A manual-based intervention for carers of people with dementia and sleep disturbances: an acceptability and feasibility RCT

Kirsi M Kinnunen,¹ Penny Rapaport,¹ Lucy Webster,¹ Julie Barber,² Simon D Kyle,³ Brendan Hallam,¹ Claudia Cooper,^{1,4} Rossana Horsley,⁵ James A Pickett,⁶ Anastasia Vikhanova,¹ Colin A Espie³ and Gill Livingston^{1,4}*

¹Division of Psychiatry, Faculty of Brain Sciences, University College London, London, UK

²Department of Statistical Science, Faculty of Mathematical & Physical Sciences, University College London, London, UK

³Sleep and Circadian Neuroscience Institute, Nuffield Department of Clinical Neurosciences, University of Oxford, Oxford, UK

⁴Services for Ageing and Mental Health, Camden and Islington NHS Foundation Trust, London, UK

⁵Alzheimer's Society Research Network, London, UK

⁶Alzheimer's Society, London, UK

*Corresponding author g.livingston@ucl.ac.uk

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Plain English summary

Intervention for carers of people with dementia and sleep disturbances

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C leep disturbances are common in dementia, and include reduced night-time sleep, night-time wandering Jand excessive daytime sleepiness. There are currently no known effective treatments. Family carers are often woken by their relatives, and so may become exhausted, stressed and unhappy, and feel unable to continue caring at home. In consultation with people affected by dementia and based on what was already known, a new six-session, manual-based sleep intervention, delivered to carers, was developed. It was called DREAMS START (Dementia REIAted Manual for Sleep; STrAtegies for RelaTives). It uses strategies tailored to the needs of an individual, such as increasing light, activity, comfort, routine and relaxation. Participants with dementia wore a special wristwatch that monitored sleep, activity and light for 2 weeks before they started the intervention, and it was worn again for 2 weeks, 3 months later. Feasibility (whether or not enough people could be recruited to obtain meaningful results) and acceptability (the proportion of those receiving the intervention who completed it) were studied. About two-thirds of people who were asked agreed to take part in the study: 63 people with dementia and carers mainly from memory services consented and 62 were randomised (one quickly changed their mind). It was therefore feasible to recruit people. Twenty people continued with their usual treatment and 42 received the additional intervention (this was decided at random by computer). Nearly 90% of people completed four or more sessions, which meant that the intervention was considered acceptable. Carers answered questions about the person with dementia (sleep, behaviour, mood, guality of life and medication use), and their own sleep, mood and guality of life, at the beginning and end of the study. However, some of the people with dementia did not wear the watch at follow-up. The results suggest that the research was feasible and that the sleep intervention was acceptable. The next step will be to test the intervention in a larger study to see if it helps with sleep problems.

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