

Management of sleep disturbance: A survey of current practice in the United Kingdom (UK)

J. Freeman¹, P. Cowan², S. Hourihan³, E. Johansson-Charles⁴, K. McDowall⁵, A. Nock⁶, H. Rowlands⁷

¹*Plymouth University School of Health Professions, Peninsula Allied Health Centre, Plymouth, PL68BU, Great Britain*

²*NHS Lanarkshire Kenilworth Medical Centre, Kenilworth Court, Cumbernauld, G671BP, Great Britain*

³*University College London Hospital Therapy and Rehabilitation, Queen Square, London, WC1N3BG, Great Britain*

⁴*Northwick Park Hospital Physical Disability Support Team, Watford Road, Harrow, HA13UJ, Great Britain*

⁵*South London Healthcare Trust Elmstead Unit, Frognal Avenue, Sidcup, DA146LT, Great Britain*

⁶*Poole Hospital NHS Foundation Trust MS Service, Longfleet Rd, Poole, BH152JB, Great Britain*

⁷*Stockport NHS Foundation Trust Devonshire Centre for Rehabilitation, Cherry Tree Lane, Stockport, SK27PZ, Great Britain*

Objective: Sleep disturbance affects quality of life & is related to increased morbidity in MS. It may be a primary problem or secondary to symptoms. Management requires input from multi-disciplinary team members (mdt). While recommended that sleep disturbance should be addressed within daily management, there is a lack of literature describing what comprises routine practice. This ethically approved study was undertaken by the Research Group of Therapists in MS (TiMS), a national network of MS therapists. It aimed to gain an overview of sleep disturbance management by UK nurses & therapists.

Methods: In this cross-sectional survey all 256 delegates at the 2011 MS Trust Conference were provided with a questionnaire & were encouraged to complete it during the 3 day period. *Survey instrument:* A literature search failed to unearth a relevant questionnaire & thus one was developed, through an iterative process, via TiMS web-based discussions, published literature & a 1 day Research Group meeting. A draft questionnaire was piloted on 20 people reflecting those intended for inclusion in the survey. The final questionnaire comprised 16 questions with categorical response options (7 socio-demographic, 4 assessment/evaluation; 3 management; 2 knowledge/training), & 1 open ended question. Feedback demonstrated the instrument had good face & content validity.

Results: 180 delegates completed the questionnaire; 70% response rate. Respondents worked across a range of clinical settings, typically as part of an mdt (73%) & within an MS (56%) or neurology specialist (28%) setting. 43% had worked in the MS field for > 10 years, highlighting the considerable MS experience of this group. A range of interventions was used (e.g. advice 50%; fatigue management 16%; relaxation 24%; exercise 29%); typically on an individual basis (65%). While most (84%) considered sleep management to be part of their role, only 10% felt confident in their knowledge about it. Relatively few used specific sleep disturbance instruments, either for assessment (33%) or to evaluate outcome (39%); 37% were not aware specific instruments were available. Perhaps unsurprisingly 49% would value further training on this topic.

Conclusion: This survey provides an initial understanding of current practice by experienced MS nurses & therapists in the UK. It suggests knowledge about sleep disturbance, particularly related to assessment instruments, may be limited. Further exploration is needed to verify these findings across different samples.