Thema und Name

Insomnia in hospitalised adult patients

N.N.



Identifying the Problem

Insomnia	Definition: difficutly of falling and staying asleep, resp.
	Common in elderly patients
	Hospital setting: medical, environmental, patient factors
	Consequence: poor patient outcomes, risk of fall û
Therapy	Community setting: CBT + BSH
	Hospital: ≈37% BSH initiation within 24 h of admission
	side effects: daytime sedation, cognitive impairment, risk of fall û, risk of drug related problems (10%)

PICO(S)-Question

Can non-pharmacological interventions help to improve sleep in elderly hospitalised patients?

Population	adult patients with insomnia
Intervention	Non pharmacological interventions
Comparison	(no treatment)
Outcome	Improved sleep
(Setting)	Hospitalised

Selection criteria

Inclusion	Adults
	Meta-analyses, umbrella & systematic reviews, RCTs
	Peer-reviewed articles, referenced
	Language: German, English
Exclusion	mental health disorders
	particular conditions e.g. cancer patients, heart failure
	ICU patients, primary care, children, younger adults
	pharmacological interventions
Filter	5 years

Suchbegriffe festlegen

Suggested Wordlist

P	 Insomnia, (poor) sleep, sleep disturbances, sleep disorders, sleeplessness, circadian rhythm Adults (older adults, Elderly, older patients, geriatric)
l	Nursing interventions, sleep promotion, non-pharmacological interventions, sleep hygiene
С	
0	Sleep pattern, sleep, improved sleep, sleep quality
(Setting)	Inpatients, hospitalized / hospitalised

Databases

AWMF database: S3-guideline "insomnia in adults"

CINAHL: 51

PubMed / Medline: 13

Cochrane Library: 30 reviews, 2311 trials

Results: CRAAP-Criteria

Currency: 5 year filter

Relevance:
sampling and
setting, inclusion
and exclusion
criteria

Accuracy: peerreviewed, referenced

Authority: affiliation

Purpose: bias, conflict of interest

Level of evidence:
Filtered information
over unfiltered
information

Availability: access to full text, language

Ausgewählte Studie und CAT Bewertung

Selected article

JBI: 6/11 YES Moderate evidence

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SPECIAL ISSUE REVIEW

Accepted: 31 January 2022

Clinical Nursing WILEY

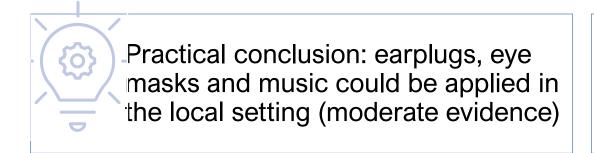
Effects of nursing interventions to improve inpatients' sleep in intensive and non-intensive care units: Findings from an umbrella review

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Assessment

Strengths	Limitations •
Filtered information	Poor evidence in evaluated reviews, many inconsistencies
Performed according to JBI guidelines	Poor quality of underlying studies
Peer-reviewed	Unclear and inconsistent comparisons in underlying studies
Results transferable	Missing results and analyes
	heterogenous target population (ICU, non-ICU)

Conclusion



Most reviews complained about poor quality of underlying studies

Limitations: only 3 studies included non-ICU patients

Publication bias for complementary and non-pharmacological interventions?

Appendix

References

Additional Information

References

- 1. Aromataris E, Fernandez R, Godfrey C, Holly C, Kahlil H, Tungpunkom P. Summarizing systematic reviews: methodological development, conduct and reporting of an Umbrella review approach. Int J Evid Based Healthc. 2015;13(3):132-40.
- 2. Bellon, F. et al. (2023) 'Effects of nursing interventions to improve inpatients' sleep in intensive and non-intensive care units: Findings from an umbrella review', Journal of Clinical Nursing, 32(9-10), pp. 1963–1978. doi: 10.1111/jocn.16251
- 3. Critical Appraisal Skills Programme (2018). CASP (Systematic Review) Checklist. [online] Available at: https://casp-uk.net/casp-tools-checklists/. (Accessed:18 Feb 2024).
- 4. Fan-Lun, C. *et al.* (2019) 'Reducing unnecessary sedative-hypnotic use among hospitalised older adults', *BMJ Quality & Safety*, 28(12), pp. 1039–1045. doi: 10.1136/bmjqs-2018-009241
- 5. Riemann, D. et al. (2023) 'The European Insomnia Guideline: An update on the diagnosis and treatment of insomnia 2023', Journal of Sleep Research, 32(6), e14035. doi: 10.1111/jsr.14035
- 6. Schumacher, L. et al. (2017) 'Prescription of Sedative Drugs During Hospital Stay: A Swiss Prospective Study', Drugs Real World Outcomes, 4(4), pp. 225–234. doi: 10.1007/s40801-017-0117-6
- 7. Stewart, N.H. and Arora, V.M. (2018) 'Sleep in Hospitalized Older Adults', Sleep Medicine Clinics, 13(1), pp. 127–135. doi: 10.1016/j.jsmc.2017.09.012
- 8. Prerna, V., Jackson, M.L. and Meaklin, H. (2019) 'Dreaming of the good old days: sleep in older adults', *Journal of Pharmacy Practice and Research*, 49, pp. 205–211 (Accessed: 22.02,2024).
- 9. Reynolds, A. and Adams, R.J. (2019) 'Treatment of sleep disturbance in older adults', *Journal of Pharmacy Practice and Research*, 49, pp. 296–304. doi: 10.1002/jppr.1565
- 10. Tamrat, R., Huynh-Le, M.-P. and Goyal, M. (2014) 'Non-pharmacologic interventions to improve the sleep of hospitalized patients: a systematic review', *Journal of General Internal Medicine*, 29(5), pp. 788–795. doi: 10.1007/s11606-013-2640-9
- 11. Miller, M.A. *et al.* (2019) 'Sleepless in the hospital: A systematic review of non-pharmacological sleep interventions', *General Hospital Psychiatry*, 59, pp. 58–66. doi: 10.1016/j.genhosppsych.2019.05.006
- 12. Garside, J. *et al.* (2018) 'Are noise reduction interventions effective in adult ward settings? A systematic review and meta analysis', *Applied Nursing Research : ANR*, 44, pp. 6–17. doi: 10.1016/j.apnr.2018.08.004

Search History – PubMed using MeSH

History	and Sear	ch Detai	ls		Delete
Search	Actions	Details	Query	Results	Time
#10	•••	>	Search: #1 AND #7 Filters: in the last 5 years	13	04:04:27
#9	•••	>	Search: #1 AND #7	50	04:04:16
#8	•••	>	Search: #6 AND #7	8,770	04:03:50
#7	•••	>	Search: Older adults OR elderly	6,122,719	04:03:26
#6	•••	>	Search: "Sleep Initiation and Maintenance Disorders" [MeSH Terms]	18,519	04:02:47
#5	•••	>	Search: #1 AND #4	0	04:01:50
#4	•••	>	Search: complementary	262,302	04:01:35
#3	•••	>	Search: #1 AND #2	0	04:01:13
#2	•••	>	Search: (nursing interventions) AND (non-pharmacological)	1,731	04:00:53
#1	•••	>	Search: ("Sleep Initiation and Maintenance Disorders" [Mesh]) AND "Inpatients" [Mesh] Sort by: Most Recent	72	04:00:24
				4.4 Fa	h 2024

Search History – CINAHL

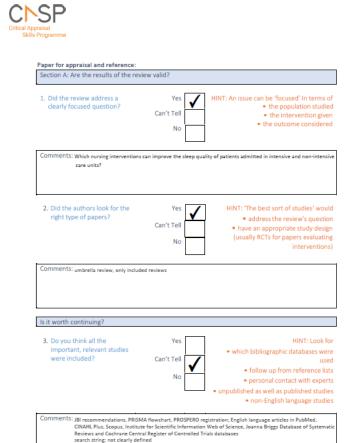
#	Query	Limiters/Expanders	Last Run Via	Results
S8	(insomnia or sleep disorders or sleep disturbance or sleeplessness) AND (nursing interventions OR non-pharmacological) AND (hospitalized patients or inpatient or patients)	Limiters - Publication Date: 20150101-20241231 Expanders - Apply equivalent subjects Narrow by SubjectAge: - aged: 65+ years Narrow by Language: - english Search modes - Boolean/Phrase	Interface - EBSCOhost Research Databases Search Screen - Advanced Search Database - CINAHL	51

CASP Tool

Screenshot des Bewertungstools



Comments: not very precise and partially	inconclusive. No statistics a	oplied only as given in the original review
Section C: Will the results help locall	y?	
O Complete and the land to		LINE COLUMN TO THE PARTY OF THE
8. Can the results be applied to the local population?	Yes	 HINT: Consider whether the patients covered by the review
the local population:	Can't Tell	could be sufficiently different to your
	√	population to cause concern
	No	 your local setting is likely to differ much
		from that of the review
Comments: limited: some recommendati	ons may be useful e.g. guide	d imagery, earplugs
9. Were all important outcomes considered?	Yes	HINT: Consider whether
considered?	Can't Tell	 there is other information you would like to have seen
	Call t Tell	like to flave seen
	No	
*		
Comments: search string / history partial	y unclear	
10. Are the benefits worth the	Yes	HINT: Consider
harms and costs?	163	even if this is not addressed by the
	Can't Tell	review, what do you think?
	✓	
	No	
Comments: some are low cost intervention	and the last section of the section	and the second to the second
community, some are low cost intervention	ons with little narm and so m	ay be worth the costs





4. Did the review's authors do enough to assess quality of the included studies?	Yes Can't Tell No	HINT: The authors need to consider the rigour of the studies they have identified. Lack of rigour may affect the studies' results ("All that glisters is not gold' Merchant of Venice – Act II Scene 7)
Comments:		
5. If the results of the review have been combined, was it	Yes	HINT: Consider whether
reasonable to do so?	Can't Tell	results were similar from study to study results of all the included studies are
	No No	clearly displayed
	NO	results of different studies are similar
		 reasons for any variations in results are discussed
Comments:		
Section B: What are the results?		
6. What are the overall results of th	ne review?	HINT: Consider • If you are clear about the review's
		'bottom line' results
		 what these are (numerically if appropriate)
		 how were the results expressed (NNT,
		odds ratio etc.)
Comments: there was no particular bott was a weak recommendation sleep.	om line. Most evidence w on for earplugs, masks and	as not very robust. There was no stistical analysis. There music therapy, different scales were used to assess

Entfällt, da Sie nur 1 Tool haben

JBI Tool

JBI CRITICAL APPRAISAL CHECKLIST FOR SYSTEMATIC REVIEWS AND RESEARCH SYNTHESES

	nev	newerDate						
	84X	965BEURU	Year_2022			R	econ	
*	Nur	nber	Yes	No	Unclear	Not applicable		
	1.	Is the review question clearly and explicitly stated?	\checkmark					
	2.	Were the inclusion criteria appropriate for the review question?		\checkmark				
	3.	Was the search strategy appropriate?		\checkmark				
	4.	Were the sources and resources used to search for studies adequate?	\checkmark					
	5.	Were the criteria for appraising studies appropriate?	✓					
	6.	Was critical appraisal conducted by two or more reviewers independently?	✓	<u>(</u>	Strg)			
	7.	Were there methods to minimize errors in data extraction?	\checkmark					
	8.	Were the methods used to combine studies appropriate?				\checkmark		
	9.	Was the likelihood of publication bias assessed?		\checkmark				
	10.	Were recommendations for policy and/or practice supported by the reported data?	\checkmark					
	11.	Were the specific directives for new research appropriate?			\checkmark			
		rall appraisal: Include Exclude Seek further informents (Including reason for exclusion)	fo 🗆					
	5YES, 1 N/A → 50%							