



*Lifestyle & Prevention*

## **Body-mind exercises and quality of sleep in older people**

Do they work to improve quality of sleep and quality of life?

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Sleep problems are often a key issue in older people. They include waking up at night, waking up early, difficulty with falling asleep, and lead to more daylight sleep, less sleep efficiency, daytime drowsiness, altered quality of life, higher cognitive and memory dysfunction and even increased risk of falls and injuries. Some studies have highlighted long-term effects and correlations with heart disease, obesity or diabetes.

It is recommended to treat sleep issues at first with non-pharmacological approaches. Complementary and Alternative Medicine (CAM) are therefore regularly studied in literature as they providing an alternative way to influence bodily functions. Body-mind techniques have specially showed good results on psychological wellbeing, sleep quality, depressive symptoms and quality of life while being cost-effective and safe.

The present study assessed the effectiveness of a combination of CAM – i.e. deep breathing exercises and body scan meditation combined with music (DBM) – on the quality of sleep and quality of life of older people suffering from poor sleep quality. This approach showed positive effects on both outcome measures when practiced on a daily basis.

This randomised controlled trial included sixty participants who met strict inclusion criteria. They were randomly assigned to one of the following groups :



- The intervention group (DBM group): thirty participants received deep breathing exercises and body scan meditation along with music during eight weeks. They learned how to perform deep breathing exercises and guided body scan meditation with music through weekly thirty-minute classes during the first month. They were instructed to practice the same routine before sleep on a daily basis. More details of the intervention can be found the in the full article (see below).
- The control group: thirty participants followed routine care without any intervention. They only got a training on sleep hygiene once a week during four weeks. They also received guidelines concerning sleep hygiene.

Both groups were trained and assessed separately in time and space. Baseline data were collected before randomisation. The researcher – who collected data before and after the study – and the participants were blinded for allocation.

The primary outcome was sleep quality assessed through the PSQI (Pittsburgh Sleep Quality Index) which measured the quality and patterns of sleep for older people via self-report. The secondary outcome measure was quality of life which was measured with the Pictorial Thai Quality of Life questionnaire (PTQL).

The results showed that deep breathing exercises and body scan meditation along with music significantly improved the PSQI as a whole, and especially the sleep quality items (particularly sleep efficiency, perceived sleep quality and daily disturbances). Quality of life also significantly improved in terms of physical, cognitive, social and affective functioning, and self-esteem.

The authors concluded that the intervention improved sleep quality and quality of life in older adults with poor sleep quality. Therefore they suggest that healthcare professionals could use and recommend body scan meditation associated with deep breathing exercises to improve sleep quality in older adults.

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