hospitalization.

These findings suggest that for patients to have good sleep quality nurses could develop more effective nursing care by giving interventions to relieve symptoms, and modifying nursing activities to minimize sleep interference. Hospital administration would assist by rearranging hospital wards to improve the hospital environment at night. In addition, nurses should be aware that patients have many possible sources of anxiety and depression which can cause poor sleep quality during hospitalization.