

# Can providing quiet time, ear plugs, eye masks and reducing noise and light in general medical wards improve the quality of sleep for patients?

<b>Submission date</b> 29/12/2018	<b>Recruitment status</b> No longer recruiting	<input type="checkbox"/> Prospectively registered
<b>Registration date</b> 19/02/2019	<b>Overall study status</b> Completed	<input type="checkbox"/> Protocol
<b>Last Edited</b> 21/09/2021	<b>Condition category</b> Mental and Behavioural Disorders	<input type="checkbox"/> Statistical analysis plan
		<input checked="" type="checkbox"/> Results
		<input type="checkbox"/> Individual participant data

## Plain English summary of protocol

### Background and study aims

36% of patients without a history of insomnia developed sleep problem in the hospital. In this study, we aimed to answer the question of whether reducing noise, light, providing quiet times, earplugs and eye masks for hospitalized patients could reduce the insomnia rate and severity at discharge.

### Who can participate?

Adult patients who are admitted to the medical floors. We require that our patients must be English speakers who are able to read, to hear and to understand our questions in the survey to screen for insomnia.

### What does the study involve?

All the patients consented to the study will be given earplugs and eye masks at the time of their admission. They are given instructions to use them and are advised to use ear plugs/eye masks during the day or at night if needed. Patients were also informed of routine labs and vital sign check time range in the hospital. During that month, patients will be provided quiet time from 4pm to 5pm and at night from 10:00 PM to 5AM. During quiet time, lights were dimmed down in the patients' rooms and in the hallways. Televisions in patients' rooms that are not in use were turned off. Nurses, physicians, physical therapists, medical assistants were encouraged not to speak loudly or interrupt patients sleep unless for emergency cases.

### What are the possible benefits and risks of participating?

Benefits: there is no monetary compensation but patients will be provided with free earplugs and eye masks to take home. Risks: This study poses minimal risks to participants because it only includes giving out earplugs and eye masks, reducing light and noise. No treatment will be altered during the study period.

### Where is the study run from?

Single center, Medstar Harbor hospital in Baltimore, Maryland, United States.

When is the study starting and how long is it expected to run for?  
July 2018 to September 2018

Who is funding the study?  
Self-paid by principal investigator.

Who is the main contact?  
An Thi Nhat Ho, nhatan01@gmail.com

## Contact information

**Type(s)**  
Public

**Contact name**  
Dr An Ho

**Contact details**  
1307 Missouri Ave  
St Louis  
United States of America  
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## Additional identifiers

**EudraCT/CTIS number**

**IRAS number**

**ClinicalTrials.gov number**

**Secondary identifying numbers**  
2018-028

## Study information

**Scientific Title**  
A pilot non-randomized control trial of providing quiet time, ear plugs, eye masks, reducing noise and light in improving sleep for patients in general medical wards

**Study objectives**  
Providing quiet time, earplugs, eye masks, reducing noise and light in general medical ward will decrease the rate of insomnia in hospitalized patients.

**Ethics approval required**  
Old ethics approval format

**Ethics approval(s)**  
Medstar Research Institute institutional review board, 01/07/2018, 2018-028

**Study design**

Interventional non-randomised single-centre pilot study

**Primary study design**

Interventional

**Secondary study design**

Non randomised study

**Study setting(s)**

Hospital

**Study type(s)**

Prevention

**Participant information sheet**

No participant information sheet available

**Health condition(s) or problem(s) studied**

Insomnia

**Interventions**

All the patients consented to the study were given ear plugs and eye masks at the time of their admission. They are given verbal instructions to use them and were advised to use ear plugs/eye masks during the day or at night if needed. Patients were also informed of routine labs and vital sign check time range in the hospital. During that month, all the general medical wards in our hospital performed quiet time from 4pm to 5pm and at night from 10:00 PM to 5AM. During quiet time, lights were dimmed down in the patients' rooms and in the hallways. Televisions in patients' rooms that are not in use were turned off. Nurses, physicians, physical therapists, medical assistants were encouraged not to speak loudly or interrupt patients sleep unless for emergency cases. However, nurse driven protocols in our hospital to check on patient safety at night were still performed for both pre-intervention and intervention groups.

The research protocol during the research time was introduced to hospital employees during meeting sessions and by printed posters. Research staff also checked every day to maximize compliance with the protocol.

**Intervention Type**

Other

**Primary outcome measure**

The frequency of insomnia will be determined using the percentage of patients with insomnia (ISI>7) at the time of discharge.

**Secondary outcome measures**

1. Insomnia severity will be determined using the ordinal score on the insomnia severity index at the time of discharge.
2. Patient satisfaction will be determined using the objective ordinal satisfaction score of the patients on the scale from 0 to 5 with 5 being the best hospital experience and duration of hospital stay.

**Overall study start date**

02/01/2018

**Completion date**

01/10/2018

## Eligibility

**Key inclusion criteria**

1. Aged 18 years or over
2. Admitted to general medical floor
3. Able to read and write in English

**Participant type(s)**

Patient

**Age group**

Adult

**Lower age limit**

18 Years

**Sex**

Both

**Target number of participants**

190

**Total final enrolment**

215

**Key exclusion criteria**

1. Diagnosis of altered mental status
2. Dementia
3. Severe hearing deficit

**Date of first enrolment**

15/07/2018

**Date of final enrolment**

15/09/2018

## Locations

**Countries of recruitment**

United States of America

**Study participating centre**

**Medstar Harbor Hospital**  
3001 South Hanover Street  
Baltimore  
United States of America  
212225

## Sponsor information

### Organisation

Medstar Harbor Hospital

### Sponsor details

3001 South Hanover Street  
Baltimore  
United States of America  
21225

### Sponsor type

Hospital/treatment centre

### ROR

<https://ror.org/05mdb5j94>

## Funder(s)

### Funder type

Other

### Funder Name

Investigator initiated and funded.

## Results and Publications

### Publication and dissemination plan

Planned publication in a high-impact peer-reviewed journal.

### Intention to publish date

15/02/2019

### Individual participant data (IPD) sharing plan

The datasets generated and/or analysed during the current study during this study will be included in the subsequent results publication.

## IPD sharing plan summary

Other

## Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
<a href="#">Abstract results</a>	Presented at the American Thoracic Society International Conference	19/05/2019	21/09/2021	No	No