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## Sleep Disorders and Sleep Quality Among Hemodialysis Patients in a Tertiary Hospital in Valenzuela, Philippines

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releep disturbances, including sleep-disordered breathing (SDB), insomnia, and poor sleep quality, are highly prevalent among hemodialysis patients. These issues not only impair quality of life but also worsen cardiac comorbidities, increasing morbidity and mortality risks. Despite their impact, sleep disturbances are often underrecognized and undertreated, particularly in resource-limited settings where costly diagnostics like polysomnography are inaccessible. This study aimed to identify risk factors for poor sleep quality and sleep disorders and demonstrate how validated, cost-effective screening questionnaires can guide effective sleep management to improve dialysis outcomes in Filipino hemodialysis patients. Methods: A cross-sectional study involving 51 hemodialysis patients. Data on demographics, dialysis adequacy (Kt/V), body mass index (BMI), and sleep outcomes were collected. Validated tools, including the Berlin Questionnaire, Insomnia Severity Index (ISI), and Pittsburgh Sleep Quality Index (PSQI), were used to assess sleep disturbances. Statistical analyses were performed to identify significant associations. Results: The prevalence of SDB, moderate insomnia, and poor sleep quality was 68.6%, 31.4%, and 72.5%, respectively. Male sex was significantly associated with SDB (77.1% vs. 25%, p =0.0005), moderate insomnia (81.3% vs. 51.4%), and poor sleep quality (73% vs. 28.6%). Inadequate dialysis adequacy (Kt/V <1.2) was strongly associated with SDB (54.1% vs. 0%), moderate insomnia (75% vs. 22.9%), and poor sleep quality. Overweight and obese patients were also more likely to have SDB (31.4% and 11.4%) and moderate insomnia (50%). Conclusion: Male sex, poor dialysis adequacy, and elevated BMI are significant risk factors for sleep disturbances in hemodialysis patients. Routine screening using validated questionnaires (Berlin, ISI, PSQI) offers a cost-effective strategy to identify high-risk individuals in resource-limited settings like the Philippines. Early detection allows nephrologists to implement timely interventions that improve dialysis adequacy, address weight management, and reduce complications such as cardiac comorbidities. For highrisk patients, recommending more objective assessments like polysomnography ensures comprehensive care and supports better long-term health outcomes and quality of life...

## **Biography**

Dr. Geraldine Jettee Gales-Villar is a nephrologist committed to delivering high-quality care in a resource-limited setting. Practicing in a developing country, she integrates validated, evidence-based questionnaires with hemodialysis outcomes to create cost-effective yet impactful screening methods. By identifying and addressing modifiable risk factors, she aims to prevent severe complications, ensuring better patient outcomes without relying on expensive diagnostics. With a strong foundation in clinical practice and research, she applies data-driven strategies to improve patient care. Dr. Gales-Villar remains dedicated to advancing nephrology through evidence-based research, ensuring that findings translate into practical improvements in renal healthcare..

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