

PREDICTORS OF SLEEP QUALITY IN OLDER ADULTS IN ZAGREB

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Background

Between 50-65% of older adults generally report impaired sleep quality (SQ). Our previous study showed impaired SQ in nursing home residents that was best predicted by self-perceived health and functional ability (Košćec Bjelajac et al., 2019; 2020). The aims of the current study were to examine SQ of older adults in Zagreb living in different arrangements and to examine factors contributing to their SQ.

Material & Methods

- N = 334 older adults (73% women);
- Age Mo = 80 years, range 69 - 100 years;
- All ambulatory, no diagnosis of dementia;
- 50% nursing homes (NH), 50% own home (OH);
- Individual structured interviews conducted in nursing homes and gerontology centres;
- Questionnaire: Sociodemographic, Subjective Health, Functional Ability Scale and Life Satisfaction Scale (Defilipis & Havelka, 1984), Pittsburgh Sleep Quality Index (PSQI, Buysse et al., 1989).

Results

- Average PSQI score greater than 5, indicating poor SQ, was found in 60% of older adults.
- In NH residents the percentage of poor SQ was higher than in OH residents (71% vs. 50%, $p < .001$).
- Predictors explained the highest proportion of variance in the use of sleep medication (22.6%) and subjective SQ (21%).
- While life satisfaction and subjective health predicted total PSQI and most of the domains, age, gender and functional ability predicted only few domains.
- Living in NH predicted worse SQ in several domains.
- Women had poorer total PSQI, longer sleep latency and used more sleep medication than men.
- Older age significantly predicted only the use of sleep medication.

Table 1. Descriptives and significant predictors of PSQI (all regression models are significant)

PSQI (↑ score ↓ SQ)	TR	M (SD)	Sex	Age	NH/OH	SH	FA	LS
Total Score	0-21	7.41 (4.18)	*			*		*
1 Subjective Sleep Quality	0-3	0.98 (0.74)				*		*
2 Sleep Latency	0-3	1.35 (0.99)	*				*	*
3 Sleep Duration	0-3	1.03 (1.13)			*			*
4 Sleep Efficiency	0-3	1.29 (1.25)			*			
5 Sleep Disturbances	0-3	1.41 (0.56)				*		*
6 Use of Sleep Medication	0-3	0.97 (1.30)	*	*	*	*		*
7 Daytime Disturbances	0-3	0.39 (0.70)			*		*	

Notes: SH= Subjective Health; FA = Functional Ability; LS = Life Satisfaction. * = $p < .05$, * = $p < .01$;

Conclusion

- Contribution of psychosocial factors in SQ prediction in older age points to the necessity of investment in sleep hygiene education and psychosocial support, especially to NH residents.
- These results and separate analyses of SQ predictors in NH and OH older adults are called for to enable tailoring preventive strategies according to specific needs and their resettlement.

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