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## SURVEY ON SLEEP HABITS AND ACADEMIC PERFORMANCE OF DENTAL COLLEGE STUDENTS

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**ABSTRACT: Aim:** To evaluate sleep habits of undergraduate dental students in a private dental college and the relationship between sleep habits and their academic performance. **Objective:** Sleep patterns and sleep problems amongst dental students have been addressed and related to their academic performance. **Materials and methods:** A questionnaire on sleep habits, academic performance, and lifestyle were administered. The participants are dental students from Saveetha Dental College. **Background:** Sleep is a basic drive of nature. Sufficient sleep helps us think more clearly, complete complex tasks better, and more consistently, and enjoy everyday life more fully. Sleep is, in essence, food for the brain, and insufficient sleep can be harmful, even life-threatening. When hungry for sleep, the brain becomes relentless in its quest to satisfy its need and will cause feelings of “sleepiness,” decreased levels of alertness or concentration, and, in many cases, unanticipated sleep. **Reason:** To analyze the sleeping habits and academic performance of dental college students.

**Keywords:** Students, Dental, Sleep problems, Sleepiness

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**INTRODUCTION:** Sleep is an active, repetitive and reversible behavior serving several different functions, such as repair and growth, learning or memory consolidation, and restorative processes: all these occur throughout the brain and the body<sup>2</sup>. Thus, during sleep behavioral, physiological, and neurocognitive processes occur: these very processes are susceptible to be impaired by the absence of sleep<sup>9</sup>. Sleep loss is, in fact, one of the most striking problems of modern society. Very often, to cope with our many daily interests, we prefer to sacrifice some sleep time, in the hope that this will not induce dangerous effects but will enable us to carry out several other activities.

Unfortunately, this is not true, and sleep deprivation has various consequences, such as sleepiness and impairments in neurocognitive and psychomotor performance<sup>10</sup>.

Although sleep medicine practitioners have long had a strong sense that irregular sleep schedules or inadequate sleep may lead to poor college performance, the current database has reached a level that makes it useful to draw research-based conclusions about the impact of sleep on college academic performance<sup>3</sup>. The consequences of this sleep deprivation are severe, impacting adolescents' physical and mental health, as well as daytime functioning. Population and clinic-based studies in adolescents have shown strong associations between chronic sleep restriction and anxiety, depression, and somatic pain<sup>4</sup>.

Many studies strongly suggest that timing of sleep, as well as its quality and quantity, are linked with students' learning abilities and academic

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achievement and that students are often chronically sleep deprived<sup>11</sup>. Studies have indicated that over 60% of college students were poor quality sleepers, resulting in daytime sleepiness and an increase of physical and psychological health problems<sup>5</sup>.

Parents commonly experience a change in their children’s sleeping habits as these youngsters enter adolescence. Habitual early risers in childhood develop new schedules of staying up late and then sleeping in, especially on weekends.

The genesis of this phase-delay often seen in the teenage years is probably multifactorial and includes such causes as homework requirements, jobs, energizing effects of after-school sports, social pressures, availability of television and the Internet, drug use, and decreases in parental constraints<sup>12-13</sup>. Students and educators typically do not realize that sleep habits may affect academic performance<sup>6</sup>. In general, the relationship between sleep/wake habits and the academic performance of dental students is insufficiently addressed in the literature. Therefore, we designed this study to assess the relationship between sleep habits and sleep duration with academic performance in a large sample of healthy dental students<sup>8</sup>.

**MATERIALS AND METHODS:** This study was conducted in Saveetha Dental College, Tamil Nadu, India during April. The population of 100 members was selected at random with both genders of the age group 15-25 years. A questionnaire was

prepared with 20 questions and was distributed within a population of 100 members. The questionnaire was made to fill by everyone uniquely at the same time. We instructed them to respond to all the items honestly and properly. Most participants completed the questionnaire within less than 10 min. We conducted data analysis using the statistical package for social sciences.

**Questionnaire on Sleep and Academic Performance:**

1. Age:                                      Gender:  
    Course:                                 Year:
2. When do you usually go to bed on  
 weekdays:                                 Weekends:
3. When do you usually get up in the morning  
 on weekdays: Weekends:
4. How long does it usually take for you to fall  
 asleep at night:
5. How many hours of actual sleep do you  
 have each night:
6. How many hours of sleep do you need each  
 night to function at your best in your work:
7. In past month how often do you have  
 trouble to sleep because of: trouble because  
 of:

	Never	Rarely	sometimes	Usually	Always
Can't fall asleep within 30min after going to bed					
Wake up at midnight or early morning					
Have to get up to use the bathroom					
Due to climate					
Illness of health					
Chatting with friends, loved ones, family					
Using phone					
Internet					
Studying					
Personal worries					

- 8. Do you take any medicine to help you sleep:
- 9. During the past month how often have you had trouble engaging in social activities or studies:
- 10. During the past month how often have you had trouble staying awake in class:
- 11. Do you have a habit of sleeping in the afternoon session:
- 12. What is your average academic percentage:
- 13. Does your lack of sleep at night diverts your focus on exams:
- 14. How many hours do you study for a day:
- 15. Do you have a habit of studying late night:
- 16. How many hours of sleep will make you focused on exams:
- 17. Do you have dreams at night:
- 18. Do you exercise regularly:
- 19. Do you practice any yoga or medications:
- 20. Do you compromise on your sleep before exams:

**RESULT:** This study included a total of 100 participants from Saveetha university, and their ages ranged from 15-22 years of mean 18.12 (sd 1.131). The descriptive statistics for the age of participants is mentioned below as **Table 1A**.

**TABLE 1A:**

Valid	N	Minimum	Maximum	Mean	Std. Deviation
Q1A	100	15	22	18.12	1.131
Valid N list	100				

The percentage of male participants is 38%, and female participants are 62%. The frequency table for gender is mentioned below as **Table 1B**.

**TABLE 1B:**

Valid	Frequency	Percent	Valid percent	Cumulative percent
a	38	38.0	38.0	38.0
b	62	62.0	62.0	100.0
Total	100	100.0	100.0	

The 100 participants belong to BDS first year of Saveetha Dental College. So, the frequency percentage is 100%. 37% of the participants go to bed at 10.00pm, 5% of them go to bed before 10.00

pm, and 58% of them go to bed after 10.00 pm on weekdays. The frequency table is mentioned below as **Table 2A**.

**TABLE 2A:**

Valid	Frequency	Percent	Valid percent	Cumulative percent
a	37	37.0	37.0	37.0
b	5	5.0	5.0	42.0
c	58	58.0	58.0	100.0
Total	100	100.0	100.0	

22% of the participants go to bed at 10.00 pm, 4% of them go to bed before 10.00 pm, and 74% of

them go to bed after 10.00 pm on weekends. The frequency table is mentioned below as **Table 2B**.

**TABLE 2B:**

Valid	Frequency	Percent	Valid percent	Cumulative percent
a	22	22.0	22.0	22.0
b	4	4.0	4.0	26.0
c	74	74.0	74.0	100.0
Total	100	100.0	100.0	

55% of the participants wake up at 6.00 am, 5% of them wake before 6.00 am, and 40% of them wake

after 6.00 am at weekdays. The frequency table is mentioned below as **Table 3A**.

**TABLE 3A:**

Valid	Frequency	Percent	Valid percent	Cumulative percent
a	55	55.0	55.0	55.0
b	5	5.0	5.0	60.0
c	40	40.0	40.0	100.0
Total	100	100.0	100.0	

7% of the participants wake up at 6.00 am, 4% of them wake up before 6.00 am, and 89% of them wake up after 6.00 am on weekends. The frequency table is mentioned below as **Table 3B**.

**TABLE 3B:**

Valid	Frequency	Percent	Valid percent	Cumulative percent
a	7	7.0	7.0	7.0
b	4	4.0	4.0	11.0
c	89	89.0	89.0	100.0
Total	100	100.0	100.0	

17% of them fall asleep in half an hour, 71% of the falls asleep within half an hour, and 12% of them fall asleep after half an hour. The frequency table is mentioned below in **Table 4**.

**TABLE 4:**

Valid	Frequency	Percent	Valid percent	Cumulative percent
a	17	17.0	17.0	17.0
b	71	71.0	71.0	88.0
c	12	12.0	12.0	100.0
Total	100	100.0	100.0	

35% of them sleep for 8 hours, 59% of them sleep below 8 hours, and 6% of them sleep above 8 hours. The frequency table is mentioned below in **Table 5**.

**TABLE 5:**

Valid	Frequency	Percent	Valid Percent	Cumulative percent
a	35	35.5	35.5	35.0
b	59	59.9	59.9	94.0
c	6	6.0	6.0	100.0
Total	100	100.0	100.0	

50% of them need 8 hours sleep to function best in their work, 34% of them need below 8 hours, and 16% of them need above 8 hours to function best in their work. The frequency table is mentioned below in **Table 6**.

**TABLE 6:**

Valid	Frequency	Percent	Valid percent	Cumulative percent
a	50	50.0	50.0	50.0
b	34	34.0	34.0	84.0
c	16	16.0	16.0	100.0
Total	100	100.0	100.0	

66% of them have trouble to sleep, 30% of them has no trouble to sleep, and 4% of them think so they have trouble. The frequency table is mentioned below in **Table 7**.

**TABLE 7:**

Valid	Frequency	Percent	Valid percent	Cumulative percent
a	66	66.0	66.0	66.0
b	30	30.0	30.0	96.0
c	4	4.0	4.0	100.0
Total	100	100.0	100.0	

46% participants never had trouble to fall asleep within 30 min after going to bed, 28% of them has trouble rarely, 20% of them has trouble sometimes,

4% of them has trouble usually, and 2% of them always has this trouble. The table is mentioned below as **Table 7A**.

**TABLE 7A:**

Valid	Frequency	Percent	Valid percent	Cumulative percent
a	46	46.0	46.0	46.0
b	28	28.0	28.0	74.0
c	20	20.0	20.0	94.0
d	4	4.0	4.0	98.0
e	2	2.0	2.0	100.0
Total	100	100.0	100.0	

28% of the participants never wake at midnight or early morning, 29% of them rarely wake up, 36% of them wake up sometimes, 4% of them usually

wakes up, and 3% of them always wakes up. The frequency table is mentioned below as **Table 7B**.

**TABLE 7B:**

Valid	Frequency	Percent	Valid percent	Cumulative Percent
a	28	28.0	28.0	28.0
b	29	29.0	29.0	57.0
c	36	36.0	36.0	93.0
d	4	4.0	4.0	97.0
e	3	3.0	3.0	100.0
total	100	100.0	100.0	

29% of them never get up to use the bathroom, 28% of them rarely get up, 27% of them get up sometimes, 10% of them usually gets up, and 6%

of them always gets up. The frequency table is mentioned below as **Table 7C**.

**TABLE 7C:**

Valid	Frequency	Percent	Valid percent	Cumulative percent
a	29	29.0	29.0	29.0
b	28	28.0	28.0	58.0
c	27	27.0	27.0	85.0
d	10	10.0	10.0	95.0
e	6	6.0	6.0	100.0
total	100	100.0	100.0	

26% of them never gets trouble due to climate, 27% of them rarely gets trouble, 31% of them gets trouble sometimes, 9% of them usually does not

sleep due to climate and 7% of them always has trouble. The frequency table is mentioned below as **Table 7D**.

**TABLE 7D:**

Valid	Frequency	Percent	Valid percent	Cumulative percent
a	26	26.0	26.0	26.0
b	27	27.0	27.0	53.0
c	31	31.0	31.0	84.0
d	9	9.0	9.0	93.0
e	7	7.0	7.0	100.0
Total	100	100.0	100.0	

24% of them never have trouble due to the illness of health, 29% of them rarely have trouble, 30% of them have trouble sometimes, 12% of them usually

have trouble, and 5% of them always have trouble due to an illness of health. The frequency table is mentioned below as **Table 7E**.

**TABLE 7E:**

Valid	Frequency	Percent	Valid percent	Cumulative percent
a	24	24.0	24.0	24.0
b	29	29.0	29.0	53.0
c	30	30.0	30.0	83.0
d	12	12.0	12.0	95.0
e	5	5.0	5.0	100.0
total	100	100.0	100.0	

17% of the participants never had the trouble of chatting with loved ones, friends and family, 23% of them rarely had trouble, 24% of them had trouble sometimes, 18% of them usually has this

trouble, and 18% of them always has this trouble to sleep. The frequency table is mentioned below as **Table 7F**.

**TABLE 7F:**

Valid	Frequency	Percent	Valid percent	Cumulative percent
a	17	17.0	17.0	17.0
b	23	23.0	23.0	40.0
c	24	24.0	24.0	64.0
d	18	18.0	18.0	82.0
e	18	18.0	18.0	100.0
Total	100	100.0	100.0	

22% of the participants never have the trouble of using the phone at night, 20% of them rarely has trouble, 23% of them sometimes have trouble, 19%

of them usually has trouble, and 16% of them always has this trouble. The frequency table is mentioned below as **Table 7G**.

**TABLE 7G:**

Valid	Frequency	Percent	Valid percent	Cumulative percent
a	22	22.0	22.0	22.0
b	20	20.0	20.0	42.0
c	23	23.0	23.0	65.0
d	19	19.0	19.0	84.0
e	16	16.0	16.0	100.0
Total	100	100.0	100.0	

22% of them never had trouble due to the Internet, 19% of them rarely has trouble, 21% of them sometimes had trouble, 22% of them usually has

this trouble, and 16% of them always has this trouble. The frequency table is mentioned below as **Table 7H**.

**TABLE 7H:**

Valid	Frequency	Percent	Valid percent	Cumulative percent
a	22	22.0	22.0	22.0
b	19	19.0	19.0	41.0
c	21	21.0	21.0	62.0
d	22	22.0	22.0	84.0
e	16	16.0	16.0	100.0
Total	100	100.0	100.0	

32% of them never has trouble due to studying late night, 21% of them rarely has this trouble, 27% of them sometimes has this trouble, 15% of them

usually has this trouble, and 5% of them always has this trouble. The frequency table is mentioned below as **Table 7I**.

**TABLE 7I:**

Valid	Frequency	Percent	Valid percent	Cumulative percent
a	32	32.0	32.0	32.0
b	21	21.0	21.0	53.0
c	27	27.0	27.0	80.0
d	15	15.0	15.0	95.0
e	5	5.0	5.0	100.0
Total	100	100.0	100.0	

24% of them never had trouble due to personal worries, 28% of them rarely has this trouble, 29% of them sometimes has this trouble, 10% of them usually has this trouble, and 9% of them always has this trouble. The frequency table is mentioned below as **Table 7J**.

**TABLE 7J:**

Valid	Frequency	Percent	Valid percent	Cumulative percent
a	24	24.0	24.0	24.0
b	28	28.0	28.0	52.0
c	29	29.0	29.0	81.0
d	10	10.0	10.0	91.0
e	9	9.0	9.0	100.0
Total	100	100.0	100.0	

8% of them consume medicine to help them sleep, and 92% of them does not consume medicine. The frequency table is mentioned below in **Table 8**.

**TABLE 8:**

Valid	Frequency	Percent	Valid percent	Cumulative percent
a	8	8.0	8.0	8.0
b	92	92.0	92.0	100.0
Total	100	100.0	100.0	

36% of them often have trouble engaging in social activities, and 64% of them does not have any trouble. The frequency table is mentioned below in **Table 9**.

**TABLE 9:**

Valid	Frequency	Percent	Valid percent	Cumulative percent
a	36	36.0	36.0	36.0
b	64	64.0	64.0	100.0
Total	100	100.0	100.0	

49% of them had trouble staying awake in class, and 51% of them have no trouble staying awake in class. The frequency table is mentioned below as **Table 10**.

**TABLE 10:**

Valid	Frequency	Percent	Valid percent	Cumulative percent
a	49	49.0	49.0	49.0
b	51	51.0	51.0	100.0
Total	100	100.0	100.0	

58% of the students have the habit of sleeping in the afternoon session, and 42% never have the habit of sleeping in the afternoon session. The frequency table is mentioned below as **Table 11**.

**TABLE 11:**

Valid	Frequency	Percent	Valid percent	Cumulative percent
a	58	58.0	58.0	58.0
b	42	42.0	42.0	100.0
Total	100	100.0	100.0	

13% of the participants score academic percentage between 10-50 percentage, 69% of the score between 50-80 percentage and 18% of the score between 90-100 percentage. The frequency table is mentioned below as **Table 12**.

**TABLE 12:**

Valid	Frequency	Percent	Valid percent	Cumulative percent
a	13	13.0	13.0	13.0
b	69	69.0	69.0	82.0
c	18	18.0	18.0	100.0
Total	100	100.0	100.0	

57% of the participants aggressive that lack of sleep at night diverts their focus on exams, and 43% of them disagrees the statement. The frequency table is mentioned below as **Table 13**.

**TABLE 13:**

Valid	Frequency	Percent	Valid percent	Cumulative percent
a	57	57.0	57.0	57.0
b	43	43.0	43.0	100.0
Total	100	100.0	100.0	

17% of the study in 4 hours, 69% of them study less than 4 hours, 12% of the study above 4 hours, and 2% of them do not study. The frequency table is mentioned below as **Table 14**.

**TABLE 14:**

Valid	Frequency	Percent	Valid percent	Cumulative percent
a	17	17.0	17.0	17.0
b	69	69.0	69.0	86.0
c	12	12.0	12.0	99.0
d	2	2.0	2.0	100.0
Total	100	100.0	100.0	

60% of them have a habit of studying late night, and 40% of them does not have the habit. The frequency table is mentioned below as **Table 15**.

**TABLE15:**

Valid	Frequency	Percent	Valid percent	Cumulative percent
a	60	60.0	60.0	60.0
b	40	40.0	40.0	100.0
Total	100	100.0	100.0	

29% of the participants sleep for 8 hours to make them focused on exams, 65% of them sleep below 8 hours, and 6% of them sleep above 8 hours. The frequency table is mentioned below as **Table 16**.

**TABLE 16:**

Valid	Frequency	Percent	Valid percent	Cumulative percent
a	29	29.0	29.0	29.0
b	65	65.0	65.0	94.0
c	6	6.0	6.0	100.0
Total	100	100.0	100.0	

85% of the participants have dreams at night, and 15% of them do not have dreams at night. The frequency table is mentioned below as **Table 17**.

**TABLE 17:**

Valid	Frequency	Percent	Valid percent	Cumulative percent
a	85	85.0	85.0	85.0
b	15	15.0	15.0	100.0
Total	100	100.0	100.0	

36% of the participants exercise regularly, and 64% of them does not do exercise. The frequency table is mentioned below as **Table 18**.

**TABLE 18:**

Valid	Frequency	Percent	Valid percent	Cumulative percent
a	36	36.0	36.0	36.0
b	64	64.0	64.0	100.0
Total	100	100.0	100.0	

33% of the participants practice yoga or medications, and 67% of them do not practice yoga. The frequency table is mentioned below as **Table 19**.



**TABLE 19:**

Valid	Frequency	Percent	Valid percent	Cumulative percent
a	33	33.0	33.0	33.0
b	67	67.0	67.0	100.0
total	100	100.0	100.0	

55% of the participants compromise on their sleep before exams, and 45% of them do not compromise. The frequency table is mentioned below as **Table 20**.

**TABLE 20:**

Valid	Frequency	Percent	Valid percent	Cumulative percent
a	55	55.0	55.0	55.0
b	45	45.0	45.0	100.0
Total	100	100.0	100.0	

**DISCUSSION:** The current study demonstrates a clear association between sleep/wake habits and academic performance among dental students. Certain sleep habits were associated with lower academic performance. A late bedtime on weekdays and weekends was associated with lower academic performance. These findings agree with those of a study conducted on first-year college students showing that students with later bedtimes during weekdays and weekends had lower performance. Moreover, the bedtime during weekends was delayed in both groups compared with the weekdays<sup>14</sup>.

Although sleep deprivation affects academic performance, students who are sleep-deprived and experience academic difficulties are usually not aware of the extent to which their sleep loss can impair their ability to complete cognitive tasks. Pilcher and Walters subjected 44 college students to total sleep deprivation for one night and found that the sleep-deprived students performed significantly worse on cognitive tasks compared with students who had normal sleep. Paradoxically, the sleep-deprived students who performed worse reported higher levels of estimated performance and inaccurately rated their performance as better than that of students who were not sleep-deprived<sup>15</sup>.

The authors proposed that, for each hour of delay in reported rise time during the week, the predicted GPAs could decrease by 0.13 on a scale of 0–4, hypothesizing that this delay could induce a diminished ability to recall complex material learned earlier in class, as suggested by Dotto<sup>16</sup>. We will now discuss the relationships among sleep and academic performance.

An earlier study on the relationship between sleep and academic performance by Curcio *et al.* (2006)<sup>14</sup> concluded that sleep loss was negatively correlated with academic performance. Moreover, sleep loss resulted in daytime sleepiness, which was also correlated with poor academic performance. Kelly *et al.*, (2001) and Trokel *et al.*, (2000)<sup>17</sup> found a significant relationship between lower GPAs and lack of sleep<sup>7</sup>.

Perceived stress has been identified as one major factor contributing to these low scores in sleep quality, resulting in delayed sleep onset, increased day dysfunction due to sleepiness and reduced subjective sleep quality. In all three time points, stress levels correlated with the PSQI-score, supporting previous findings suggesting a close relationship between these two factors (Vandekerckhove and Cluydts, 2010)<sup>5</sup>.

Poor sleep quality in medical students has been related to depressive symptoms and in females, symptoms of anxiety. Sleep disturbances are important symptoms in many psychiatric diseases, e.g. mood and anxiety disorders<sup>18</sup>.

Since sleep disturbances often precede other signs of a depressive disorder, some authors hypothesize that these sleep disturbance may cause the drop in mood or that hormone changes first cause sleep disturbances and consecutively the change in mood. The tendency to delay bedtimes and extend rise times during weekends also continues into young adulthood. In addition to short sleep and irregular schedules, college students also experience low sleep quality, when assessed by standard measures. Surprisingly, perceived stress (rather than sleep schedule regularity, alcohol or

drug use, exercise frequency, or electronics usage) provided the most explanatory power for poor sleep in this population<sup>1</sup>.

**CONCLUSION:** This study showed that decreased nocturnal sleep time, late bedtimes during weekdays and weekends, catch-up sleep on weekends and increased daytime sleepiness are negatively associated with academic performance in dental students<sup>8</sup>. These results highlight a growing need for professionals to focus on the quality as well as the quantity of sleep when promoting mental and physical health in adolescents and young adults. College students who are consistently getting poor-quality sleep are at risk for problems far more serious than simply struggling to function in daily activities.

As chronic insomnia is a risk factor for major mood and substance abuse disorders, physicians, college healthcare professionals, and residence life workers should be more proactive in screening for sleep difficulties and in articulating the importance of sufficient, restorative sleep in college students' well-being<sup>17</sup>. Finally, studies with experimental manipulations of the amount and quality of children's sleep confirmed that poor or fragmented sleep is associated with behavioral and cognitive difficulties, with reduced academic achievement and learning.

Nonetheless, this decrease in neurocognitive functioning can easily be reverted by adopting healthy sleep schedules, such as fixed bedtimes and waking times, fixed school starting times, and by limiting psychosocial and environmental pressure<sup>3</sup>.

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