

# Dependence of Sleep Disorders on Psycho-Emotional Stress, Profession and Social Situations

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## Abstract:

In this article, we will determine the main causes of sleep disorders (insomnia). The results of theoretical and practical researches are considered. One of the main causes of sleep disorders is psychological and occupational we assumed and tried to prove it.

**Keywords:** insomnia, sleep disorder, research, content of thoughts before sleep, stress, depression, profession, social environment.

**Relevance:** the relevance of the problem of sleep disorders in the world and in our country is increasing from year to year, according to who, according to data from 2015, 50% of the total population of the planet suffers from sleep disorders of various etiologies. As of 2010, the growth of the disease was 1% -5% per year, and to a greater extent, in our opinion, this is due to the problems of a person in his psychological and professional activities. According to the National Commission for the study of sleep disorders in the United States, 65 million Americans (36% of the adult population) have problems with sleep disorders, about 40 million suffer from chronic sleep disorders, and 20-30 million insomnia (insomnia) has a periodic nature that causes a serious threat of various diseases. About 40,000 people die a year as a result of sleep disorders, with 250,000 injured. Total annual losses associated with sleep-wake cycle disorders are at least \$ 16.5 billion per year in the United States [45]. In Japan, 18.7% of men and 20.3% of women have severe sleep problems, while 11.7% have constant sleep deprivation [26]. Each year, the world scientific community conducts research on sleep disorders in different categories of the population, identifies their causes and offers treatments.

The current economic situation of the country, the working conditions and lifestyle of people contribute to the formation of society, in which a significant part of the population is exposed to certain problems related to sleep, including its lack [116].

According to some authors, sleep disorders are one of the most common psychopathological conditions. Lack of sleep leads to excessive drowsiness, decreased performance, fatigue, errors, as well as negative changes in the emotional sphere. The main function of sleep is to restore physical and mental strength, allowing maximum adaptation to external and internal environmental conditions [26].

A. M. At the first Moscow State Medical University named after Vein. I.M. Sechenov conducted a study of sleep disorders in a large group of neurosis patients. A preliminary examination revealed various diseases of insomnia, without exception, in all of them [2]. All these studies are valuable, comprehensive and effective, but they have already been diagnosed by clinical psychologists and carried out with people who are more concerned with the psychophysiological problems of insomnia. Without a deep psychological study of the individual, it is still a challenge for us to understand what is the cause of this disease and what is the consequence. Our work is aimed at studying the psychological and occupational-related causes of sleep disorders, as it is a prerequisite for psychological hygiene for healthy people or those who consider themselves healthy. Often, insomnia itself is a symptom and becomes an additional cause of sleep disorders. This happens when the patient turns his attention to him and is afraid of impending difficulties in falling asleep. Research of scientists of the Faculty of psychology of Moscow State University. M.V. Lomonosov showed that the condition of patients who did not treat the original cause of this disease on the problem of insomnia, focusing only on the insomnia itself and its consequences, worsened. Similar results were obtained in studies at the Moscow Medical Academy. I.M. Sechenov pathopsychologist E.I. By Rasskazova. He came to another important conclusion: "with the seriousness of psychological factors in the development and chronic development of insomnia, the effect of drug therapy is minimal" [8]. All sleep disorders or dissomnias are divided into three groups. The first group is presomnia diseases of drowsiness, a person cannot fall asleep for a long time. He is disturbed by thoughts about problems and unresolved issues, at least waiting for a state of drowsiness and getting angry about it. The fear of not being able to sleep the next night is added. When sleep occurs, this is usually normal. The second group is intrasomnia disorders, in which it is common to go to sleep, but during the night sleep is interrupted one or more times. After that, sleep can come immediately or, on the contrary, not fall asleep for a while. There is a feeling of light sleep or semi-sleep, in which the patient thinks about his problems all night. In the morning, he wakes up lethargic, feels bad and drowsy. The third group is disorders after insomnia or wakefulness disorders, if a person wakes up too early and can no longer sleep, which leads to sleep deprivation. It also involves waking up kata with force-it is impossible to wake up a sleeping person. Or cataplectic awakening - temporary paralysis of the body during this period in the study of patients with insomnia, scientists found that "the largest group of people suffering from insomnia are people with functional disorders of the nervous system-neuroses" [8, p. 292]. A prerequisite for the development of neurosis is conflict: personal, interpersonal, moral disorders. If the conflict is not resolved for a long time, then somatic, evaluative, emotional and other disorders begin to develop. The second largest group of people with insomnia are people with depression and subdepression. "In classical understanding, depression is a mental disorder characterized by a depressed mood (hypothymia) with a negative, pessimistic assessment of oneself, the present, the past and the future situation ". Another group of people with insomnia are those who experience acute stress (shock from a strong blow) or long-term stress (difficulty). All of the above causes, according to the results of the study, are the main triggers of sleep disorders. However, the opposite can also happen - stress and depression can be consequences of insomnia. The article presents the dependence of sleep disorders on the profession and psychoemotional factors. The results of a study

of the characteristics of sleep disorders are presented in 121 patients aged 18-59 who have sleep disorders.

Various sleep disorders caused by psychoemotional factors were analyzed.



Figure – 1.

The purpose of the study: to assess the quality of life by comparing the clinical course of sleep disorders, early diagnosis, improvement of preventive measures, sleep disorders among patients, depending on professional activity and psychoemotional factors.

Research materials and methods: the study surveyed men and women between the ages of 18 and 59, with different activities, with different marital status and lifestyles. Psychological methods were used: according to the survey, with its help, the study participants assessed the quality of sleep and wakefulness; an inventory of the content of thoughts in Glasgow (GCTI, Harvey & Espie, 2004) it determines the content and seriousness of thoughts before bedtime and when it is impossible to fall asleep; Ch. D. Reactive (situational) and personal anxiety scale by Spielberger - Yu. Khanin;

Using objective and subjective scales, a survey was conducted with the aim of identifying sleep disorders among 133 patients aged 18-59 who have sleep disorders. Based on this survey, a survey was conducted using the Spiegel sleep subjective rating scale, in order to determine the levels of sleep disorders in patients with a diagnosis of primary headache/ Table 1. According to the Siegel sleep subjective scale survey:

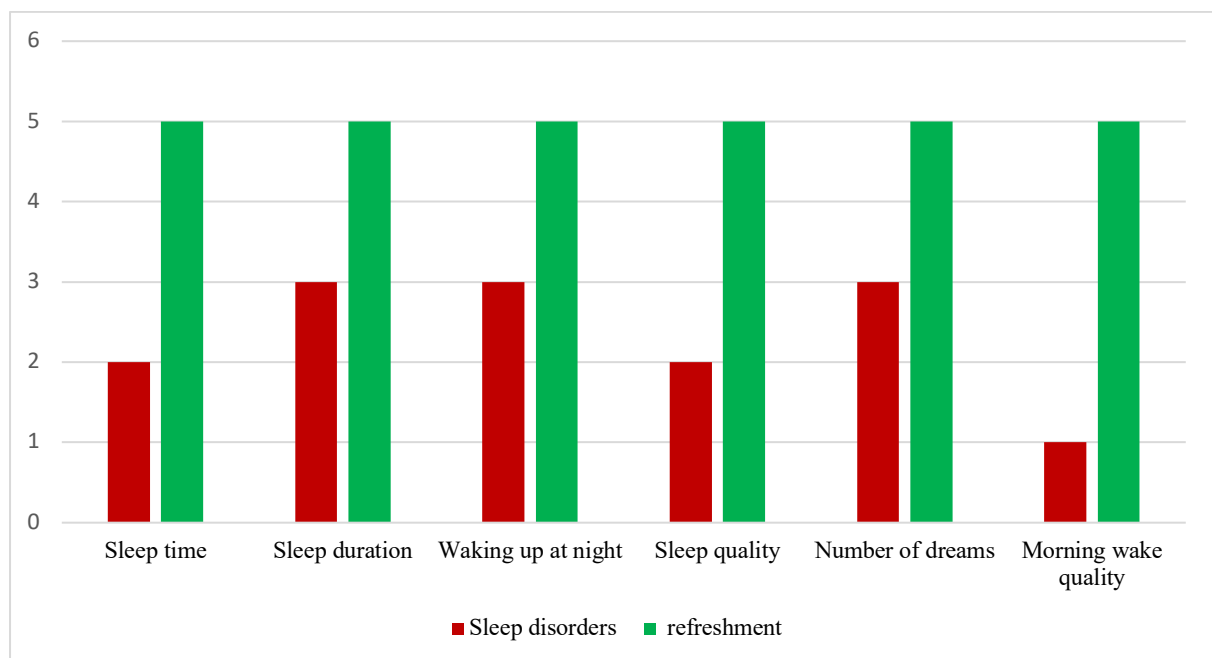


Figure – 2.

Research results: having identified a group of subjects with persistent sleep disorders (insomnia) in our study, we examined their main problem areas. Each participant in this small group has problems with falling asleep: sleep time 1-1.5 hours, shallow sleep with frequent wakefulness, its duration is from 3 to 9 hours, nightmares and severe disturbing dreams are seen, thoughts cannot be stopped, many people before bedtime are afraid of stress and insomnia. Sometimes "restless legs syndrome" occurs. Many cannot calm down. Their state of vigilance is assessed negatively, the psychoemotional state is negative, there are problems with health and loved ones. All subjects indicate a decrease or loss of libido.

**Conclusion:** in place of the conclusion, it should be said that uqu disorder has established a high incidence of sleep disorders in individuals associated with psychoemotional stress and professional activity.

Undoubtedly, solid health, well-being in the family, housing and stable, decent work are extremely important components of our life. They inspire confidence, calmness and interest in life. However, if problems appear in one or all of these areas at the same time, they become the strongest incentive for psychological disorders. Our study shows: in the survey, all respondents who spoke about their health, loved ones, housing and work problems recorded symptoms of depression, stress, insomnia and a stream of thoughts that prevent them from falling asleep. Their subjective assessment is confirmed by the results of standardized tests. Participants show increased fatigue, bad mood, bad sleep, which indicates stress and depression levels. Thus, the early diagnosis of sleep disorders is important on the economic side, in improving the patient's quality of life, maintaining productivity, while the early treatment and the establishment of preventive measures prevent sleep disorders that occur in the patient and the various neurological disorders that result from it. Preventive measures in patients should be avoided in the first place from psychoemotional stresses, stresses, all kinds of meteorological weather, people of different professions especially those who work at night should develop an agenda and return to the right path, provide a sufficient amount of minerals and vitamins in their diet, diet and diet.

Patients with sleep disorders should meet the appropriate specialist (Somnologist, neuropathologist, Psychoneurologist, psychiatrist) and receive the necessary recommendations.

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