Exploring sleep disturbances in cardiac arrest survivors

- A phenomenographic interview study from registered nurses' perspective

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Purpose

Studies have shown that sleep disordered breathing (SDB) and obstructive sleep apnea (OSA) increase the risk of sudden cardiac arrest. However, guidelines about sleep disturbances are not included in the European Resuscitation Council (ERC) guidelines for post-cardiac arrest care. The aim was therefore to describe sleep disturbances and insomnia in persons surviving sudden cardiac arrest (SCA) from a nurse perspective.

Materials and method

An explorative design with a phenomenographic approach was used. A purposeful sampling of 19 registered nurses (RNs), 30 to 66 years old, were recruited. The participants cared for SCA survivors and registered patient reported outcome measures (PROM) to the Swedish national register of cardiopulmonary resuscitation by interviewing survivors after hospital discharge. Qualitative, semi structured interviews were performed during 2016/2017, face to face with the participants.

Results

Preliminary results show that the RNs were unaware of sleep disturbances following SCA and therefore seldom introduced a conversation about sleep with the survivors. At the hospital ward in the acute phase the RNs did not expect that the patients would have a good sleep. During the follow up interviews, the RNs perceived no directly information about sleep disturbances among SCA survivors, and the RNs did not ask directly about the sleeping situation. However, sometimes survivors expressed daytime sleepiness, even in some cases a fear of falling asleep. The RNs perceived that many of the SCA survivors had fatigue, experienced mental tiredness and felt the need of a nap at daytime.

Conclusions

It is important for RNs and also SCA survivors to have knowledge of sleep disturbances following SCA and possible complications as a consequence. Guidelines about post-cardiac arrest care should be updated about sleep disturbances in the SCA population.