INTRODUCTION

Having a good sleep may help to protect one’s mental and physical health and quality of life. University students, especially those in professional courses, tend to have poor sleeping pattern due to the nature of their academic requirement. This study aims to determine the sleep quality of pharmacy students in a public university, its associated factors and their poor quality of life (QoL).

METHODOLOGY

Study design and population: A cross-sectional study was conducted using questionnaires involving undergraduate pharmacy students in Universiti Sains Malaysia.

Study tools: The Pittsburgh Sleep Quality Index (PSQI) was used to determine the sleep quality, while quality of life was determined using Short Form-36 Survey (SF-36). Poor sleepers were defined as having PSQI score of <5 [1-2] and a high percentage of SF-36 score defines good QoL [3].

Statistical analysis: Independent t-test was used to compare the continuous variables between two groups and Chi-square test was used for categorical variables. Univariate logistic regression was performed for variables by batch and number of credit units. A p-value less than 0.05 were accepted as statistically significant.

RESULTS

Figure 1: PSQI mean scores component according to years of study

Graph of PSQI Mean Score Against PSQI Component

Figure 2: Sleep quality among pharmacy students.

There is nearly a 3-fold increase in the risk of being poor sleeper among respondents taking more 20 credit units (OR 2.73, 95% CI 1.38-5.39, p=0.004).

Graph of SF-36 Mean Score Against SF-36 Component

Figure 3: Percentage of sleep duration among pharmacy students.

DISCUSSION

Sleep quality and its associated factor

Our respondents, aged between 18 to 23 years old, require at least 7 hours for normal sleeping hour per day. However, more than half of the students (59%) slept less than 7 hours and it is shown majority of respondents (84%) suffer from poor sleep quality, with 7.6 (±3.3) of the mean global score. Our result was comparable to previous studies conducted among students in health professional courses [4-5].

Each year of study carries different workload throughout the semester. There was significant result between sleep quality and years of study. Third year students showed the highest PSQI global mean score 8.1 (± 3.6); which was expected because of the higher burden in terms of assignments and practical hours in the academic batch year [6]. However, the association was not found to be significant in a univariate logistic regression.

Quality of Life

Our result was similar to the previous study obtained, physical functioning was shown to have the highest score from all SF-36 domains among university students [7-8]. The general health perception among the respondents was at an average of 61.5 (± 20.1). They perceived to be in a good health state, without realising that it was actually lower than their expectation. A previous study conducted on nursing programme in Jordan also presented the same result with the lowest vitality scores [8].

Effect of sleeping quality on quality of life

Emotional well-being is important in maintaining good sleep quality. Our result showed that students with poor sleep quality had a significantly worse emotional well-being as compared to those with a good sleep quality. Few studies did mention on the negative association between stress and quality of life among pharmacy students [9-10].

CONCLUSION

- Majority of our study population had poor sleep quality, and a higher credit unit was a factor for poor sleep quality.
- For QoL, participants had good physical functioning but poor in vitality.
- A lack in emotional wellbeing was shown to be significantly correlated with poor sleep quality.

REFERENCES:
2. CAROLIE, S. (2013). The Pittsburgh Sleep Quality Index (PSQI). Best Practices in Nursing Care to Older Adults: [online] [6], 1, p.1.