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## EFFECTIVENESS OF USING NON-TRADITIONAL TECHNOLOGIES FOR SLEEP DISORDERS

### ЕФЕКТИВНІСТЬ ВИКОРИСТАННЯ НЕТРАДИЦІЙНИХ ТЕХНОЛОГІЙ ПРИ РОЗЛАДАХ СНУ

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**Abstract.** The article is devoted to the problem of stress resistance of students, that suffer from cases of sleep disorders, during the session. Young people, faced with new methods of studying at universities that differ from school, do not always cope with the requirements and workload. During exams, when students are most exposed to stressful situations, there are difficulties for students in overcoming the new learning system, are often accompanied by nervous tension, excessive irritability, lethargy, decreased willpower, and anxiety sleep disorders.

The aim of the study was to improve the health status of students with sleep disorders. A group of students was selected, the main group (MG) with signs of sleep disorders during the pre-examination and examination periods of study.

For the Diagnosis and Treatment of Insomnia, were used the Bergen Insomnia Scale (BSAS) and the Sleep Status Indicator. Students answer the questions of all recommended questionnaires independently. The use of a questionnaires allows detecting sleep disorders, to estimate its frequency, duration, characteristics and impact on the person functioning.

Correction of the lifestyle of students, including an increase in physical activity in general, mandatory exercise in the morning, the use of self-massage techniques, relaxation techniques, changes in living conditions before going to bed, special exercises to normalize sleep - contributed to a significant improvement in the clinical and functional condition, restoration. Maintaining a healthy lifestyle is one of the main components of the primary prevention of diseases and якості життя of the population.

**Key words:** students, physical activity, healthy sleep, optimal mode of work and rest, healthy lifestyle.

**Introduction.** In recent years, the prevalence of sleep disorders associated with psychoemotional stress, emotional and vegetative crises has been increasing, which leads to a decrease in overall health and quality of life (QOL) indicators, Naugolnik (2015). Nesterova (2019) notes that sleep as a component of a healthy lifestyle is a special, genetically programmed, physiological state of the body that occurs periodically. Cherniak (2019), Malakhova et al. (2021), Stretovych et al. (2021) note that there is a decrease in the quality of sleep among students, which is mainly due to physical and emotional factors during academic activities. programmed, periodically



occurring physiological state of the body with a natural sequential alternation of certain stages. Students' academic workloads force them to lengthen the periods of preparation for classes the next day by reducing night sleep, periods of active and passive rest during the day, and changing the diet and quality of nutrition.

According to Bozhko (2017), the threat of psychological health disorders is precisely the stress of academic activity. Students are always under stress, as mental activity is associated with emotional stress, especially during the exam period.

By studying the stress resistance and psychological characteristics of first-year students during the exam session, Zhuravlev et al. (2023) confirmed that during exams, students are most prone to stressful situations, difficulties in overcoming the new learning system, and are often accompanied by nervous tension, excessive irritability, lethargy, decreased volitional activity, and anxiety. Sleep disorders are usually a consequence of psychoemotional stress and manifest themselves in the form of insomnia and inversion (violation of the sleep-wake cycle formula: sleep during the day, wakefulness at night. Insomnia (formerly known as insomnia) is a recurrent disorder of sleep initiation, duration, and quality that occurs despite the availability of sufficient time and conditions for sleep.

Sleep disorders are manifested by disruptions in daytime activities of various kinds. The scientist Naugolnik (2015) notes that emotional and vegetative changes in the body in the first phase of stress are accompanied only by subjective experiences. According to Malakhova et al. (2021), Daskal (2024), studying the problem of sleep disorders among different population groups and identifying ways to eliminate these disorders is extremely relevant today. Among students, academic performance is affected not only by the quality but also by the duration of sleep, with more than 50% of respondents complaining of difficulty falling asleep, approximately 40% of respondents complaining of difficulty waking up, and the rest of them complaining of these and other disorders. The authors Daskal (2024), Malakhova et al. (2021) note anxiety and fear of the session, a heavy academic load associated with emotional stress, lack of sleep, missing classes, etc. The term “sleep disorder” - “insomnia” - is commonly understood as a disturbance in the quantity, quality, or timing of sleep,



which in turn can lead to daytime sleepiness, difficulty concentrating, and memory impairment, i.e., to a deterioration in daytime psychophysiological functioning.

The most important clinical signs of insomnia are: complaints of poor sleep and poor sleep quality. This is a sleep disturbance at least three times a week for a month. It is a preoccupation with insomnia and its consequences (both at night and during the day) caused by unsatisfactory duration and quality of sleep as a severe malaise, impaired social and academic functioning. According to Cherniak A. (2019, Stretovych et al. (2021), the signs of insomnia emphasize the importance of the problem, which requires fundamental study and development of a comprehensive method of recovery.

A working group of the European Society for the Study of Sleep (ESRS), with the active participation of experts from several European countries and specialists from the European Insomnia Network, under the leadership of the European Society for the Study of Sleep, has developed Guidelines for the diagnosis and treatment of insomnia, Riemann D., et al. The authors define insomnia as difficulty initiating and maintaining sleep or early morning awakening associated with such disorders of functioning and well-being during the day as cognitive decline, fatigue, or mood swings. The diagnostic criteria for inorganic insomnia (F51.0) according to ICD-10 are: - difficulty falling asleep or staying asleep, or poor sleep quality; - sleep disturbances occur at least three times a week for a month; - insufficient sleep duration and quality are combined with disruptions in daily activity (third version of the International Classification of Sleep Disorders ICSD-3). A healthy lifestyle is regulated by the Law of Ukraine “Fundamentals of the Legislation of Ukraine on Health Care”. Article 32. Promotion of Healthy Lifestyles of the Population of this Law of Ukraine states that “the state promotes healthy lifestyles of the population by disseminating scientific knowledge on health issues, organizing medical, environmental and physical education, establishing a system of socio-economic incentives for people.

Lyubinets (2020), Kathleen et al. (2022), believe that in everyday life it is worth following the rules of a healthy lifestyle, including: recommendations to get enough rest at night, not to overeat before bed, walk a lot, exercise up to 30 minutes or more, 5 times a week, maintain pleasant contacts (for example, with family); meditate (at



least 10-20 minutes a day, which will help relieve stress); show positive thinking and attitudes (“I can succeed,” etc.).

According to some researchers, Cherniak (2019), Kolesnikov et al. (2024), the measures of modern medicine in providing care to different population groups must take into account the person's lifestyle, in particular the Precision Medicine Initiative (PMI), i.e. personalized medicine, changes in health markers, social and behavioral factors,

The scientific works of Stasiuk et al. (2012), Bull et al. (2020) confirmed the effectiveness of non-traditional methods of health improvement, including an increase in physical activity in general. Plakhtiy P.D. et al. (2015), Kathleen et al. (2022), Hryhus et al. (2021) emphasize the importance of physical culture, physical therapy and physical rehabilitation as components of a healthy lifestyle. Hnydiuk et al. (2021) consider physical exercises to be promising for the development of psychological resilience.

Sokrut (2019), Plakhtii P. D. et al. (2015), Kolesnikov et al. (2024), Kathleen et al. (2022), Hnydiuk et al. (2021) confirm the effectiveness of means of restoring performance, the importance of using types of autogenous training, ideomotor training. Developing the ability to randomly relax muscles, hold and deepen breathing, and reduce emotional stress results in a state characteristic of falling asleep. Performing counting exercises, focusing on something in combination with a horizontal position, muscle relaxation, calm breathing - all this helps to speed up the process of falling asleep.

The purpose of the study was to improve the health of students with sleep disorders. Object of study: students with sleep disorders during the pre-examination and examination periods. Subject of the study: a complex of health improvement for students with sleep disorders. Organization and methods of the study. The study was conducted with a group of first-year students. The survey was conducted anonymously, with the consent of the students.

The participation of respondents in the study was voluntary, and the data was processed confidentially. A group of students was selected, the main group (MG) with



signs of sleep disorders during the pre-examination and examination periods of study. The control group (CG) included students with similar sleep disorders; no pedagogical control over the implementation of health improvement methods was conducted. The Bergen Insomnia Scale (BSAS) is based on modern formal and clinical diagnostic criteria for insomnia. The scale consists of six items, the first three of which address sleep onset, sleep retention, and early insomnia. The Sleep Status Indicator questionnaire (to assess insomnia based on the current DSM-5 criteria for sleep disorders) Bayard S. et al. (2017). Espie C. A. et al. (2014). The total score on the SIS can range from 0 to 10 points, with the higher the score, the better the respondent's sleep quality, Mazur et al. (2021).

The students of the main group (MG) were offered a set of health improvement techniques to eliminate or reduce the signs of sleep disorders. The complex included correction of the diet and nutrition, herbal medicine, and increased physical activity. During the exercises, the functional state and the body's response to physical activity were monitored in dynamics. Students were shown how to monitor heart rate by pulse during exercise and walks (in case of adequate load, the pulse reaches its initial values by the end of the lesson or 2-3 minutes after its completion). In the evening, it was recommended to perform self-massage of individual muscle groups, because mechanical irritation caused to tissues by various self-massage techniques is the initial link in the chain of positive neuro-reflex effects of massage on the body. Muscles should be well relaxed, self-massage should be performed with warm hands (heat helps to relax muscles), along the muscle fibers. Additional relaxation techniques, normalization of diet and rest regimen in order to normalize sleep were performed simultaneously or sequentially with the above procedures.

The students were given recommendations on how to use certain herbal medicine techniques in the evening. A tablespoon of honey in a glass of warm water at night (has a calming effect, induces sound sleep). Tea with oregano leaves (at night, promotes sound sleep). Lavender oil (self-massage): lubricate the fingers of both hands and rub it into the temples with calm, even movements (has a calming effect, induces sound sleep). The use of pedagogical means to optimize recovery processes in order to



improve the quality of life of students through targeted action on recovery processes and lifestyle. Rational combination and sequence of educational and physical activities, proper combination of workload and rest during the day, switching of muscle and educational activities, exercises for muscle relaxation, alternation and duration of rest intervals. Walking (especially before bedtime). Pedagogical supervision and control of students in the CG in the dynamics were not conducted.

**Results of the study.** According to the results of the student survey, it was found that, regardless of gender, some students in the pre-exam period complained of a decrease in academic and general performance, appetite disorders, constant fatigue during the day and an increase in the degree of fatigue accumulated in the evening, general irritability, and the signs were aggravated on exam days.

The above complaints were accompanied by sleep disorders in 100% of cases. Three groups of changes were recorded: presomnolent sleep disorders, intrasomnolent sleep disorders, and post-somnolent sleep disorders. Thus, all 87 students, 57 in the MG and 30 in the CG, complained of poor sleep at night, frequent nighttime awakenings, lack of feeling of vigor, “freshness” and rest after sleep, feeling “broken” in the morning, and daytime sleepiness (Table 1).

**Table 1. Dynamics of changes in manifestations of sleep disorders in MG students under the influence of health improvement**

Indicators	Before n = 57		After					
			Disappeared		Reduce the number of		No changes	
	Abso lutes	%	Abso lutes	%	Abso lutes	%	Abso lutes	%
Presomnic disorders								
Difficulty starting a sleep	50	88	46	92	4	8	-	-
The process of falling asleep takes more than 2 hours.	50	88	50	100	-	-	-	-
Intrasomatic disorders								
Restless sleep at night	57	100	53	92	4	8	-	-
Неспокійний сон вночі	53	92	53	100	-	-	-	-
Post-somnolent disorders								
Dissatisfaction with sleep	57	100	57	100	-	-	-	-
Lack of feeling of vigour, ‘freshness’ and rest after sleep	57	100	53	92	4	8	-	-
Feeling ‘broken’ in the morning	57	100	53	92	4	8	-	-
Daytime sleepiness	57	100	53	92	4	8	-	-





50 (88%) of the patients noted difficulty in starting sleep (falling asleep), a feeling of shallow sleep, and the process of falling asleep took more than 2 hours. The number of students with other disorders, both intrasomnolent and post-somnolent, ranged from 59% to 100% of cases. As a result of using a set of health improvement methods, the initial improvement in the health of students was recorded in terms of the disappearance of signs of sleep disorders, from 90% to 100%.

The analysis of the literature (Liubinet O. V. et al. (2020) and our research allowed us to establish that young people, in particular students, often overestimate the obstacles to leading a healthy lifestyle. In particular, this applies to such indicators as lack of free time and laziness. That is why it is important to strengthen students' orientation to the systematic study of the human body and the formation of personal responsibility for health in order to eliminate insomnia.

Our research also confirms the results of scientists Sereda I. V. (2022. P. 63-70), Permiakov O. A. (2019, P. 335-337) on the necessity of both timely diagnosis of initial psychosomatic changes in the human body and the use of certain methods of psychoprophylaxis of psychosomatic disorders. The importance of adherence to health-saving technologies in the environment among young people who are studying. Our results on the effectiveness of physical activity in general, regular exercise, which contributes to the normalization of sleep, improvement of health and learning activities, are confirmed by the research of Svistelnik I. (2014. P. 284-356), Mahindru A., (2023. e. 33475).

Readiness to change lifestyle, according to Svistelnik I. (2014), Sørensen K., et al. (2012), reflects the theoretical understanding of the need to change one's behavior, and the presence of a link with such indicators as changes in physical activity and active support for healthy eating measures (for example, implemented by a family member). It is an indicator of readiness to use a change in circumstances (e.g., free time) to adopt healthy practices. However, readiness for lifestyle change is linked to access, understanding, and presumably evaluation of health information. The results on the importance of correcting the diet in general and eating in the evening as a preventive and dietary means are confirmed by Gorobey M. P. (2017), and the use of relaxation



techniques is confirmed by Sokrut V. M. (2019). Our results and the data of Plakhtiy P. D. et al. (2015), Bull F. C. et al. (2020), Kolesnikov E. B. et al. (2024) on the correction of lifestyle and physical activity, consumption of herbal teas, a nutritious diet, the absence of stress factors - all this contributes to the rapid restoration of normal sleep.

**Conclusions.** The effectiveness of a complex of rehabilitation methods for students with signs of sleep disorders, including correction of diet, physical activity and rest, herbal medicine, self-massage, and the use of certain muscle relaxation techniques, has been confirmed. Changes in the mode of life and the process of going to sleep, the implementation of certain relaxation exercises contributed to the normalization of sleep, improving the overall health of patients. With improvement and significant improvement, 50 (88%) students completed the rehabilitation course.

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**Анотація.** Стаття присвячена проблемі стресостійкості студентів, які страждають на розлади сну під час сесії. Молоді люди, стикаючись з новими методами навчання в університетах, які відрізняються від шкільних, не завжди справляються з вимогами та навантаженням. Під час іспитів, коли студенти найбільш схильні до стресових ситуацій, виникають труднощі у подоланні нової системи навчання, часто супроводжуються нервовим напруженням, надмірною дратівливістю, млявістю, зниженням сили волі, тривожними розладами сну.

Метою дослідження було покращення стану здоров'я студентів з розладами сну. Була відібрана група студентів, основна група (ОГ) з ознаками розладів сну в передекзаменаційний та екзаменаційний періоди навчання. Для діагностики та лікування безсоння використовували Бергенську шкалу безсоння (BSAS) та Індикатор стану сну. На питання всіх рекомендованих опитувальників студенти відповідали самостійно. Використання опитувальників дозволяє виявити порушення сну, оцінити його частоту, тривалість, особливості та вплив на функціонування людини. Корекція способу життя студентів, що включала збільшення рухової активності в цілому, обов'язкову ранкову зарядку, використання прийомів самомасажу, технік релаксації, зміну побутових умов перед сном, спеціальні вправи для нормалізації сну - сприяла значному покращенню клініко-функціонального стану, відновленню працездатності. Ведення здорового способу життя є однією з основних складових первинної профілактики захворювань та якості життя населення.

**Ключові слова:** студенти, фізична активність, здоровий сон, оптимальний режим праці та відпочинку, здоровий спосіб життя.

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