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# Consciousness, Sleep and Awareness

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## Introduction

- Everyday, medical personnel encounter people who are admitted to the hospital for traumatic brain injuries due to vehicular accidents and other traumas.
- The challenge in assessing the patient's state of consciousness is tremendous, since it involves a person's life and so medical personnel cannot afford to make a wrong judgment.

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- Most of the time, medical personnel depend on the Glasgow Coma Scale (GCS) to assess the patient's level of consciousness in order to determine the extent of brain damage.
- But how to determine the level of consciousness of a normal person poses many questions rather than answers, since up to this time the conditions that define consciousness are not very clear.


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## EXPECTED LEARNING OUTCOMES

After studying this chapter, you are expected to:


- describe the different forms of consciousness; differentiate the conscious from the unconscious mind;
- describe the stages of sleep, importance, disorders and how to improve sleep;
- identify the states of consciousness; and
- categorize the various states of consciousness.

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## THE LEVELS OF CONSCIOUSNESS


- Conscious.** Patients are said to be conscious when they are awake, aware, or alert. They know what is happening in their environment and are aware of their location and the time.

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2. **Semiconscious.** This is the state where there is reduced wakefulness, sometimes called *clouding of consciousness*.

3. **Unconscious.** When a patient is not responding to stimuli, including no visual response to the passing of a penlight, no verbal response to the nurse's questions, and no motor response to tactile stimuli, he or she is said to be in a coma or in an unresponsive state.

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- o **Hunger.** This is the lowest state of consciousness that an individual can attain. The only people who really know what hunger is are those who have experienced it.
- o **Subjection.** All individuals are influenced by the emotion of subjection. Some people are forced into or taught to be in this state, or the environment them so. For example, the bigger a government grows, the more people become subjected to its control.

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- o Assessment of the patient's level of consciousness is very important, since the design of the nursing care plan for the delivery of quality patient care is dependent on this.
- o It takes skills to be able to make the right assessment.

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- o **Fear.** Human beings are ruled as well as motivated by fear. Patients who are admitted to the hospital for surgery are not certain about the outcome of the operation. If they are told that their chance of surviving the operation is 50/50, it means they might die on the operating table.
- o **Intellect And Emotion.** Recognizing this state of consciousness provides an understanding of the emotion and intellect of the patient as well as the nurse. When patients understand their medical condition (the intellect part), the emotion will follow, such as feeling sad or happy.

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**THE SEVEN STATES OF CONSCIOUSNESS**

- o In understanding consciousness, medical personnel must always remember that their patients are human beings like themselves.
- o They are continuously going through experiences that provide them awareness, or the presence of consciousness.

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- o **Logic and reason.** We use reasoning and logic every time we reason and think. The mind is the ultimate basis of intelligence. The mind and intelligence are the sources of the intellectual faculties that the nurse possesses, including skills, knowledge, and decision-making capability.
- o **Divine reasoning.** In the religious dimension of care, medical personnel must always consider the religious belief of the patient. They must not impose their own religion on patients. For example, a member of a sect that does not believe in blood transfusion should not be coerced

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- o **Cosmic consciousness.** This state of consciousness is timeless, spaceless, and **limitless**. In here, the intuitive wisdom of the Supreme Being, above and beyond the mental faculty of knowledge, is given. If the patient has a belief system, it must be recognized.

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### The Biological Clock (Circadian Rhythm)

- o The circadian rhythm is the 24-hour biological clock that controls a person's waking and sleep. Among the conditions that can affect the biological clock of a person are the following:

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### THE ALTERED STATE OF CONSCIOUSNESS

- o **Sleep** is one of the essential needs of a healthy person and a patient alike. It replenishes the body's spent energy and allows time for the repair of tissues and for the consolidation of memories.


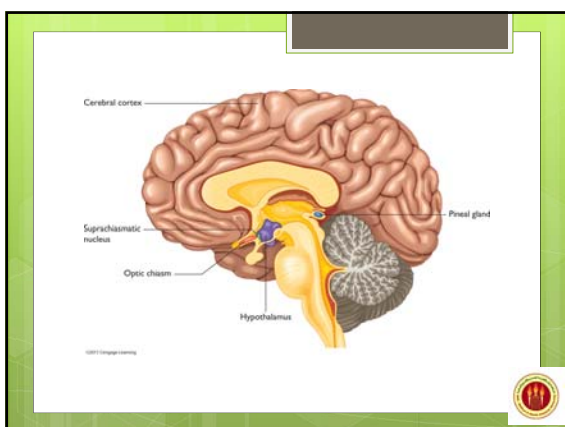
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- **Change in routine.** If a person is admitted to the hospital, there will be a sudden change in his or her daily routine, and this may affect his or her sleep pattern.
- **Shift work.** This is not new to medical personnel, since many of them have to work shifts, including the night shift. The biological clock can reset itself as one gets accustomed to the night shift. Initially, it will be difficult, but as time passes the body adapts to the changes that accompany working at night and the biological clock is reset.


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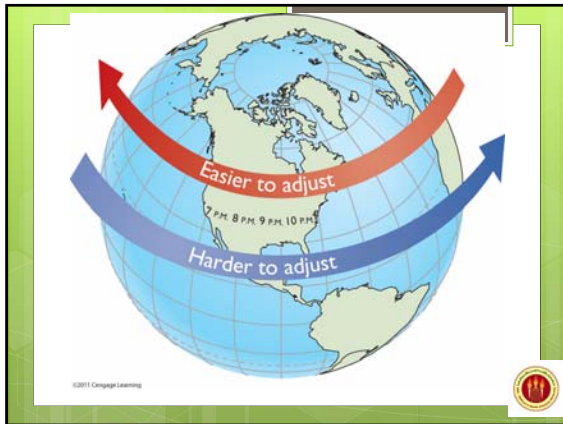



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### PHASE I. HYPNAGOGIC STATE:

“Pre-Sleep” Stage Marked By Visual, Auditory And Kinesthetic Sensations.

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- o **Medication.** Patients who take sedatives for depression or to help them sleep when they are ill may disturb their biological clock, as most of the time they are asleep.

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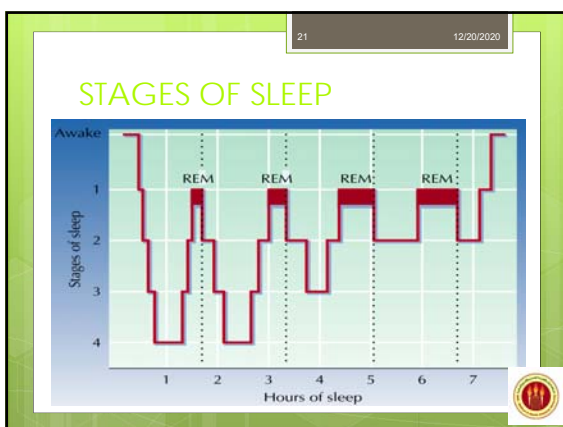
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### PHASE II. NON-REM SLEEP

**Stage 1** is the alpha waves sleep (awake but in relaxed state). Other happenings are hallucinations and hypnotic sensations.

**Stage 2** is the irregular stage. Other occurrences are sleep talking and sleep twisting.

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**Stage 3** is what we call as the transitional stage. This is from the lighter irregular waves to deep sleep.

**Stage 4** is called the delta waves or sometimes called the rapid eye movement (REM) sleep or dreaming. This is manifested by sleep walking, bedwetting and difficult to awaken.

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## PHASE III. REM SLEEP

- (Rapid Eyes Movements, High Frequency Brain Waves, Paralysis Of Large Muscles And Dreaming)


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## SLEEP DISORDERS

### DYSOMNIAS


- Insomnia refers to a difficulty in getting to sleep or remaining asleep and has many causes.
- Situational: related to anxiety
- Drug-induced: Use of sleeping pills or other drugs can result in insomnia
- Sleep apnea: person stops breathing and is awakened when blood levels of carbon dioxide stimulate breathing.
- Narcolepsy: Sleep appears at odd times.
- Sleep attack: urge to sleep during the day

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## IMPORTANCE OF SLEEP


- Sleep is important because in case of loss of sleep, this will lead to weakened concentration, trembling of the hands, irritable mood, poor judgment, driving accidents, slow work performance, inaccurate and inefficient work and hallucinations.

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## PARASOMNIAS

- Nightmares: Anxiety-arousing dreams generally occurring during REM sleep.
- Night Terrors: Abrupt awakenings from NREM sleep accompanied by intense physiological arousal and feelings of panic

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## THEORIES OF SLEEP AND DREAMS


1. **Repair/Restoration.** Sleep allows for recuperation from physical, emotional, and intellectual fatigue.
2. **Evolutionary/Circadian.** Sleep evolved to conserve energy and protect our ancestors from predators
3. **Psychoanalytic.** Dreams represent disguised symbols of repressed desires and anxieties. Manifest versus latent content
4. **Biological.** Dreams represent random activation of brain cells during sleep.
5. **Cognitive.** Dreams help to sift and sort the events of the day.

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## IMPROVING SLEEP

1. Avoid of worrying,
2. Do not take a nap before night sleep,
3. Do not drink caffeine.
4. Eat rich food and drinking milk
5. Sleep on a regular timetable,
6. Have good relaxation and exercise programs.


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## TYPES OF AWARENESS

**Innate Awareness**  
Humans are born with an amount of innate awareness, comprising the capacity to sense intuitively (without words) what is real or not.


**Adjustment Awareness**  
Adjustment means changing oneself to go to the direction where one leads your life. It is normal to adjust to avoid pain, fear and trouble whether caused by events or people.

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## KEY POINTS


- Consciousness pertains to our mental existence and has something to do with being awake. Consciousness refers to attributes of mental conditions.
- Patients are said to be conscious when they are awake, aware, or alert.
- Patients are in a semiconscious state when there is reduced wakefulness, a state that is sometimes called clouding of consciousness.

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**The Low Awareness Zone**  
This zone of awareness means setting down for a relatively sound and adapted lifestyle, giving up the desire to realign with the person you were meant to be

**Low Awareness Relationship**  
It is a safer choice for some individuals to spend much time in a bonding form, to be with one who is acting one-above while the other is one-below.

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- Patients are classified as unconscious when they show no visual response to the passing of a penlight, no verbal response when the nurse asks them questions, and no motor response to tactile stimuli.
- The stages of sleep are alpha wave sleep, the irregular wave stage, the transitional stage, delta wave sleep, and rapid eye movement (REM) sleep.

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**Absolute Awareness**  
Absolute awareness is the inherent and natural state of being, however conditions or states cannot exist at the same time while any related state of conscious awareness stays present.

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- Sleep is important because loss of sleep may affect one's concentration, mood, and behavior.
- To improve sleep, avoid worrying, napping before sleeping at night, drinking caffeine, or eating rich food.

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