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SLEEPING WELL DURING A PANDEMIC: THE ROLE OF VARIOUS FORMS OF SOCIAL SUPPORT IN PROTECTING AGAINST INSOMNIA

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Introduction: Social support from friends, family, and significant loved ones is critical to sustaining mental health during crises. During the course of the COVID-19 pandemic, the populace has had to restrict many aspects of normal social contact. Consequently, social isolation and accompanying feelings of loneliness have spiked. There has also been a contemporaneous increase in the rates of insomnia. Considering this correlation, we investigated the potential role of various types of social/emotional support on the severity of insomnia. We hypothesized that greater social support from family, friends, and significant loved ones would all contribute to lower insomnia during the pandemic.

Methods: During October 2020, 1020 participants (58.2% female) completed an online survey that included the Multidimensional Scale of Perceived Social Support (MSPSS), a measure of social support, and the Insomnia Severity Index (ISI), a measure of insomnia. The severity of insomnia was predicted using multiple linear regression, with the three sources of support from the MSPSS (family, friend, and significant other) entered stepwise.

Results: All three sources of support were significantly correlated with lower ISI scores (family, r=-.163, p= p = 1.6×10^{-7}; friend, r=-.125, p=6.5×10^{-5}; significant other, r=-.095, p=.002). However, when all three variables were entered into stepwise regression, only increased familial support was significantly associated with lower insomnia levels (R2 = 0.027, β =-.163, p = 1.6×10^{-7}). In contrast, neither the support of friends nor support from significant others added any additional predictive power once family support was in the model.

Conclusion: While perceived social support from friends and significant others was correlated with lower insomnia, we found that ISI scores were most significantly associated with perceived family support. In fact, once family support was accounted for, other sources of support did not account for additional variance. Ongoing family support plays a critical role in mental health and wellbeing, which is clearly demonstrated in the quality of sleep. During the social distancing imposed by the pandemic, it is vital that we find creative ways to maintain familial social support. Future work may benefit by examining the association between the use of electronic technologies to sustain social support and sleep outcomes.

Support (if any):

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INVESTIGATING DECREASED POSITIVE AIRWAY PRESSURE COMPLIANCE IN A VETERAN AFFAIRS SLEEP MEDICINE CLINIC DURING THE 2020 PANDEMIC

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Introduction: Positive airway pressure (PAP) compliance for the treatment of sleep apnea at the Albuquerque Veterans Affairs (VA) Sleep Medicine clinic has been observed to be lower in new setup patients after the onset of the COVID-19 pandemic. The reasons for decreased PAP compliance during the COVID-19 pandemic are unclear. The primary outcome will be to identify if there is a common reason that patients at the Albuquerque VA were less compliant with PAP after the onset of the COVID-19 pandemic.

Methods: Compliance data for 4/1/2020 through 9/30/2020 was compared to compliance data for 4/1/2019 through 9/30/2019. Compliance after PAP machine setup was confirmed to be lower during the 2020 time period. Noncompliant patients will be selected by setup type, new versus machine replacement, and surveyed for reasons for noncompliance. The survey will be conducted at the Albuquerque VA Sleep Center and will include questions regarding beliefs, barriers, and challenges with the use of PAP therapy during the coronavirus pandemic. The definition for initial PAP compliance will be the use of PAP therapy for greater than or equal to four hours per night on at least 70% of nights.

Results: For the 6-month time period of 4/1/2019 through 9/30/2019, there were 758 PAP setups at the Albuquerque VA. The 30-day compliance for the 758 setups was found to be 61.4%. Comparatively, for the six-month period of 4/1/2020 through 9/30/2020, there were 462 setups with a 30-day compliance result of 49.7%. A survey consisting of questions designed to elicit barriers to use as well as beliefs regarding PAP and COVID-19 will be administered to 20% (n = 46) of the non-compliant patients who were set up with a PAP machine during the 2020 study period.

Conclusion: PAP compliance after machine setup was lower at the Albuquerque VA sleep center in 2020 versus 2019 (49.7% versus 61.4%). The reasons for the lower observed compliance are attributed to the effects of the coronavirus pandemic. A random sampling of the non-compliant patients during the 2020 time period will be performed and the results will be presented once available.

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INSOMNIA IN THOSE DIAGNOSED WITH COVID-19

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Introduction: Recent meta-analyses suggest that as many as 75% of COVID-19 patients report sleep problems. Here, we sought to characterize this in terms of self-reported insomnia. We hypothesized that those endorsing a positive COVID-19 diagnosis would also report greater levels of insomnia than those with a negative diagnosis.

Methods: Between April and September 2020 we administered the Insomnia Severity Index (ISI), each month to a total of 6162 English speaking adults in the United States ranging in age from 18–84 (M=36.2 years, SD=12.1; 53.9% female), recruited from all 50 states and the District of Columbia using Amazon Mechanical Turk (MTurk) crowdsourcing platform. Data collections occurred cross-sectionally, approximately one month apart. Data were analyzed using Kruskal-Wallis H tests.

Results: In total, 247 (4.01%) participants responded "Yes" to the question "Have you been formally diagnosed with COVID-19?" (male=128, female=119). Those reporting "yes" had a higher mean score on the ISI (M=14.52, SD=5.56) compared to reporting "no" (M=9.98, SD=6.55). Total ISI scores were higher for those who reported that they were diagnosed with COVID-19 than those that did not, $\chi2(1)$=121.818, p=0.0001. Among those that reported that they were diagnosed with COVID-19, 57.11% had ISI scores indicating moderate to severe clinical insomnia compared to 25.42% of those who were not diagnosed with COVID-19.

Conclusion: Those who reported that they had been diagnosed with COVID 19 had greater insomnia compared to those without such a diagnosis. This could be due to greater stress and anxiety in those who had a positive COVID-19 diagnosis due to the many uncertainties surrounding the short and long-term prognosis as well as potential impacts on the individual's family and workplace. However, it is important to consider the broader health picture of those diagnosed with