



## ASSESS THE INCIDENCE, CAUSES, RESOLUTION RATE OF NEW ONSET OF INSOMNIA IN HOSPITALISED PATIENTS

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### ABSTRACT

A Prospective, Open label, Interventional study was conducted at tertiary care hospital with 100 study population in duration of 6 months with aim to assess the Incidence, Causes and resolution of Insomnia patients. The study found that, male patients were mostly affected with Insomnia than female in 67% in the age group of 51 - 70 years in 40%. Disease related pain is the most common causes in 25% and followed by Mental stress in 19%. The Insomnia severity Index scale indicates that, only 6% were with clinical significant Insomnia and 68% were Non clinical significant Insomnia. After Intervention,

Insomnia reduced from 8.16 to 6, 75 by the proper Intervention with patients and care givers regarding consequences of Insomnia that leads to a high disease factor. The resolution before and after Cognitive behavioural therapy and Intervention by Clinical pharmacist was found to be statistically significant. Hence, the study strongly recommends the need of Cognitive behavioural therapy and roll of Clinical Pharmacist to Improve the Quality of life of the In-patient at Hospital setup.

**KEYWORDS:** Insomnia, Behavioural therapy, Resolution, Counselling.

### INTRODUCTION

Insomnia is a sleep disorder where people have trouble sleeping followed by day time sleepiness, low energy, irritability and a depressed mood. People over the age of 65 are affected more than younger people. Female are more affected than male. Epidemiological survey indicates that, 30% adult have Insomnia at any given point of time in a given year. The hospitalization of patients and environment also the reasons for Insomnia. Sleep hygiene is a common term for all the behaviours which relate to the promotion of good sleep. These

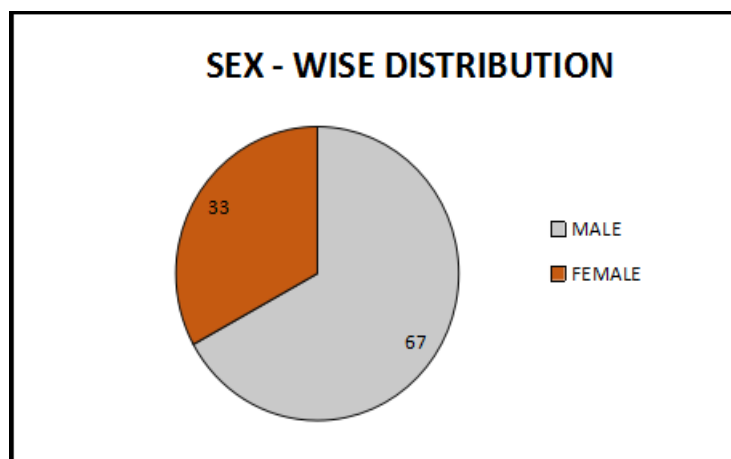
behaviours are used as the basis of sleep Interventions and are the Primary focus of sleep education Programmes. There is some evidence that, Cognitive behavioural therapy(CBT) for Insomnia is superior in the long term management of Insomnia. Hypnotic medications are equally effective in the short term treatment of Insomnia. But, treatment availability is significantly limited by a lack of trained clinicians, poor geographical distribution of medical professionals, and cost of treatment. Pharmacist can decipher what treatment strategies are appropriate for their struggling patients and help them to improve the Quality of life of the patient. Hence, the study aimed to assess the Incidence, Causes, Resolution for the onset of Insomnia in hospitalised patients.

## METHODOLOGY

A Prospective, Open label, Interventional study was carried out with 100 patients as per the Inclusion criteria for 6 months duration in the Inpatient department of KG Hospital, Coimbatore. Data Collection form was administered and were analyzed by using SPSS software. Insomnia severity Index was compared before and after treatment.

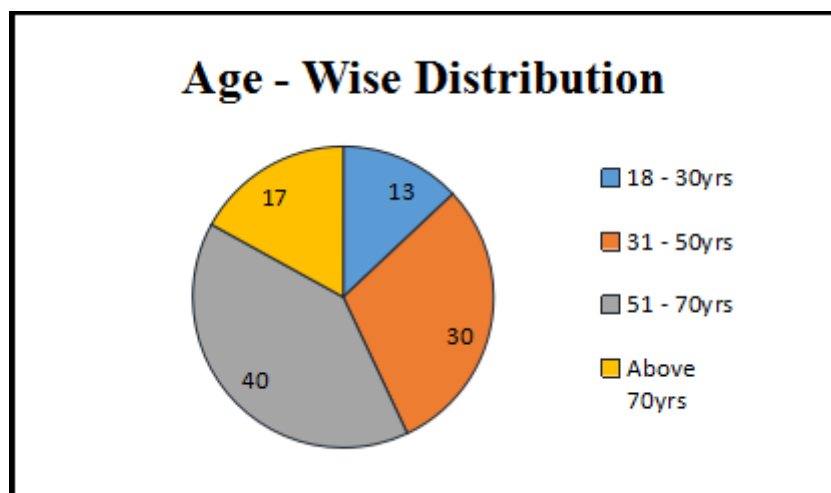
## RESULT

A total of 100 study patients included in the study as per the Inclusion criteria. Out of which, 67% (n=67) were male and 33% (n=33) were female. Which was given in Figure-1.



**Figure 1: Sex wise distribution.**

Study found that Male patients are more prone to Insomnia than female in 40% (n=40) and were categorised in age group. Most of the study populations were between 51 - 70 years of age and was depicted in Figure-2.



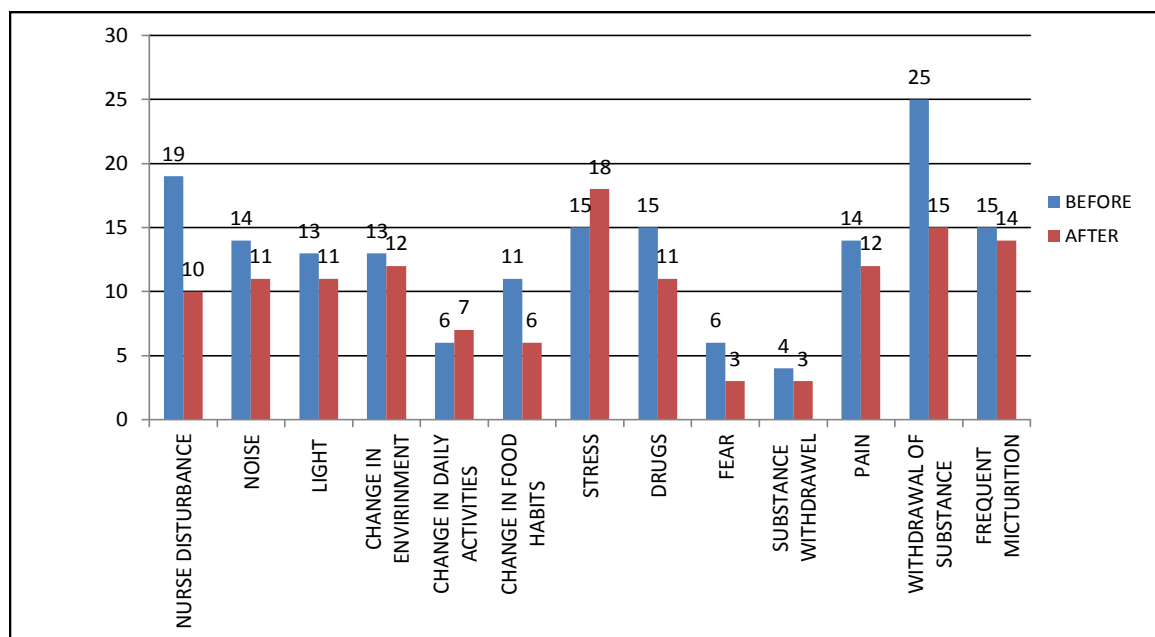
**Figure 2: Age wise distribution.**

The Incidence of Insomnia was analysed and found that 68% (n=68) were no Clinically significant Insomnia. Only 6%(n=6) were in clinically significant Insomnia as per the Insomnia severity Index Scale and was indicated in Table- 1

**Table 1: The Incidence of Insomnia.**

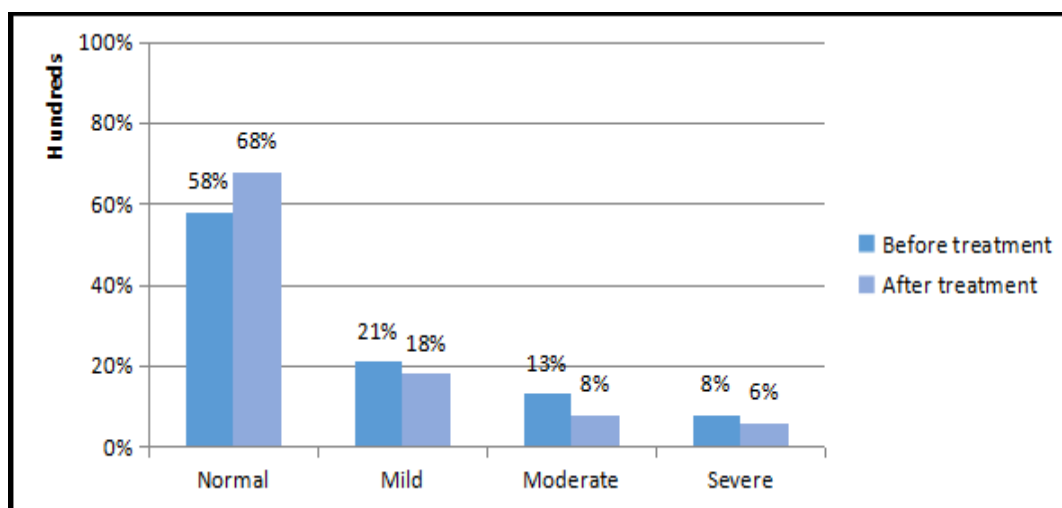
Level of insomnia	Before treatment		After treatment	
	Frequency	Percentage	Frequency	Percentage
No Clinically Significant Insomnia	58	58%	68	68%
Subthreshold Insomnia	21	21%	18	18%
Clinical Insomnia (Moderate)	13	13%	8	8%
Clinical Insomnia(Severe)	8	8%	6	6%

The result indicates that, the most frequent causes of insomnia was pain due to specific disease condition (25%) and Mental stress(19%), and was given in Figure-3.



**Figure 3: The Causes of insomnia.**

The Resolution for Insomnia before and after treatment was analysed and found that, Insomnia score was reduced significantly from 8.16 to 6.75. The mean and level of significance are given in Figure-4.



**Figure 4: The Resolution for Insomnia before and after treatment.**

## CONCLUSION

The study concludes that, the roll of clinical Pharmacist in In-patient department is a essential need to support the Clinicians to create a Positive Impact on Improving Quality of life of the patient by Cognitive behavioural therapy and proper Counseling.

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