

Opinion: Sleep Should be at the Forefront of Improving Wellness in Medical Students

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Without question, our beloved medical school has invested considerable time and effort into incorporating student wellbeing into our formal and informal curricula. As evidenced by the plethora of mental health and wellness resources offered by the school, such as the Wellness Coalition, lectures during our third-year Sessions to Enhance Physician Success (STEPS) course, and Wellness Corner component of the weekly student newsletter, establishing effective and efficient methods to cope with stress is one of the key skills Indiana University School of Medicine (IUSM) hopes to equip all graduates with. Everyone's process for improving their own wellness is unique and develops at different rates; this is one of the great aspects of personal development. However, one objective metric that can improve everyone's wellness is better quality sleep.

Every year various healthcare trainees make the decision to dedicate their careers towards improving patient lives by identifying and treating sleep pathology. Per the American Academy of Sleep Medicine, there are just under 100 sleep medicine fellowship programs in the United States, with just under 200 positions available each year to graduating internal medicine or pediatrics residents (and even other residency pathways). IUSM offers such a one-year program with two positions that provides a diverse educational experience, encapsulating the entire breath of sleep medicine. Within the past few decades, the emergence of sleep surgery fellowship programs through otolaryngology-head and neck surgery has afforded new opportunities to improve sleep with technology (eg, Inspire which stimulates the hypoglossal nerve and helps keep the airway open at night). The continued growth of sleep medicine programs and emergence of sleep surgery not only embodies the healthcare advancements that have been made, but they also serve as a reminder to how vital quality sleep is for overall human health.

As medical students, we see how the importance of sleep is routinely emphasized across multiple healthcare settings, and we are continually educated about sleep pat-

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terns and abnormalities throughout our coursework (i.e. dedicated lectures during the third-year neurology rotation). Given how demanding the training for a career in medicine can be, it is not always easy to dedicate the time to follow the same advice that we give patients and loved ones, and sleep regularly falls into this category. There has been extensive research conducted on the sleep quality of medical students. It has been shown that sleep disturbance is higher in medical students compared to students in other fields, and perhaps more enlightening, decreased sleep quality in medical students has been associated with increased rates of anxiety and depression, which leads to decreased academic performance.¹ Although the literature provides mixed results regarding physician sleep deprivation and patient outcomes (work performance, medial errors), the fact that multiple studies did demonstrate a correlation highlights the importance of this subject.² Furthermore, sleep impairment has been linked to increased rates of physician burnout and decreased fulfillment, which in and of itself impacts physician productivity.³ Thus, we owe it not only to ourselves but also our patients to improve our own sleep so that we can ultimately provide the best care possible.

The notion of foregoing essentials like meals and sleep in service of our patients was commonplace and even celebrated many years ago among members of the healthcare community. Certainly, a career in medicine often requires one to put the needs of others above their own, however, the idea that healthcare providers cannot themselves benefit from the positive effects of sleep is far from the truth. Although one cannot dismiss the fact that the demanding nature of medical training can impact the quantity of sleep, trainees can still improve on the quality of sleep they obtain. Interestingly, it has been argued in the literature that quality of sleep is more important than quantity.⁴ This provides an actionable item for medical students to work on. Decreasing nighttime distractions, improving sleep cycle regularity, and limiting afternoon caffeine are just a few small changes that can lead to big improvements. Through this, medical students can still gain the various



positive cardiovascular, cognitive, and metabolic benefits of good sleep.⁵

In medical training, the idea of delayed gratification remains prevalent: “things will be better when I am in medical school” quickly turns into “things will be better when I am in residency... when I am in fellowship... when I am an attending.” If there is one thing we can all agree on is that our lives will continue to evolve, leading to great new opportunities but also some increased responsibility. And as the (necessary) emphasis on wellness and work-life balance in healthcare continues to grow, I argue that sleep deserves a central role in the conversation. Additionally, since good sleep hygiene can be seen as a form of preventative medicine, we as trainees must work to lay the proper foundation right now by improving our own sleep. The benefits extend beyond our own health to our patients, allowing us to become the best physicians we can be for our community. We must first help ourselves in order to help others.

References:

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