

SLEEP DISTURBANCE DURING LATE PREGNANCY IN NEW ZEALAND WOMEN

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Introduction: Disruption to sleep during pregnancy is not uncommon. In the third trimester factors including having to go to the bathroom and discomfort associated with the increasing size of the foetus and uterus, as well as pain, being too hot or cold, restless legs syndrome, leg cramps, heartburn and carpal tunnel pain have been associated with disturbed sleep^{1,2,3}. The current study investigates sleep disruption in New Zealand women during late pregnancy.

Method: As part of the *E Moe, Ma⁻ma⁻: Maternal Sleep and Health in Aotearoa/New Zealand* study investigating sleep across late pregnancy and early post-partum, questionnaires were completed by women (n = 1091; 16–46 yrs) between 35–37 weeks gestation. Participants identified the number of nights in the last week that potential sleep-disrupting factors occurred (scale 0–7 nights), with ≥3 nights/week considered as frequent.

Results: The majority of women (89.3%) reported going to the bathroom disturbing sleep ≥3 nights in the previous week. The next most common factors (≥3 nights) were not being able to get comfortable (68.6%), pain in back/neck/joints (66.0%), and baby moving around (baby kicking) (59.3%). Other frequently cited reasons (≥3 nights) included feeling too hot or cold (51.0%), thinking or worrying about things (48.5%), just can't get to sleep (46.7%), dreams (36.4%), and heartburn (35.9%). In the National Sleep Foundation Poll (NSF, 2007) women in their 3rd trimester most often identified sleep being disturbed by needing to go to the bathroom (92%), pain in the back, neck or joints (66%), leg cramps (54%) and/or heartburn (51%), whilst Mindell and Jacobson (2000) reported women had difficulties falling asleep and staying asleep at 35–38 weeks of pregnancy due to factors including needing to go to the bathroom (94.6%), uncomfortable position (78.4%), aching/one position (54.1%), thoughts (45.9%), and sleeping not in a usual position (45.9%).

Discussion: Needing to go to the bathroom and pain commonly disturb sleep in late pregnancy, as well as other physical and psychological factors that may vary in prevalence across populations. As there is a high likelihood that sleep quality will be compromised in the third trimester of pregnancy due to sleep disruption, it is important that women are informed of this and supported to prioritise sleep.

References

1. Lee, K.A. (1998). Alterations in sleep during pregnancy and postpartum: a review of 30 years of research. *Sleep Medicine Reviews* 2(4): 231–242.
2. Moline, M.L., Broch, L., Zak, R., Gross, V. (2003). Sleep in women across the life cycle from adulthood through menopause. *Sleep Medicine Reviews* 7(2): 155–177.
3. Wolfson, A., Lee, K.A. (2005). Pregnancy and the postpartum period, in *Principles and Practice of Sleep Medicine*, M.H. Kryger, T. Roth,

and W.C. Dement, Editors. Elsevier Saunders: Philadelphia.
1278–1286.

<http://onlinelibrary.wiley.com/doi/10.1111/j.1479-8425.2012.00580.x/pdf>