SLEEP DISORDERS.: evolution in time in early breast cancer (EBC)

BACKGROUND
Sleep disorders are common in the general population and among all cancer patients, but it has been shown that they are particularly prevalent among patients diagnosed with breast cancer, both during and after treatment. These disruptions produce a significant deterioration in functional status and clearly reduce the quality of life of the patients. Most adults (25-65 years) require 7-9 hours of night sleep. The ideal duration of a nap to be effective and restorative is between 10 and 20 min, never more than 30 min.

METHODS
126 women diagnosed with EBC at Puerta de Hierro Hospital have been analyzed, divided into 3 groups. The first group were women with a recently breast cancer diagnosis receiving chemotherapy, the second group were women at early follow up (first two years post-diagnosis), and the third group were women at late follow up (more than 2 years after diagnosis). The control group was selected from a sample of healthy individuals matched with our patients in terms of age, weight, and physical condition. Sleep parameters were obtained using a wearable device for 7 consecutive days (Kronwise-Kronohealth S.L.).

RESULTS
The mean age of the chemotherapy group was 50 years and of the follow-up groups was 55-56 years. The patients undergoing active chemotherapy treatment exhibited more disrupted sleep patterns, with a delay in their circadian rhythms (delayed getting up and delayed bedtime), these patterns were seen in aged patients. 25% of them slept less than 6 hours, and the average nocturnal sleep duration in this population was 6.73 hours, which causes daytime fatigue and lack of concentration among other conditions. They frequently resorted to napping, with 55% of them taking naps longer than 30 minutes, and with a sleep efficiency of less than 80%. As time passed from the diagnosis, the sleep patterns began to resemble those of the control group, and no differences were found in the third group of patients. The sleep efficiency improved in the late follow-up group, with an efficiency rate exceeding 85%.

CONCLUSIONS
The administration of chemotherapy in patients with EBC produces significant disruptions in sleep, with a clear impact on their quality of life, which can be recovered with long-term follow-up (more than 2 years since diagnosis). We must make an effort to detect these problems and instruct our patients in healthy sleep habits.