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Dolna 17, Warsaw,
Poland 00-773
+48 226 0 227 03
editorial_office@rsglobal.pl

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THE IMPORTANCE OF SLEEP AND THE CONSEQUENCES OF SLEEP DEPRIVATION

Dominika Walczak (Corresponding Author, Email: dominikajwalczak@gmail.com)
4th Military Clinical Hospital with Polyclinic SPZOZ in Wrocław, Wrocław, Poland
ORCID ID: 0009-0007-1629-871X

Adrian Kruk
Independent Public Provincial Combined Hospital in Szczecin, Szczecin, Poland
ORCID ID: 0009-0001-1749-6159

Aleksander Białoń
University Hospital in Kraków, Kraków, Poland
ORCID ID: 0009-0007-4447-7619

Weronika Ewa Nowak
Jan Mikulicz-Radecki University Clinical Hospital, Wrocław, Poland
ORCID ID: 0009-0006-8445-2072

Paweł Harbut
Medical University of Silesia in Katowice, Katowice, Silesia, Poland
ORCID ID: 0009-0001-0405-4407

Lidia Jurczenko
4th Military Clinical Hospital with Polyclinic SPZOZ in Wrocław, Wrocław, Lower Silesia, Poland
ORCID ID: 0009-0005-5075-629X

Igor Gawłowski
5th Military Clinical Hospital with Polyclinic in Kraków, Kraków, Poland
ORCID ID: 0009-0007-8895-4237

Aleksandra Dorosz
Lower Silesian Center of Oncology, Pulmonology, and Hematology in Wrocław, Wrocław, Poland
ORCID ID: 0009-0001-4956-5702

Katarzyna Jakubowska
4th Military Clinical Hospital with Polyclinic in Wrocław, Wrocław, Poland
ORCID ID: 0009-0006-6542-8309

Aleksandra Miśta
Provincial Specialist Hospital in Wrocław, Wrocław, Poland
ORCID ID: 0009-0007-1389-2596

ABSTRACT

Sleep is a fundamental biological process regulated by the circadian rhythm and is governed by complex neural mechanisms involving various brain regions and neurotransmitters. It consists of non-rapid eye movement (NREM) and rapid eye movement (REM) stages, each playing a distinct role in physiological and cognitive restoration. One leading theory, the Synaptic Homeostasis Hypothesis, suggests that sleep serves to rebalance synaptic strength accumulated during wakefulness, thereby preserving cognitive efficiency and promoting memory consolidation. Optimal sleep varies with age and is essential for maintaining physical, cognitive, and emotional health. However, modern lifestyles, characterized by increased screen time, irregular schedules, and a 24/7 work culture have contributed to widespread sleep deprivation, particularly among adolescents, shift workers, and high-demand professionals. Sleep deprivation, whether partial or total, is linked to a wide range of adverse health outcomes, including obesity, cardiovascular disease, cognitive decline, and increased accident risk. Chronic sleep deprivation also significantly impacts executive function and has been associated with sleep disorders such as obstructive sleep apnea, which further exacerbate health risks. Objective measures like actigraphy and EEG provide valuable insights into sleep quality and fragmentation beyond self-reported duration.

KEYWORDS

Sleep, Sleep Deprivation, Circadian Rhythm, Shift Workers, SHY

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Introduction:

Sleep is a universal, essential biological process. It is categorized based on behavioural and physiological features into two main types: non-rapid eye movement (NREM) sleep, which consists of three stages (N1, N2, N3), and rapid eye movement (REM) sleep, which is marked by quick eye movements, muscle atonia and irregular brain activity seen on EEG. Circadian rhythm of sleep-wakefulness is regulated by the body's internal clock located in the suprachiasmatic nuclei of the hypothalamus. The brain regions involved in NREM sleep are primarily found in the ventrolateral preoptic nucleus of the hypothalamus, whereas those of REM sleep are located in pons. During sleep, various physiological processes across different organ systems undergo significant changes due to functional alterations in both the autonomic and somatic nervous systems. [1]

Methodology:

The literature used in this review was obtained through a narrative search of PubMed and Google Scholar. Publications from 2002 to 2025 were considered. Preference was given to articles focused on sleep deprivation.

Discussion:

Sleep is a complex process that is strictly controlled by various neurotransmitters. The transition between wakefulness and sleep depends on the right balance between glutamate and GABA, which stimulate or inhibit specific areas of the brain. Acetylcholine also plays an important role – it is responsible for maintaining wakefulness and influences the transition to the REM phase. Efficient switching between wakefulness and sleep, as well as between the NREM and REM phases, is essential for the proper functioning of the body. These changes are regulated by mutually inhibiting brain centres, and the mechanism itself is compared to a flip-flop switch, which allows for quick and unambiguous changes of state without transitional phases. Disruptions in this mechanism can lead to sleep fragmentation or narcolepsy. [2]

The Synaptic Homeostasis Hypothesis

The reason we need sleep seems fairly obvious: without it, we feel exhausted, irritable, and our cognitive abilities decline. After sleeping well, both mind and body feel rejuvenated, and we return to normal functioning. Yet, pinpointing exactly what processes sleep restores has been more difficult to determine. Sleep takes up a significant portion of our daily lives, is present throughout all stages of life from infancy to old age and has been observed in every carefully studied species, from fruit flies to humans. It is characterized by a temporary detachment from the surroundings, often paired with stillness. Given the dangers of reduced alertness and the lost opportunities for more active behaviours, the fact that the brain regularly enters this "offline" state suggests that sleep must fulfil a crucial biological role. The Synaptic Homeostasis Hypothesis (SHY) suggests that sleep's core function is to restore a balance in the synaptic strength, which becomes disrupted due to learning-related synaptic strengthening during wakefulness and synapse formation during development. [3] In essence, sleep is viewed as the "cost of plasticity." Strengthened synapses come with several drawbacks, such as increased energy demands, greater need for cellular resources at synapses, resulting in cellular stress, and changes in the supporting cells like glia. Moreover, heightened synaptic strength can impair the precision of neuronal responses and limit the brain's capacity to absorb new information. Sleep helps to restore optimal synaptic strength, easing the strain on the neurons and the surrounding cells. This process improves the specificity of the neural responses and the brain's ability to learn, boosts signal-to-noise ratios, and ultimately promotes the consolidation and integration of memories. [4]

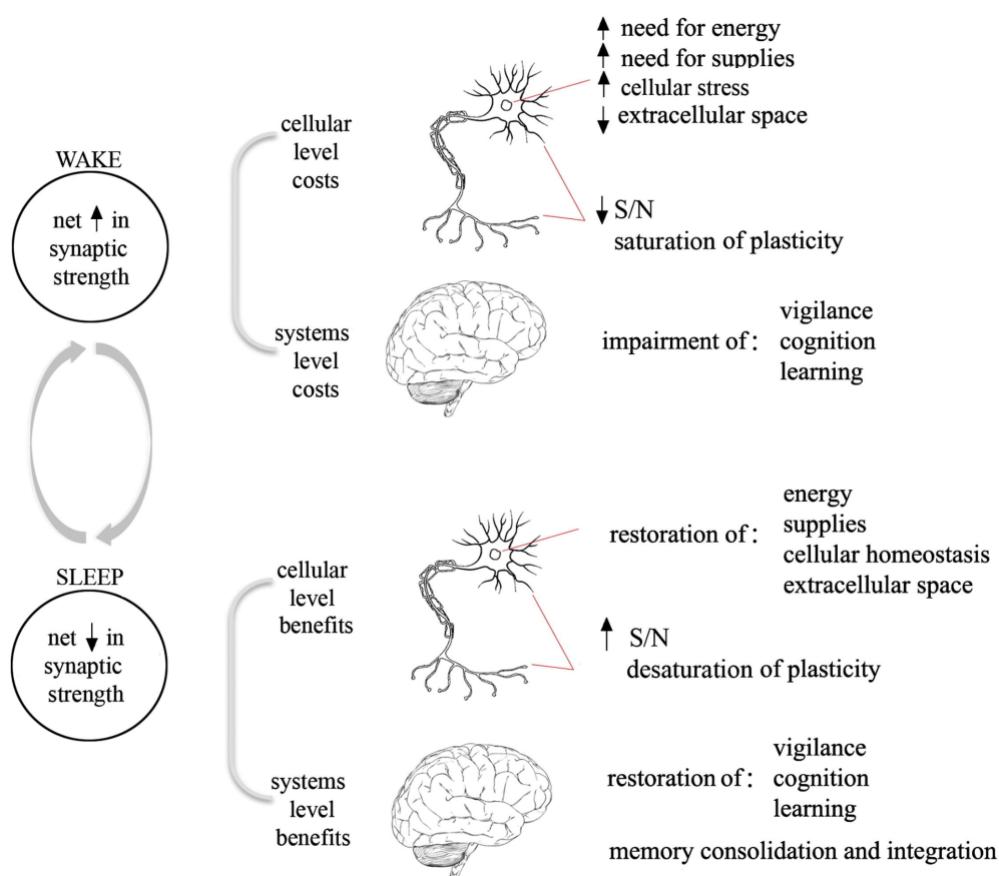


Fig. 1. The Synaptic Homeostasis Hypothesis. Tononi G, Cirelli C. (2003) Sleep and synaptic homeostasis: a hypothesis. *Brain Res Bull.*; 62:143–150. doi:10.1016/j.brainresbull.2003.09.004. PMID: 14638388

During wakefulness, the brain engages with the external world (the "grand loop") and processes only a limited set of inputs, determined by ongoing experiences—like meeting someone new. High levels of neuromodulators, such as noradrenaline from the locus coeruleus (LC), help ensure that any surprising or significant coincidences within this limited input range are transmitted through the brain, strengthening relevant synaptic connections. During sleep, in contrast, the brain is cut off from external sensory and motor input. This disconnection allows for the internal reactivation of the stored information, offering a broad

sampling of past knowledge, including older memories about people and places. Neuromodulator levels drop, and neurons fire in synchronized ON/OFF patterns characteristic of NREM sleep (e.g., slow waves, spindles, and sharp-wave ripples). These conditions support synaptic down-selection: connections in well-integrated, frequently used circuits—especially those reinforced during wakefulness or strongly linked to past memories—are preserved. Meanwhile, weaker or rarely activated connections, particularly those that don't align well with existing knowledge, are gradually weakened and may eventually be pruned over a successive sleep-wake cycle. [4][5][6]

Sleeping norms

For sleep to effectively restore the body, it must fulfil a person's individual sleep requirements, be of a sufficient length, and maintain an adequate quality, which is age-dependent. [7, 8] Although the amount of sleep children need differs by child, recommendations cited by the Centers for Disease Control and Prevention are for 12 to 14 hours for children aged 1 to 3 years, decreasing to 11 to 13 hours for children aged 3 to 5, to 10 to 11 hours for children aged 5 to 10, and to 8½ to 9½ hours for adolescents [9].

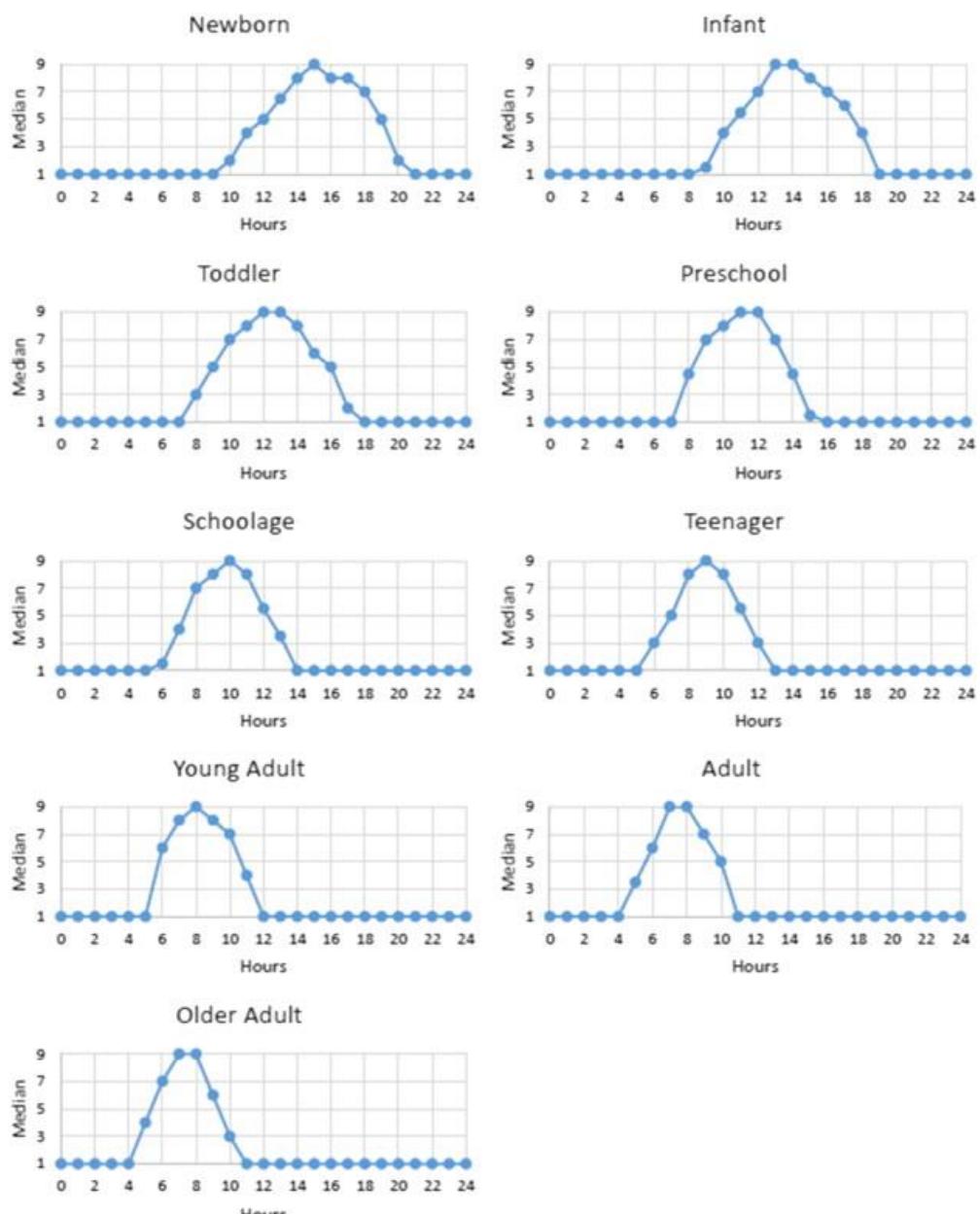


Fig. 2. Hirshkowitz et al. *Sleep Health: Journal of the National Sleep Foundation* October 31, 2015 Retrieved from URL: <https://pubmed.ncbi.nlm.nih.gov/29073412/>

During adolescence, sleep-wake patterns evolve as changes in the sleep regulation take place. These changes, influenced by the ongoing maturation of a physiological, psychological, and cognitive functioning, as well as shifts in circadian rhythm, lead to a greater tolerance for insufficient sleep in adulthood. This stage of life, marked by rapid growth and maturation, also brings numerous challenges related to both sleep and nutrition. [8] Although there is increasing focus on the importance of healthy sleep, a significant number of adults in the U.S. do not achieve the recommended sleep duration. As a result, enhancing sleep quality and duration has become a national priority with serious health and economic consequences. [10] Research increasingly shows that racial and ethnic minority populations are disproportionately impacted by sleep and circadian rhythm disruptions, which in turn contribute to existing disparities in chronic disease. The modern 24/7 lifestyle, amplified by widespread use of digital devices and social media, has made insufficient sleep common among children and adolescents, with potentially harmful effects on brain development, mental well-being, and cardiovascular health. [11] Moreover, recent studies have linked sleep deprivation to poor cardiometabolic outcomes, cognitive health impairments, and an increased risk of dementia in older adults, highlighting sleep as a modifiable risk factor in the 21st century. Consequently, improving sleep may play a crucial role in alleviating the burden of chronic illnesses. [12]. Additionally, regularly sleeping fewer than 7 hours per night has been linked to a range of negative health effects, including weight gain, obesity, diabetes, high blood pressure, heart disease, stroke, depression, and a higher risk of early death. An inadequate sleep is also associated with a weakened immune function, increased sensitivity to pain, reduced performance, more frequent mistakes, and a greater risk of accidents. [13]

Sleep deprivation

Sleep deprivation (SD) can be categorized into partial and total SD. Partial SD involves a shortened or disrupted night of sleep, while total SD refers to a complete lack of sleep for at least one night within the typical sleep-wake cycle. Total sleep deprivation is often the focus of research, likely because it allows easier tracking of the brain activity, as extended periods without sleep tend to lead to more noticeable cognitive impairments. However, research suggests that a chronic sleep restriction over time may have more detrimental effects than a single night of total sleep loss. [14,15] There are three key reasons why the concept of “quality over quantity” in sleep may be particularly relevant when considering a cognitive function. Firstly, a self-reported sleep duration can be prone to various biases, which may cause extreme values to actually reflect poor sleep quality rather than true differences in sleep length. [16] Secondly, conditions that negatively impact sleep quality are often also linked to reduced cognitive performance, potentially complicating the relationship between sleep and executive functioning. For instance, people with obstructive sleep apnea (OSA) frequently experience repeated awakenings during the night due to brief pauses in breathing. OSA is commonly associated with obesity and treatment-resistant hypertension, both of which are known risk factors for a cognitive decline, partly due to their effects on the brain’s small blood vessels. [17,18] Thirdly, sleep patterns naturally change with age. The sleep efficiency defined as the proportion of time spent asleep between initially falling asleep and waking up in the morning, typically drops from about 89% in middle age to 79% by age 70. [19] Since cognitive abilities also tend to decline with age, especially in later years, it becomes challenging but essential to separate the effects of aging, sleep quality, and other contributing factors.

Several studies have explored the link between sleep quality and executive function using various methods. Actigraphy uses a wearable device that measures movements when going to bed to assess parameters like total sleep time (TST), sleep onset latency (SOL), wake after sleep onset (WASO), and general restlessness to gauge quality of sleep. EEG studies tend to use time in slow wave sleep (SWS), rapid eye movement sleep (REM), and non-REM sleep (nREM), as well as the presence and density of sleep spindles. [20] Other studies rely on participants reporting whether or not they had a restful and restorative sleep. Together, these may be used to give an indication of ‘sleep quality’, or of ‘sleep fragmentation’, rather than self-reported sleep duration. [21]

Sleep deprivation among workers

Chronic sleep deprivation is common in several professions, including medical residents, military personnel, and shift workers. Studying the effects of limited sleep can offer valuable insights—not only regarding the nature and function of sleep but also of practical importance for enhancing the health performance of individuals who are required to function effectively despite experiencing a minimal or disrupted sleep. [22] Shift work plays a vital role in maintaining the continuous operation of modern, 24/7 society, particularly in sectors such as healthcare, emergency services, hospitality, transportation, and manufacturing. To track global patterns in working conditions, the International Labour Organization and the

European Foundation for the Improvement of Living and Working Conditions conducted a study across 187 countries, covering around 1.2 billion workers (Eurofound and International Labour Organization, 2019). Their findings revealed that between 10% and 30% of employees work night shifts at least once per month. Additionally, 12% to 13% of the workforce in North America reported working either rotating or regular night shifts. [23] Shift work refers to job schedules that fall outside the standard 9-to-5 workday. These schedules often involve working early hours, condensed work-weeks with 12-hour shifts, and overnight work. Sleepiness is most common during night shifts and tends to peak toward the end of the shift. It is linked to a reduced alertness and poorer performance, posing significant risks to both health and safety. Individuals with a shift work sleep disorder may even fall asleep unintentionally while working or during their commuting home after a night shift. Unconventional work hours can have serious socioeconomic consequences, including a higher likelihood of workplace accidents, decreased job performance, and elevated public safety risks—particularly at night. [24,25]

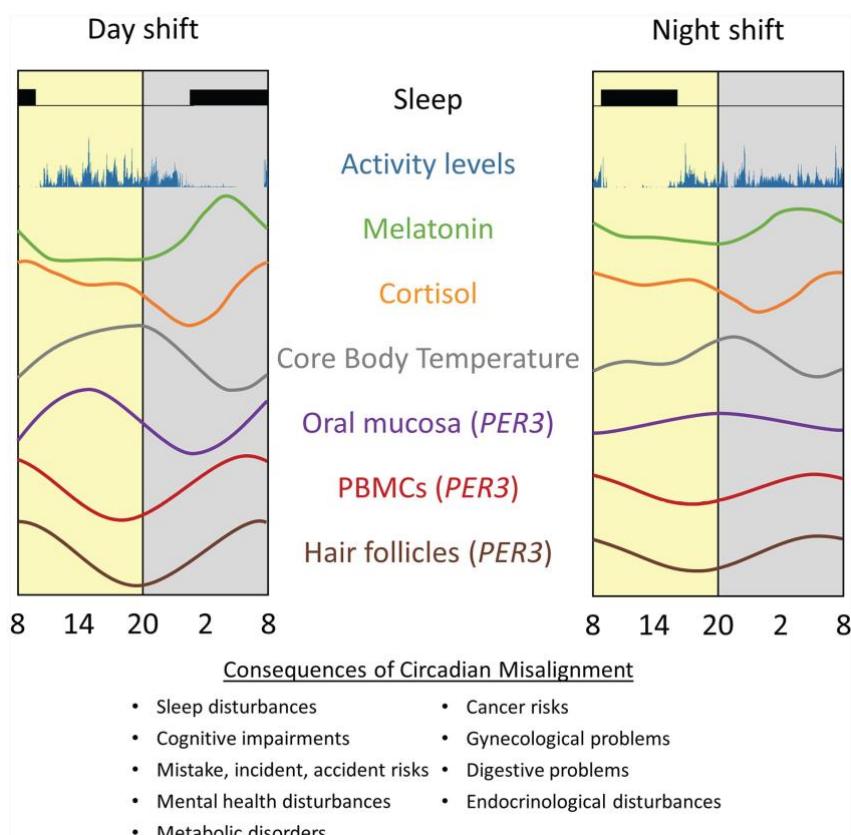


Fig. 3. Diane B. Boivin Philippe Boudreau, and Anastasi Kosmadopoulos. *Disturbance of the Circadian System in Shift Work and Its Health Impact* Volume 37, Issue 1 <https://doi.org/10.1177/0748730421106421>
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Economy

Additionally, on a societal scale, sleep deprivation leads to significant economic losses due to a reduced productivity, increased rates of illness, and higher mortality. In the United States, these losses are estimated to range from \$280 billion to \$411 billion per year, with projections suggesting a rise to between \$318 billion and \$456 billion by 2030. [26] The total accumulated cost of sleep-related economic impacts in the U.S. could reach between \$4 trillion and \$7 trillion by 2030. In Japan, sleep deprivation is estimated to cost over \$138 billion annually, while Germany and the United Kingdom each face losses between \$50 billion and \$60 billion per year. In Australia, the yearly economic burden of insufficient sleep is estimated to fall between \$35 billion and \$45 billion. [27, 28]

Conclusions

Sleep is undoubtedly a biological process of fundamental importance for the proper functioning of the human body. It plays a key role in maintaining homeostasis, regulating metabolic processes, consolidating memory, and regenerating the nervous and immune systems. From a neurobiological perspective, sleep enables the reorganization of synaptic connections and the removal of unnecessary metabolic products from the central nervous system, including through the activation of the so-called glymphatic system. During sleep, especially in the REM (Rapid Eye Movement) phase, experiences are integrated and memory traces are consolidated, which translates into the ability to learn, process emotions, and think creatively. On a physiological level, sleep regulates hormone balance, which is important for circadian rhythms, metabolism, and weight control. Chronic sleep deprivation leads to cognitive impairment, reduced immunity, and an increased risk of cardiovascular disease, type 2 diabetes, and depression. Sleep norms depend primarily on age, but also on the type of work performed. Shift workers, who make up a large percentage of the total workforce, are the most exposed to sleep deprivation, which has serious health and economic consequences.

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Conceptualization: Dominika Walczak and Adrian Kruk

Methodology: Aleksander Białoń, Weronika Ewa Nowak

Formal analysis: Lidia Jurczenko, Adrian Kruk

Investigation: Paweł Harbut, Weronika Ewa Nowak

Resources: Igor Gawłowski, Aleksander Białoń

Data curation: Aleksandra Dorosz, Paweł Harbut

Writing-rough preparation: Dominika Walczak

Writing - review and editing: Katarzyna Jakubowska

Visualization: Aleksandra Miśta, Aleksandra Dorosz

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