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Research Article

Factors Affecting Sleep Quality of Treated Patients in the Intensive Cardiac Care Unit Room

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Abstract

Aims: ICCU (Intensive Cardiac Care Unit) is a special room provided in a hospital that treats patients with cardiovascular system problems. Sleep disturbance is one of the significant problems that occur in patients during treatment in the intensive cardiac care unit. Patients in the ICCU are at risk of experiencing sleep disturbances due to various procedures and monitor sounds, noise from communication between staff or noise, sleep disturbances related to lighting, complaints of pain and treatment procedures that occur in >50% of intensive care units. This causes the patient's healing process to be hampered. This study aims to find out factors affecting sleep quality of patients treated in ICCU.

Methods: This research is a quantitative correlational analytic research approach cross sectional study, conducted at a Dustira Tk II Hospital in July-August 2022, the number of samples was 23 respondents. The instruments used included a questionnaire.

Results: There is a relationship between pain and sleep quality with a Pvalue of 0.001. There is a relationship between the environment and sleep quality with a Pvalue of 0.006. There is no relationship between medication and sleep quality with a Pvalue of 0.097. There is no relationship between anxiety and sleep quality with a Pvalue of 0.082. S-regression analysis regarding the factor that most influences the sleep quality of ICCU patients is the factor of pain complaints with a P value of 0.036.

Conclusion: There is a significant relationship between physical complaints and environmental factors on the sleep quality of patients at the Dustira Hospital ICCU. The factor that most influences the quality of sleep is the factor of pain complaints.

Keywords:

Anxiety, ICCU (Intensive Cardiac Care Unit), Patient Sleep Quality

INTRODUCTION

The ICCU (Intensive Cardiac Care Unit) room is room specially provided at home treating pain patient with problem of cardiovascular system. This room is usually

equipped with special medical equipments like a patient monitor with direct cables inside that are connected to the patient's body like cable of monitoring frequency and rhythm of heart, cord and cuff for blood pressure measurement, tools of oxygen

saturation measurement, ECG as well as stand-by ventilators if patient experiences bad condition anytime. Those equipments are used for monitoring condition of patient intensively, so the treatment can keep going continuously. Sleep disturbance is one of the significant problems that occur in patients during treatment in the intensive care unit Cardiac care unit (1). Critical patients during treatment often experience several sleep disturbances, including noise, lighting, diagnostic and therapeutic procedures, mechanical ventilation, drugs, and their critical illness (2). Part Patients experience stress during nursing caused by several things including, fear during treatment, uncertainty about the prognosis of the disease experienced, limited visiting hours so they feel isolated from their families, adaptation to a new environment, treatment procedures, and psychological instability which will further impact on sleep quality experienced by patients during treatment in the intensive care unit Cardiac care units (3).

Patients in are risky to experience sleep disturbances because of various procedures and noise from sounds of monitor. Disturbance is related to sleep with lighting, noise, illnesses, and procedures care occurs >50% in space take care intensive. A total of 220 patients were admitted to the maintenance unit critical heart reported 81% of them had disturbance of sleep. Besides that, CHF patients also experienced anxiety and have bad quality of sleep. Treatment of patients with cardiovascular problem likes beta -blockers have side effect on sleep quality that is reducing level of REM sleep (4). circumstances the exacerbated by conditions disease experienced chronic patient as reason difficult sleep, anxiety, feelings no powerless and disconnected communication with close people including family (5).

Rest and sleep are very beneficial to health. Everyone needs time for rest and sleep and especially for sick people, they need longer

time for rest and sleep than healthy people, this because when people are sick, their body will work so hard to provide energy for the recovery process. Their stamina can recover with rest so that they can do their activity everyday optimally (Potter A, 2015). Short changes in sleeping hours are often experienced by the patients that are being treated in the ICCU room. This impacts on difficulty in achieving REM level that means it is difficult for sleep restful which results patients easy wake up. Noise, lighting, intervention nursing, medicine and pain are things that make patients difficult to sleep in the ICCU (6).

Sleep is very important need for human in providing stamina for body whether in good health or sick. When we are asleep, some hormones in the body such as serotonin and growth hormone undergo chemical changes and nutrition cellular enhancement (7). Average needs sleep per day in adults is 6-8 hours, as well as people who are sick who are treated in the ICCU room need same sleep time for restore condition from fatigue as well as improve body stamina. Patients who are treated in the ICCU room are very possible to have bad sleep quality that makes patient dissatisfied with their sleep, with visible signs like the existence of panda eyes or black color around bag eyes and eyes are also swollen. The quality sleep deprivation in patients in the ICCU can cause immune system of body to reduce, so the healing process and broken body cell repairing are obstructed (8).

According to (9) there are two disturbance of sleep types on the patient that are disturbance of sleep related with medical factors and disturbance of sleep related with psychology factors as well as disturbance of sleep as consequence treated in the ICCU room. Disturbance of sleep related with medical factors is insomnia because of complaint of pain and medication. Disturbance of sleep related with psychological factors that affects quality sleep of patient is anxiety, meanwhile disturbance of sleep related to



treatment in the ICCU room is environment factor. It can be concluded that there are four factors that cause disturbance of sleep on the patient in the ICCU room, they are complaints of pain, environment, medication, and anxiety. Complaint of pain makes patients awaken when sleep. The environment in the ICCU is rowdy or noisy that comes from patient or the nurses who watch medical equipment like alarm monitor, lighting in the room which is too much light or dark cause patient feel uncomfortable for rest (9).

Frequently interruptions cause fragmentation of sleep including the stimulus such as shortness of breath, chest pain, frequently urination (BAK), headache, and fatigue that make patients often awaken at night and do not sleep well. Environment factor such as the monitor that is always on beeps causes quality of sleep of patient heart in Cardiac Intensive Care turns down among them is tool medical like, voice patient another, light that room too contrast and temperature that room too resulting cold he woke up patient from sleep. Factor medication or drugs taken by the patient with problem heart like beta blockers as antihypertensive medication and failure heart congestive have effect possible side lower REM phase, wave slow sleep as well as enhancement sleep noon day. Likewise with drugs antidepressant could lower sleep in the REM phase and can cause disturbance sleep in period a long time (10).

Worry is strong feelings to Fright or horror to something cause that is n't is known sure. Patient experiencing heart difficult sleep caused by incompetence heart for maintain adequate oxygen. Heart failure patients who are treated in the ICCU experience period Respiratory cheynes stokes, condition like this trigger happening lack of oxygen gas in blood or hypoxaemia heavy, often wake up, increase sleep Step one and decline total sleep time. Treated patients in the ICCU room on stage recovery myocardial infarction often lost time sleep and experience REM (9). According to research

by Sari (11) regarding influencing factors quality sleep ICCU patients show there is connection Among pain complaints with quality sleep with p-value = 0.016 <0.05. On the questionnaire, several respondent answer often awakened from sleep because chest pain (80.6%) and urination with catheter (77.4%), sick head (48.4%) as well fatigue (54.8%). Based on study the could concluded complaint painful is most influential factor to quality sleep ICCU patient. According to results Hadi's research about disturbance sleep in the ICCU Room stated results that part big patient as many as 18 people (60%) experienced enough sleep impaired and 12 patients (40%) experienced very disturbed sleep. Results of research conducted for look description subjective sleep ICCU patients by Marfiani & Pujasari (12) show disturbance sleep currently as much as 47.22% and 25% experienced disturbance sleep. Other research about experience in treated patients in room intensive claim that there are 12% of respondents say ie time short sleep for rest most often felt. Another issue that has recognized and considered Becomes serious problem During not enough more two decades by patients critical moment treated ie Sleep disruption (13). On research in Iran Shahrekord found that 51% of patients failed heart experience difficult sleep (7). Based on studies (14) about influential factor to quality sleep patient to 80 respondents at home Sick Regional General Hospital (RSUD) tasikmalaya west java that majority subject study experience quality poor sleep in ICCU (58.7%). Research results (15) about influencing factors quality sleep on the patient infarction myocardial I that as much as 47.4% of the subjects study suffer quality bad sleep. this caused by an attack resulting recurrent heart chest pain in patients.

The results of another study were conducted by (16) to 10 respondents who have disease fail heart in the home ICCU room sick dr. M. Yunus Bengkulu. Research results conclude that 60% of respondents have quality bad sleep. This affected by

symptoms from disease experienced heart patient like crowded breath and fatigue, research this supported by the opinion (17) that aggravating factor quality less sleep is condition physiological like disease physical cause painful or inconveniences physical like pain and trouble breathe. in patients with fail heart often get therapy drugs like the drug furosemide (diuretic). patient will often annoying urination quality sleep patient. This result is also supported by results Agustin Destiana's research (2016) concluded that there is influence pain, environment and drugs to quality sleep patient. There is disturbance sleep means individual not yet capable Fulfill need basically. because that nurse must capable Fulfill need base such, with method knowing pattern sleep you have someone, factors that can disturbing sleep, habits that are done before sleep, as well method resolve problem sleep with give drug proper sleep and usage technique relaxation for Upgrade sleep. If disturbance sleep bad patient if no overcome with soon, will disturbing health physical and emotional will slow down the recovery process or healing the disease (Destiana,

2012). Based on factor reason quality sleep on could concluded that nurse hold role urgent in Upgrade health and healing patient for problem difficulty sleep potential or actual, educational client about habit sleep positive as well as modify environment care supporting health need sleep patient. On research this there is difference total variables examined by researchers previously with study this. researcher previously no measure the most influential factor to quality sleep with study this. This is the background researcher for do study to influencing factors quality sleep treated patients the ICCU room.

METHODS

This is study quantitative with method study observational analytics. Study was conducted in ICCU room, general hospital of Dustira Cimahi. Study this done start the month of July until with August year 2022. Population in study this is There were 23 patients treated in the ICCU room. Taking sample done with convenience sampling technique. Convenience sampling or accidental sampling.

RESULTS

Table 1. Characteristics Respondents Based on Age, Type Gender, Education and Occupation (N=23)

Characteristics	n(%)
Age	
(Mean ± SD)	49.48 ± 11.164
Type Sex	
Boys	10 (43.5%)
Woman	13 (56.5%)
Education	
Elementary school	5 (21.7%)
Junior high school	7 (30.4%)
Senior high school	7 (30.4%)
College	4 (17.4%)
Profession	
No Working	5 (21.7%)
Housewife	4 (17.4%)
civil servant	1 (4.3%)
Private	12 (52.2%)
TNI/POLRI	1 (4.3%)

Based on Table 1. uses presentation frequency above show that the average respondent aged 49.48 years (SD= 11.164), partially big respondent manifold sex women (56.5%), in part respondent educated junior high school (30.4%) and senior high school (30.4%), more from half respondent have profession sector private sector (52.2%).

Table 2. Distribution Frequency Based on Complaint Pain, Environment and Medication (N = 23)

Variable	Frequency	(%)
Complaint Painful		
No Pain	11	(47.8%)
Painful	12	(52.2%)
Environment		
No Noisy	10	(43.5%)
Noisy	13	(56.5%)
medication		
No Consumption	20	(87%)
Consumption	3	(13%)

Based on table above showing that part big respondent experience complaint painful namely (52.2%), more from half respondent feel noisy environment (56.5%), and some big respondent no consume medication for help sleep (87%).

Table 3. Analysis is Descriptive based on total anxiety and total quality sleep (N = 23)

Variable	Means (SD)	Minimum Maximum
Total Anxiety	39.78 (9.327)	14-56
Total Quality Sleep	14.22 (3.074)	10- 20

Based on table above show that the average of the total score anxiety 39.78 (SD = 9.327; range 14-56) and the average total score quality sleep 14.22 (SD= 3.074; range 10-20).

Table 4. Connection complaint pain, environment, medication, anxiety with quality sleep ICCU patients

Variable	Total Quality Score Sleep	
	R	p-values
Complaint painful		0.001
Environment		0.006
medication		0.097
Worry	-0.371	0.082
Note : ** p < 0.01, *p < 0.05		

Research results using the Mann- Withney test based on Complaint painful to quality sleep with level a significance of 0.001 ($p < 0.05$) indicates there is significant relationship Among Complaint painful with quality sleep ICCU patients. Research results use Mann- Withney Test based environment to quality sleep with level a significance of 0.006 ($p < 0.05$) indicates there is significant relationship Among environment with quality sleep ICCU patients. Research results use Mann- Withney Test based on medication to quality sleep with level significance of 0.097 ($p > 0.05$) indicates no there is connection Among medication with quality sleep ICCU patients. Research results use Pearson correlation based on worry to quality sleep with level significance of 0.082 ($p > 0.05$) with value of $r -0.371$ indicates no there is connection Among worry with quality sleep patient ICCU.

Table 5. Relevant Factors with Quality Sleep Patients Treated in the ICU Room

Factor	B	Std Error	t	Pvalue	R
Complaint Painful	-3,497	1,503	-2,326	0.036	0.725
Environment	0.551	1,380	0.400	0.696	
medication	-2,811	1,804	-1,558	0.142	
anxiety	-0.131	0.065	-2019	0.063	

Based on Table 5. Multivariate analysis results use Linear regression obtained the value of R Square 0.725 which means from four variables viz complaint pain, environment, medication and anxiety explains 7.25% (R square 0.725) of the dependent variable (Quality sleep) and significant statistically value ($p < 0.05$). Related factors with quality sleep ICCU patients use linear regression shows that factor symptom complaint physical ie painful is the most significant factor relate with quality sleep ICCU patients statistics with p value 0.036 < 0.05 with Beta -3.497.

DISCUSSION

Age

Based on results the average respondent research aged 49, 48 years (SD = 11.164). Age influence happening disorders of the cardiovascular system or disease heart, p this due to age old function heart already experience decline and occur changes to the system cardiovascular like narrowing

artery by plaque, wall heart thicken, and space booth heart shrink (Kusuma, 2017).

Gender

Based on results study part big respondent manifold sex female (56.5%). According to the American Heart Association (2015), incidence disease cardiovascular dominated by type sex girl. Type of respondent sex women in research this part big 49.48 years old where part big already experiencing menopause. When menopause occurs decline rate estrogen too decreased HDL (High Density Lipoprotein) and increased LDL (Low Density Lipoprotein), triglycerides, and total cholesterol which increases risk disease heart coronary (Sari et al, 2018). No only because problem physiological like menopause alone, from facet psychological women also more easy attacked disease compared to man.

Education

Based on results study part respondent educated junior high school (30.4%) and

senior high school (30.4%). Knowledge increase so motivation and behavior somebody could change. Education level somebody could made indicators and descriptions about ability somebody in increase knowledge knowledge. Education level could influence abilities and knowledge somebody in apply behavior life healthy, mostly for prevention nor care the disease (18).

Profession

Based on results study more from half respondent have profession sector private sector (52.2%). Profession including in circumstances who can make stress chronicle to be trigger happening disease heart with increasing hormone cortisol and catecholamines. employment status no determinant main a respondent have risk tall for caught disease heart , will but if style life respondent not enough good and no capable manage burden work with good so will could trigger the stress it causes happening disturbances in the heart (19).

Complaint Painful

Research results showing that part big respondents (52.2%) experienced disturbance sleep because feel that pain suffered. Research results this in line with research conducted (5) of the 30 respondents studied show part big respondent experience painful moderate 11 respondents (37%), mild pain 8 (27%), severe pain 4 (13%) no pain 7 (23%). Pain can raises decline Lung vital capacity and incidence hypoxaemia so that body do compensation with Upgrade respiratory frequency to fulfill need oxygen body. Short breaths this could bother sleep.

People with problem health physical and Psychology of course experience disturbance sleep. Disease can cause problem atmosphere heart like pain, discomfort physical, so cause disturbance sleep. Somebody have problem health usually difficult for start and stay asleep (8). Problem complaint associated pain with disturbance sleep in ICCU patients is disturbance cardiovascular. It is known that

25% of individuals with hypertension also experienced Sleep Apnea Syndrome Obstructive (OSAS). According to assumption researcher intensity frequent pain in heart disease kit could cause convenience patient in activity rest and sleep at night day.

Environment

Research results showing that part large (56.5%) patients feel noisy. Research results this in line with study (20) shows that of the 36 respondents who stated disturbing ICCU environment there are 4 respondents and 4 respondents such (100%) quality his sleep bad, meanwhile respondent state ICCU environment is not bother have quality good and bad sleep each 16 respondents (50%). Environment influential to quantity and quality sleep individual. Condition comfortable and quiet environment make individual sleep more restful, meanwhile condition rowdy environment or noisy cause individual difficult for sleep. on factor frequent environment stimulate his flight patient at night day is light, noise, temperature and interference by other (9). Based on results observation researcher source voice taste from the monitor alarm too loud and sound the occasional nurse too brisk moment communicate with friend colleague During service.

Medication

Research results showing part big respondents (87%) did not consume drugs yes could support treated sleep the ICCU room. Medication consumed somebody something has an effect cause sleep, there is also the opposite annoying sleep. For example, medicine class amphetamine will lower quality REM sleep. Disturbance maintain sleep could connected with use continuing medication continuously or effect break drug from various type medication as well as substance related. Break drug arrive sudden events that occur in patients in the ICCU can trigger strengthening back to REM massively. Continued use continuously or effect break drug from antidepressants, monoamine

oxidase inhibitors, propranolol and phenytoin may also be used contribute against insomnia (9). According to results observation researchers on respondents moment research, respondents no get recipe drugs from doctor like class drug amphetamines, propranolol, phenytoin which can trigger happening effect side like difficult sleep, weight gain, fatigue, and feeling of hands and feet cold.

Anxiety

Research results showing that the average of the total score anxiety 39.78 (SD = 9.327; range 14-56) close score maximum. Study this in accordance with results research conducted by (21) on 33 respondents who were treated in the ICCU room found that from a total of 30 respondents studied the majority of 23 respondents (76.7 %) experienced worry light until being influencing quality his sleep. stress psychological stress psychological influence sleep with two way, the first people experience stress feel difficult for feel comfortable sleep in accordance with what is needed. Second, reduced REM sleep in inclined amount add anxiety and stress. Condition stress emotional and anxiety could Upgrade rate norepinephrine blood through system stimuli nerve sympathetic. Condition this cause decrease cycle stage IV NREM sleep and frequent REM sleep awake moment sleep. Quality sleep in adults middle experience change time used for sleep start decreased. Period stages sleep at stage 4 start decreased. Often found disturbance sleep caused by change and stress or worry (22). Stress or experienced anxiety patient could stimulate system nerve sympathetic for emit catecholamines, glucagon and hormones cortisol -a steroid that affects the deep CNS increase anxiety, breath fast, hypertension and tension muscle. Likewise can stimulate RAS (Reticular Activating System) function that regulates whole phase cycle sleep, increasing sleep latency and decreasing efficiency covering sleep enhancement frequency wake up at night day.

Quality Sleep

Research results shows the average total score quality sleep 14.22 (SD = 3.074; range 10-20). Research results this in line which shows part big patient infarction myocardial Acute in RSUD Moewardi Surakarta has quality bad sleep. Mentioned there is a number of thing that can affect quality sleep including diseases that cause discomfort disturbance like pain, tightness breath and cough besides that fatigue, nutrition, and stress will make difficult for sleep, plus again action nurse to patients who are done 2 -3 times per night matter this could make REM sleep becomes short and sometimes no get REM sleep is the same once. According to researcher part big respondent experience quality bad sleep matter this influenced by anxiety, noisy environment and pain from illness patient (23).

Connection complaint painful with quality sleep

Research results obtained the p value is 0.001 which means there is significant relationship Among complaint painful ie painful with quality sleep. Study this find data from record medical Respondents who were diagnosed by a doctor almost half from respondent suffer fail cardiac grade II ie Symptom light (tight breath mild and /or angina) and restrictions light moment activity. Where is the sufferer? fail grade II heart have partial proportions most (52.5%) experienced quality bad sleep. Changes in quality sleep this caused by existence change in a manner pathology in patients like emergence crowded breath, chest pain and presence time limit activity. Patient with fail grade II heart already feel exists changes to the pattern his life because condition it hurts. this could raises possible pain influence quality his sleep. Function weakened heart consequence fail heart produce symptom breath shortened at the moment activity, easy fatigue and retention fluid in the legs (swelling) as well chest pain Patients of many years suffer narrowing vessels heart coronary,



hypertension, condition cardiomyopathy could influence condition muscle resulting heart too weak for pump blood to whole body, final stage from disease this is condition fail heart. Someone who has disease heart, sleep will disturbed because perceived pain (24). Pain and discomfort due to angina or dyspnea happened at night day and got bother sleep (25).

Connection environment with quality sleep

Research results showing there is significant relationship Among environment with quality sleep with value 0.006. Research results this support results research conducted by (26) where found that level generated noise from influential ICU environment real to quality sleep patient with a p-value (0.020). (17) say that environment physical the place somebody sleep influential on ability somebody for fell asleep. Voice alarm monitor, communication yang noisy among the service team level lighting, temperature room room could influence quality sleep. Factor environment no only got from a number of the components mentioned previously but also can got from temperature room, ventilation room, size, hardness and position the place sleep. Results study which got only interpret a number of component no whole component from environment so that could concluded that factor environment influence quality sleep ICU patient. Environment sleep respondent which meant is environment the place sleep (room) on the spot respondent treated.

In sunny conditions or light sun could make patient awake and sad sleep. (27). Light effect produce melatonin. Melatonin is produced by the pineal gland which is in the brain great influence in help to quality sleep. at night day, body produce more lots of melatonin for help We fell asleep. Meanwhile during the day day, the amount of melatonin produced more a little so that We permanent awake. Hormone problems this can raises disturbance sleep. Disturbed

performance the hormone melatonin inside body can caused by various thing, incl radiation electromagnetic or silk, and light from lamp sleep (27).

Environmental stimuli could lowered with darken room patient, dim lighting, except for lamp aimless little night for safety client, and closes curtains. Reduce noise as much as possible possible with avoid conversation that is n't need between staff and patients, minimizing voice from patient monitoring equipment and close up door room patient, if allows. Staff on duty could set the temperature with give blanket in accordance with choice patient and modifying room temperature with arrange thermostat or close door (9).

Harkreader, Hogan, and Thobaben (2013) revealed that House sick is unfamiliar place most patient. Voice noise, light lights, places less sleep and temperature comfortable, restrain position that is not convenient, lack privacy and control, anxiety and worry, separation with loved ones as well as deprivation sleep could raises problem sleep in hospitalized patients sick. light level could influence somebody for sleep. Anyone can sleep with light lamp but there is also someone who just can sleep if lamp turn off or in circumstances dark. Inconveniences from temperature environment and lack ventilation could influence sleep (28)

According to observation researcher at the time study quality poor sleep in hospitalized patients caused by the sound too noisy like measuring monitor sound signs vitals and sourced sound from communication between nurse nor officer health other moment serving.

Connection medication with quality sleep

Research results showing no there is connection Among drugs with quality sleep with a p-value of 0.097. Explains that benzodiazepine drugs can Upgrade time sleep and improve daytime sleepiness day. Hypnotic cause feeling excessive sleepiness.

Narcotics (morphine or demerol) can push REM sleep and improve feeling daytime sleepiness day. Zarcone (1994) states that effect caffeine and nicotine on the system nerves center could make somebody difficult for start sleep and influence pattern sleep (Kozier, Erb, Berman, & Snyder, 2014). In research by Carrier, et al (2017) conducted in Canada, examined about effect caffeine conclude that consumption caffeine before sleep on someone with phase abnormal circadian like have bad consequences on quality his sleep than coffee before sleep on someone with phase normal circadian. However according to researcher no there is influence from drugs consumed patient because no more from half patient manifold sex female, only a little patients who get antianginal therapy from doctor specialist heart moment treated so that matter this no bother quality sleep patient.

Connection worry with quality sleep

Research results showing no there is connection Among worry with quality sleep patient p -value $0.082 > 0.05$. this result same with results research conducted by (5) showing that no there is connection Among worry with quality sleep ICU patients with value 0.595. Stress or experienced anxiety patient could stimulate the nervous system sympathetic for emit catecholamines, glucagon and hormones cortisol -a steroid that affects the deep CNS increase anxiety, breath fast, hypertension and tension muscle. Likewise can stimulate RAS (Reticular Activating System) function that regulates whole phase cycle sleep, increasing sleep latency and decreasing efficiency covering sleep enhancement frequency wake up at night day. Worry is integral part of quality bad sleep, where worries will sleep is one factor originator from chronic insomnia. Many individuals with experiencing insomnia anxiety at the time approaching sleep because afraid no can sleep and the consequences that will be they natural during the day the day. Enhancement worry this can increase arousal when the arousal

state should be decreased, so finally lower opportunity for sleep, and so it happened anxiety insomnia cycle (29). Opinion the supported by the research of (30) who found exists enhancement anxiety 2 - fold in individuals with insomnia compared sleeping individual. According to assumption researcher results study this no relate because majority treated patients moment study is existing patients more from once treated treated in ICCU, so matter the will impact for patient safety and comfort so that perceived anxiety Becomes reduced.

Analysis Multivariate

Related factors with quality sleep ICU patients use linear regression shows that factor complaints of pain i.e painful is the most significant factor relate with quality sleep ICU patients statistics with p value $0.036 < 0.05$. People with problem health physical and Psychology of course experience disturbance sleep. Disease can cause problem atmosphere heart like pain, discomfort physical, so cause disturbance sleep. Somebody have problem health usually difficult for start and stay asleep (8). Problem complaint associated pain with disturbance sleep in ICU patients is disturbance cardiovascular. It is known that 25% of individuals with hypertension also experienced Sleep Apnea Syndrome Obstructive (OSAS). Deep client Step recovery infarction myocardium often lost time sleep they During treated unit care Intensive Cardiac Care Unit (ICCU) and maybe experience intense REM moment moved unit HCU care. The more big need heart During REM sleep will be the more add load on recovery heart (9). Every disease that causes pain and discomfort physical could cause problem sleep. Flavor painful and inconveniences consequence angina or dyspnea occur in night day and could bother sleep (25).

CONCLUSION

Based on results study which has done so could pulled a number of conclusion as

following : Average - Average Respondents 49.48 years old with Standard Deviation 11.164, Majority respondent manifold sex woman as many as 13 people (56.5%), Majority respondent 7 people with junior high school education (30.4%) and 7 people with high school education (30.4%), Majority respondent have profession as private as many as 12 people (52.2%), Majority respondent have complaint painful as many as 12 people (52.2%), Majority respondent say environment noisy as many as 13 people (56.5%), Majority respondent no consume medication for support sleep as many as 20 people (87%). The average of the total score anxiety 39.78 (SD= 9.327; range 14-56), Average total score quality sleep 14.22 (SD= 3.074; range 10-20). There is a relationship complaint pain with quality sleep patient in Dustira Hospital ICCU Cimahi p-value 0.001. There is a relationship environment with quality sleep patient in Dustira Hospital ICCU Cimahi value 0.006, No there is connection Among medication with quality sleep patient in Dustira Hospital ICCU Cimahi value 0.097, No there is connection worry with quality sleep patient in Dustira Hospital ICCU Cimahi value 0.082. The most influential factor to quality sleep patient in Dustira Hospital ICCU Cimahi is factor complaint painful ie painful value 0.036.

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