# Journal of Depression and Anxiety

Opinion Article

# Recent Life Style of Adults Suffering Anxiety, Stress, Depression with Sleep Disorders

# Yudhisthir Panwar<sup>1\*</sup>, Zaffar Ahmad Khan<sup>2</sup>, Pooja Dhodawat<sup>2</sup>

<sup>1</sup>Department of Physiotherapy, PGDHHM Hospital and Health Care Management, Mewar University Chittorgarh, Gangarar, Rajasthan, India; <sup>2</sup>Department of Physiotherapy, Mewar University Chittorgarh, Gangarar, Rajasthan, India

#### **ABSTRACT**

Stress is a normal part of life. Stress can come from physical causes like not getting enough sleep or having an illness. Another cause for stress can be emotional, like worrying about not having enough money. Stress can also come from less dramatic causes, like everyday obligations and pressures that make you feel that you're not in control. Depression like suffocating, suffering, exhausted. Woeful, sorrowful, discouraged and deaden Anxiety meaning "worry, fear, curiosity". Anxiety is a state of mind that people experience when there is an external threat to their safety and tranquilly. Stress is a signal indicator. Poor sleep quality is significantly associated with elevated levels of stress. The purpose of this study is to evaluate the depression, anxiety, and stress with sleep quality in young adults.

Keywords: Depression; Insomnia; DASS; PSQI; Young adults; Sleep

### DESCRIPTION

Links between sleep and depression are strong. About three quarters of depressed patients have insomnia symptoms, and hypersomnia is present in about 40% of young depressed adults and 10% of older patients, with preponderance in females. As well as the subjective experience of sleep symptoms, there are well-documented changes in objective sleep architecture in depression [1]. The sleep symptoms are often unresolved by treatment, and confer a greater risk of relapse and recurrence. Depression is one of the most common mental disorders in young adults and causing severe disruptions in psychosocial and academic functioning. Effect of combined anxiety and depression on insomnia severity is mediated by poor sleep behaviors. Poor sleep has been closely related to mood disturbance and stress [2].

Young Adults between age group of 18-25 years, both gender were included in this study, Informed consent from obtained participants were asked to fill the hard copy of PSQI for the assessment of sleep quality. Depression Anxiety, Stress Scale (DASS) for assessment of Depression, stress and anxiety. The main objective of the DASS is to isolate and identify specific emotional disturbances, such as to evaluate the severity of the

primary signs of stress, depression, or anxiety [3]. The initial goals of the scale's design were to identify the entire spectrum of basic depressive and anxious symptoms, adhere to strict criteria for psychometric sufficiency, and provide the greatest amount of discrimination between the depressed anxiety scales. Although those without psychology training can administer and score the DASS, it is advised that an experienced clinician interpret the results and makes decisions based on them in conjunction with other forms of assessment [4].

#### Medical side effects

As noted by Health line, long-term insomnia, Anxiety can lead to other medical issues such as:

- Increased risk of inflammation.
- Feelings of anxiety, anger, and depression.
- Impatience.
- Forgetfulness.

Additionally, prolonged insomnia can shorten a sufferer's life expectancy significantly. As noted through a collection of sleep studies, lack of sleep can increase a person's risk of dying by up to 12% compared to those that get a regular 8 hours of sleep [5].

Correspondence to: Yudhisthir Panwar, Department of Physiotherapy, PGDHHM Hospital and Health Care Management, Mewar University Chittorgarh, Gangarar, Rajasthan, India, E-mail: drpanwaryudhi@gmail.com

Received: 19-Sep-2022, Manuscript No. JDA-22-19551; Editor assigned: 23-Sep-2022, PreQC No. JDA-22-19551 (PQ); Reviewed: 07-Oct-2022, QC No. JDA-22-19551; Revised: 14-Oct-2022, Manuscript No. JDA-22-19551 (R); Published: 21-Oct-2022, DOI: 10.35248/ 2167-1044.22.11.482

Citation: Panwar Y, Khan ZA, Dhodawat P (2022) Recent Life Style of Adults Suffering Anxiety, Stress, Depression with Sleep Disorders. J Dep Anxiety.11:482

Copyright: © 2022 Panwar Y, et al. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.

### What are the symptoms of sleep disorders?

The symptoms of sleep disorders depend on the specific disorder. Some signs that you may have a sleep disorder include that:

- You have creeping, tingling, or crawling feelings in your legs or arms that are relieved by moving or massaging them, especially in the evening and when trying to fall asleep
- When you notice that your legs or arms jerk often during sleep
- You have vivid, dreamlike experiences while falling asleep or dozing

## Tips for improving sleep and managing anxiety

Moving of body: Exercise has been found to both lower anxiety and improve sleep, But try not to exercise right before sleep, as it can keep you awake. Moving your body in the morning or afternoon can help you get your sleeping and waking cycle back on track and also treat insomnia or sleep apnea.<sup>3</sup>

**Tailor your environment:** Controlling light, sound, and temperature can help you get a good night's rest. The darker, quieter, and cooler you can keep your bedroom, the greater chance you have of calming your mind and falling asleep.

Calm your mind: There are many relaxation techniques that can help you calm your mind throughout the day and improve sleep. Mindfulness meditation, yoga, and breathing exercise can help you achieve calm, but it can also be as simple as taking a walk when you have a short break at work.

Limit screen time: Phone, tablet, and TV emit light that keeps your brain awake, so try to limit them an hour before bedtime. Consider setting an alarm to remind you to shut screens off at an adequate time before bed. Instead, consider listening to music or reading a book to quiet your mind [6].

There is a significant correlation between PSQI with depression(r=0.324) PSQI with anxiety (r=0.279) PSQI with stress (r=0.326). It also shows that depression ( $r^2$ =105), Anxiety ( $r^2$ 0.077) and stress ( $r^2$ -0.106) all the factors affect the sleep quality in young adults. The prevalence of stress in 5 studies with a total sample size of 9074 is obtained as 29.6% (95%)

confidence limit: 24.3–35.4), the prevalence of anxiety in 17 studies with a sample size of 63,439 as 31.9% (95% confidence interval: 27.5–36.7), and the prevalence of depression in 14 studies with a sample size of 44,531 people as 33.7% (95% confidence interval: 27.5–40.6).

# **CONCLUSION**

Although those without psychology training can administer and score the DASS, it is advised that an experienced clinician interpret the results and makes decisions based on them in conjunction with other forms of assessment. Depression is one of the most common mental disorders in young adults and causing severe disruptions in psychosocial and academic functioning. Effect of combined anxiety and depression on insomnia severity is mediated by poor sleep behaviors. Poor sleep has been closely related to mood disturbance and stress. This Study results are showing that there is a significant correlation of depression and stress with sleep, although correlation of anxiety is less significant with sleep.

# **REFERENCES**

- Jindal RD, Thase ME. Treatment of insomnia associated with clinical depression. Sleep Med Rev. 2004;8(1):19-30.
- Agargun MY, Kara H, Solmaz M. Sleep disturbances and suicidal behavior in patients with major depression. J Clin Psychiatry. 1997; 58(6):249-51.
- Hamilton M. Frequency of symptoms in melancholia (depressive illness). Br J Psychiatry. 1989;154(2):201-6.
- 4. Yates WR, Mitchell J, Rush AJ, Trivedi M, Wisniewski SR, Warden D, et al. Clinical features of depression in outpatients with and without co-occurring general medical conditions in STAR\* D: confirmatory analysis. Primary care companion to the Journal of clinical psychiatry. 2007;9(1):7.
- 5. Breslau N, Roth T, Rosenthal L, Andreski P. Sleep disturbance and psychiatric disorders: a longitudinal epidemiological study of young adults. Biol Psychiatry. 1996; 39(6):411-8.
- Stewart R, Besset A, Bebbington P, Brugha T, Lindesay J, Jenkins R, et al. Insomnia comorbidity and impact and hypnotic use by age group in a national survey population aged 16 to 74 years. Sleep. 2006; 29(11):1391-7.