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The Impact of Sleep Deprivation on Patients’ Pain Level, Mood, and Overall Hospital Satisfaction

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The Impact of Sleep Deprivation on Patients’ Pain Level, Mood, and Overall Hospital Satisfaction

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Abstract

Objective: To identify the relationship between sleep deprivation and patient’s pain level, mood, and satisfaction of hospital stay.

Statistical Method: Independent T-test

Independent Variable: Three or less interruptions in a patient’s sleep during an eight-hour period.

Results/Conclusion: pending results and data collection

Introduction

Sleep is essential to human’s survival (Strollo, 2012). Studies show that consistently getting eight hours of uninterrupted sleep each night benefits mental and physical health and consequently results in improved survival rates (Strollo, 2012). Although sleep is vital to human health, it is frequently undervalued in the hospital setting due to interruptions like blood draws, frequent assessments, artificial light, noise from other patients, and the beeping of machines. Sleep deprivation (SDe) can cause impaired healing processes (Pilkington, 2013), increased risk for cancer, metabolic syndrome, cardiovascular disease, and it has been shown to have negative effects on pain perception (Schnipfl, 2013) and mood (Busch, 2011). All these factors contribute to poor patient satisfaction within healthcare settings stressing the importance of quality sleep. This study will identify the relationship between improved sleep quality and its effects on patient’s pain level, mood, and satisfaction of their hospital stay on day one, three, and the day of discharge.

Purpose

The purpose of this study is to determine if improved sleep quality in acute care patients promotes decreased pain level, enhanced mood, and enhanced satisfaction of hospital stay.

Key Terms

Acute care patients, People seeking medical attention concerned with short-term immediate care such as serious illnesses or traumatic injuries.

Sleep deprivation (SDe): a reduced ability to achieve normal sleep, with increased wakefulness and altered sleep architecture resulting in a decrease in non-rapid eye movement and slow-wave sleep (Pilkington, 2013).

Literature Sources

Three studies within our literature review have described connections between sleep quality and patient outcomes. According to Schnipfl, et al. (2013), SDe has been shown to have a negative effect on patients’ pain perception. Another source found that SDe also has a negative effect on patients’ mood (Busch, 2011). Finally, research done by Yilmaz et al. (2012) shows that SDe has an effect on patient satisfaction within the hospital setting. Furthermore, research done by Strollo et al. (2012) concluded that “habitual shorter or longer sleep duration is associated with greater mortality” and “Sleep deprivation contributes to a number of molecular, immune and neural changes that play a role in disease development.”

Methodology

Research Design: Quasi-Experimental, Descriptive

Statistical Method: Independent T-test

Dependent Variable: The patient’s pain level, mood, and satisfaction of hospital stay on day one, day three, and the day of discharge.

Interventions: Nurses will work with other healthcare personnel to limit night-time interruptions of patient’s sleep by decreasing noise, light, and grouping together patient care. These interventions are expected to reduce sleep disturbance, which will allow us to examine the effects improved sleep has on the patient’s pain level, mood, and satisfaction of hospital stay. These results will be recorded on day one, day three, and the day of discharge.

Proposed Research Question

Decreasing environmental factors that disrupt sleep in acute care patients, resulting in less than 3 disturbances in sleep and improving sleep quality in acute care patients is expected to improve patients’ pain level, mood, and satisfaction of hospital stay.

Results/Findings

In this study we will be using this framework to examine the correlation of nursing interventions that limit sleep disturbances and the effect it has on the outcomes of pain, mood, and satisfaction of hospital stay. This will be achieved by decreasing environmental factors that inhibit sleep in order to improve patient outcomes in the acute care setting.

References


