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Research Paper

Relationship between Quality of Sleep and Perceived Stress among Young Adults: A Correlational Study

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ABSTRACT

This research explored the connections between anxiety, sleep quality, and stress in adults based on their self-reported experiences. Participant provided information regarding their anxiety symptoms, sleep habits, fear of being judged negatively, and stress levels. the study utilized standardized tools, including the generalized anxiety disorder 7-item scale (gad7), die fear of negative evaluation scale, the sleep quality scale, and the perceived stress questionnaire. correlation analyses were conducted to assess the relationships among these variables. the results revealed a significant positive correlation between generalized anxiety symptoms and fear of negative evaluation, suggesting that individuals who are more concerned about being judged tend to report higher anxiety levels. moreover, there was a notable positive relationship between fear of negative evaluation and poor sleep quality, indicating that individuals with higher social apprehension may experience more sleep disturbances. these findings contribute to a deeper understanding of how anxiety, stress perception, self-consciousness, and sleep quality are interrelated in adulthood.

Keywords: *Quality of Sleep, Perceived Stress, Young Adults, Correlational Study*

Quality of sleep

Sleep is a complex physiological process that plays a vital role in maintaining physical health and psychological well-being. Over the years, psychologists have proposed various theories to explain the purpose of sleep, each offering distinct insights. Among the most widely recognized are the adaptive theory, restorative theory, and consolidation theory.

The adaptive theory suggests that sleep evolved as a survival mechanism, helping organisms to stay safe, conserve energy, and optimize their chances of survival. According to this view, sleep patterns have developed to align with periods when activity would be less beneficial or more dangerous. For example, animals tend to sleep more when predators are active or food sources are limited (Siegel, 2011), supporting the theory's evolutionary foundation.

The restorative theory emphasizes sleep's role in healing and maintaining the body. It proposes that sleep enables tissue repair, cell regeneration, and immune system enhancement. Research shows that sleep deprivation can suppress immune function,

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increase inflammation, and impair cognitive abilities (Siegel, 2011; Irwin, 2019). This theory underscores the physical necessity of sleep for long-term health.

The consolidation theory highlights the significance of sleep in memory processing and leaming. According to this perspective, sleep helps consolidate newly acquired information, transferring it from short-term to long-term memory storage. Studies show that lack of sleep impairs the ability to retain new information and negatively impacts leaming (Stickgold,

In psychology, sleep is categorized into multiple stages, each serving different functions:

- Stage I marks the transition from wakefulness to sleep. Breathing, heart rate, and muscle tension begin to decrease. This stage is light and easily interrupted (American Sleep Association, 2021).
- Stage 2 involves further decreases in body temperature, heart rate, and brain activity. It prepares the body for deep sleep and supports memory consolidation and learning (National Sleep Foundation, 2021).
- Stages 3 and 4, often referred to as slow-wave sleep (SWS), are deep sleep phases where the body is fully relaxed, and waking becomes more difficult. These stages are crucial for physical recovery and memory processing (National Sleep Foundation, 2021).
- REM (Rapid Eye Movement) sleep is the stage where most dreaming occurs. It is marked by increased brain activity, irregular breathing, and elevated heart rate. The body enters a temporary paralysis to prevent acting out dreams. REM sleep plays a critical role in emotional memory formation, problem-solving, and creativity (National Sleep Foundation, 2021).

Disturbances in sleep have been closely linked to numerous psychological disorders. Research consistently shows that individuals with conditions like depression, anxiety, and bipolar disorder often experience difficulty falling asleep, staying asleep, or waking up too early (American Psychiatric Association, 2013). Additionally, sleep issues can exacerbate mood disorders and serve as predictors for the onset of depression (Baglioni et al., 2011).

Disrupted sleep has also been associated with psychotic disorders such as schizophrenia. Studies Indicate that individuals with schizophrenia often experience fragmented sleep, frequent awakenings, and diminished REM sleep. These disruptions are believed to contribute to the development or worsening of psychotic symptoms (Mondino et al., 2015).

In summary, sleep disturbances are not only symptoms but also potential risk factors for a variety of mental health conditions. They can reflect the presence and severity of psychiatric disorders and provide important clues for diagnosis and treatment. The relationship between sleep and mental health is reciprocal: poor sleep can lead to psychopathology, and existing mental health issues can impair sleep. Therefore, it is essential for clinicians to assess and address sleep disturbances as part of comprehensive mental health care.

Perceived stress

In psychology, stress is commonly defined as both a psychological and physiological reaction to perceived challenges or threats that surpass an individual's capacity to cope (Lazarus & Folkman, 1984). While a moderate amount of stress can serve as a motivational force to help individuals achieve their goals, excessive stress can be determinantal to both mental and physical health.

Richard Lazarus (1991) introduced the Cognitive Appraisal Theory (CAT), which suggests that stress does not solely arise from external circumstances, but from how individuals interpret and evaluate those circumstances. According to this model, emotional responses to stress can be managed by changing one's perception of the situation.

The theory outlines two key stages in evaluating stressors: primary appraisal and secondary appraisal. In the primary appraisal, individuals assess whether a situation poses a threat, a challenge, is irrelevant, or potentially beneficial. If the event is perceived as threatening, they proceed to the secondary appraisal, where they evaluate their ability to cope with the situation—considering available resources, such as personal skills, knowledge, and social support systems.

This theory emphasizes the powerful influence of perception on emotional responses. For instance, individuals who perceive a situation as threatening and feel unprepared to handle it are more likely to experience negative emotions such as fear or anxiety. Conversely, if a person views the same situation as a manageable challenge, they are more likely to feel motivated or enthusiastic.

Building on this, The Transactional Model of Stress and Coping (TMSC), also proposed by Lazarus and Susan Folkman in 1984, views stress as a dynamic process Involving continuous interaction between an individual and their environment. Stress results when a person appraises a situation as exceeding their ability to manage its demands.

The model also incorporates primary and secondary appraisals, through which individuals assess the relevance of an event to their well-being and evaluate their coping resources. If an event is judged as harmful or threatening, the person then evaluates whether they possess the means to manage it effectively. This includes assessing personal strengths, access to support systems, and coping strategies.

Coping mechanisms are categorized into two main types:

- Problem-focused coping, which involves actively addressing or changing the source of stress.
- Emotion-focused coping, which involves regulating emotional responses to reduce psychological discomfort.

According to the model, the strategy chosen depends on both the type of stressor and the individual's interpretation of it.

The importance of feedback is another crucial element in the transactional model. Feedback refers to the evaluation of how effective one's coping strategies and appraisals have been. This feedback informs future responses and helps refine coping mechanisms over time.

Furthermore, perceived stress reflects an individual's subjective view of how unpredictable, overwhelming, or uncontrollable their life feels, rather than the objective number or severity of stressors. It encompasses feelings of helplessness, the burden of constant demands, and confidence in one's ability to manage difficulties. Two people may experience similar external events but evaluate their impact differently based on personal traits, coping skills, and support networks. Thus, perceived stress plays a key role in shaping how individuals

respond to challenging environments, with direct implications for their overall mental health and well-being (Lazarus & Folkman, 1984).

To measure perceived stress, tools such as the Perceived Stress Scale (PSS) developed by Cohen, Kamarck, and Mermelstein (1983) are commonly used. This scale assesses how frequently individuals feel overwhelmed or unable to cope, offend valuable insights into their psychological resilience and stress management capacity.

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REVIEW OF LITERATURE

Fear of negative evaluation

Several empirical studies have explored the relationship between Fear of Negative Evaluation (FNE) and anxiety, highlighting the role of cultural, gender, and developmental factors in shaping this association.

Study 1: Carleton et al. (2014)

Carleton and colleagues examined the link between anxiety sensitivity (AS)—the fear of anxiety-related sensations—and NE among 125 undergraduate students. Participants completed the Fear of Negative Evaluation Scale and the Anxiety Sensitivity Index-3. The analysis revealed a significant positive correlation between anxiety sensitivity and FNE, indicating that individuals with higher levels of FNE are more likely to experience anxiety related physical and emotional symptoms. Furthermore, the study found that anxiety

symptoms mediated the relationship between FNE and AS, suggesting that fear of negative evaluation may trigger anxiety, which in turn increases anxiety sensitivity. These findings underscore the importance of targeting FNE in therapeutic interventions for anxiety disorders.

Study 2: Shah et al. (2017)
Shah and colleagues explored the association between FNE and anxiety in a sample of 200 Indian university students. The results indicated a strong positive correlation, showing that students with elevated levels of FNE were significantly more likely to experience anxiety. Notably, the study also uncovered a gender-based difference, with female students reporting higher levels of both FNE and anxiety compared to males. The researchers suggested that sociocultural pressures, particularly those related to traditional gender expectations, may contribute to this disparity. These results highlight the need for culturally sensitive approaches in addressing anxiety and social evaluation fears, especially among women.

Study 3: Rajappa et al. (2019)
Rajappa and colleagues examined the relationship between FNE and social anxiety among Indian adolescents. A total of 125 participants completed the Social Interaction Scale and the Fear of Negative Evaluation Scale. The results showed a significant positive complain, indicating that adolescents who fear being judged negatively are more likely to experience social anxiety. In line with Study 2, a gender difference was also observed: female participants reported higher levels of both FNE and social anxiety than their male counterparts. The authors attributed this to the greater societal pressure on girls to conform to social expectations, which may heighten sensitivity to criticism and contribute to increased anxiety in social contexts. This study emphasizes the role of gender norms and cultural expectations in shaping adolescents' emotional well-being.

Study 4: Varela et al. (2021)
Varela and colleagues investigated the relationship between FNE and generalized anxiety symptoms among 237 Indian undergraduate students. Participants completed the Generalized Anxiety Disorder-7 (GAD-7) and the Fear of Negative Evaluation Scale. Findings demonstrated a siY1ificant positive relationship between FNE and anxiety levels. Additionally, the study identified notable differences based on gender and academic discipline: female students, along with those studying humanities and social sciences, reported significantly higher levels of FNE and anxiety compared to male students and those in science and technology fields. The authors concluded that academic context and gender play important roles in shaping students' vulnerability to anxiety and fear of judgment. These insights point to the necessity of integrating gender-sensitive and field-specific support strategies in academic set.

Collectively, these studies demonstrate a consistent and significant association between Fear of Negative Evaluation (FNE) and various forms of anxiety, including generalized and social anxiety. The research highlights the mediating role of anxiety symptoms, the influence of gender, and the impact of academic and cultural contexts on this relationship. These findings suggest that effective anxiety interventions—particularly in educational and adolescent settings—should consider the individual's sensitivity to social judgment, as well as the sociocultural pressures they face.

Quality of sleep

Review of Studies on the Relationship Between Sleep Quality and Anxiety Symptoms

A growing body of research has demonstrated a strong association between sleep quality and anxiety symptoms across various populations and cultural contexts. The following studies provide empirical evidence of this connection in different demographic groups, particularly in India, China, and Iran.

Study 1: Sharma et al. (2021) — India

Sharma and colleagues explored the relationship between anxiety symptoms and sleep quality In a sample of 200 Indian adults aged 18 to 45. Participants completed the Pittsburgh Sleep Quality Index (PSQI) and the Hamilton Anxiety Rating Scale (HARS). Results indicated that 52.5% of individuals showed mild to severe anxiety, while 65% reported poor sleep quality. A strong positive correlation was found between anxiety levels and poor sleep outcomes.

Gender differences were also notable—women reported significantly higher anxiety and poorer sleep quality compared to men. Interestingly, participants with higher anxiety also scored worse on PSQI subcomponents such as subjective sleep quality, sleep latency, sleep disturbances, and daytime dysfunction. These findings suggest that poor sleep may not only co-occur with anxiety but could also serve as a potential target for therapeutic intervention. The study emphasizes the high prevalence of both issues within the Indian population and calls for integrated treatment strategies.

Study 2: Li et al. (2020) — China

Li and colleagues investigated the bidirectional relationship between anxiety and sleep quality in a Chinese adult population (N = 441, ages 18—45). Using the Patient Health Questionnaire-9 (PHQ-9) and the PSQI, the study found that baseline anxiety levels predicted poorer sleep quality at follow-up, and vice versa.

This mutual reinforcement underscores the cyclical nature of sleep disturbances and anxiety symptoms. The results highlight the necessity of addressing both variables in clinical treatment plans. The findings also reflect the widespread prevalence of anxiety and sleep problems in China, guiding health professionals in developing culturally appropriate interventions.

Study 3: Sahoo et al. (2020) — Indian Undergraduates

Sahoo et al. focused on the prevalence and correlation of sleep issues and anxiety in a sample of 507 Indian undergraduate students. Participant completed the Insomnia Severity Index (ISI) and the Generalized Anxiety Disorder-7 (GAD-7) scale. The findings revealed that 52% reported moderate to severe insomnia, and 34% reported moderate to severe anxiety. A significant positive correlation was found between insomnia severity and anxiety symptoms.

As with previous studies, female students reported significantly higher anxiety and worse insomnia symptoms than their male counterparts. The study underscores the critical importance of addressing sleep disturbances as part of anxiety treatment, particularly in college-aged populations who may be at increased risk due to academic and social stressors.

Study 4: Tavakoli et al. (2021) — Iran

Tavakoli and colleagues explored the relationship between sleep quality and anxiety symptoms in 220 Iranian patients with chronic pain. Using the PSQI and the Hospital

Anxiety and Depression Scale (HADS), they found that 70.5% of the participants experienced mild to severe anxiety, while 85.5% reported sleep disturbances.

A strong positive correlation between poor sleep quality and anxiety symptoms was observed. Female participants reported significantly worse outcomes in both variables compared to males. These findings emphasize the role of sleep in managing psychological well-being in patients with chronic pain, advocating for a dual-targeted intervention strategy.

Conclusion

All four studies consistently demonstrate a strong and significant relationship between poor sleep quality and anxiety symptoms, across various age groups and cultural backgrounds. Common themes include:

- High prevalence of both sleep disturbances and anxiety.
- Gender disparities, with females consistently reporting worse symptoms.
- The importance of treating sleep issues as part of comprehensive anxiety interventions.

These findings reinforce the need for healthcare professionals to assess sleep patterns when diagnosing or treating anxiety disorders, particularly in vulnerable populations such as university students and chronic pain patients.

Perceived stress

The Interplay Between Sleep, Stress, and Anxiety: A Review of Literature

A growing body of research highlights the complex relationship between sleep quality, stress, and anxiety, particularly in student populations. Lack of sleep or poor-quality sleep not only affects physical well-being but has been increasingly recognized as a major risk factor for mental health disorders, including anxiety, depression, and suicidal ideation. Likewise, stress is a significant psychological variable that has a direct and predictive relationship with anxiety levels.

Sleep Disturbances and Mental Health

Poor sleep quality has been associated with the onset, progression, and severity of mental health conditions. Conditions like anxiety and depression can both cause and be worsened by insomnia or disrupted sleep patterns. Even among healthy adults, a single night of poor sleep can result in elevated anxiety and emotional dysregulation the next day. This effect is even more pronounced among individuals with pre-existing mental health conditions, where chronic sleep issues may lead to intensified psychological symptoms and elevated suicide risk. However, the encouraging aspect is that interventions to improve sleep have the potential to reduce the severity of psychiatric disorders.

Study 1: Taylor et al. (2018)

This study focused on the relationship between perceived stress and anxiety among 256 undergraduate students. Participants completed the State-Trait Anxiety Inventory (STAI) and the Perceived Stress Scale (PSS). Results revealed a strong positive correlation between stress and anxiety, indicating that increased stress levels were predictive of heightened anxiety. The study emphasized the role of stress reduction in mitigating anxiety among students.

Study 2: American University Sample
Another study involving 250 undergraduate students (163 females and 87 males) from a top U.S. university used the PSS and STAI to measure perceived stress and anxiety, respectively. The findings supported the previous study, demonstrating a significant positive relationship between stress and anxiety. Regression analysis revealed that stress was a major predictor of anxiety, particularly in university students coping with academic pressure, financial burdens, and social expectations.

Study 3: Malhotra et al. (2019) — India
This cross-sectional study assessed 400 Indian medical students using the Depression Anxiety Stress Scales (DASS-21). A significant positive correlation between stress and anxiety was observed, reinforcing the idea that medical students face high psychological demands. The findings highlight the necessity of stress and anxiety management strategies specifically tailored to the needs of medical students in India.

Study 4: Jaiswal et al. (2021) — India
Jaiswal and colleagues examined stress and anxiety levels among 400 Indian college students from various institutions in North India using the DASS-21. Results showed that 32.5% of participants experienced moderate to severe stress, while 42.5% experienced medium to extreme anxiety. A significant positive correlation between stress and anxiety was reported, with stress acting as a predictor of anxiety in regression analysis.

METHODOLOGY

Purpose of the Study
The primary aim of this study is to examine the relationship between quality of sleep, perceived stress, and generalized anxiety in adults. Specifically, it seeks to explore how these three psychological variables interact and influence one another. Additionally, the study investigates the correlational patterns among these factors, with particular attention to the role of Fear of Negative Evaluation (FNE) as a contributing variable.

Hypotheses
- **HI:** Higher levels of Fear of Negative Evaluation (FNE) will be positively associated with increased levels of Generalized Anxiety and Perceived Stress in adults.
- **H2:** Poor sleep quality will be positively correlated with higher levels of Fear of Negative Evaluation and Generalized Anxiety in adults.
- **H3:** Higher levels of Perceived Stress will be positively correlated with greater levels of Fear of Negative Evaluation and Generalized Anxiety in adults.

Variables
- Anxiety
- Perceived Stress
- Quality of Sleep

Sample
The study was conducted on a sample of 64 adult participants (both male and female) within the age range of 25 to 35 years. Participants were selected using a non-probability sampling method, ensuring voluntary and informed participation. All individuals were screened to exclude any clinical diagnosis of psychiatric disorders to maintain the study's focus on nonclinical adult populations.

Research Design

The research employed a correlational design. Pearson's correlation coefficient was used to analyze the strength and direction of the relationships between the following variables: Fear of Negative Evaluation (FNE), Perceived Stress, Quality of Sleep, and Generalized Anxiety. This statistical method is suitable for examining associations between continuous variables in psychological research.

Tools/instruments

The following standardized instruments were used for data collection:

1. **Brief Fear of Negative Evaluation Scale (BFNE):** The BFNE is a 12-item self-report questionnaire used to assess concerns related to being judged negatively by others—a core feature of social anxiety. Items are rated on a 5-point Likert scale, ranging from I (not at all characteristic of me) to 5 (extremely characteristic of me). Higher scores reflect greater fear of negative evaluation. The scale has demonstrated strong psychometric properties, including good internal consistency, test-retest reliability, and validity, making it a reliable tool for both clinical and non-clinical populations.
2. **Perceived Stress Questionnaire (PSQ):** The PSQ consists of 30 items designed to measure the frequency of stress-related experiences in everyday life. It identifies stressors that may contribute to psychological stream and somatic symptoms. The scale evaluates multiple dimensions of stress and is frequently used in studies exploring the impact of stress on mental and physical health, including sleep disturbance and anxiety disorders.
3. **Sleep Quality Scale (SQS):** The SQS is a 28-item scale that assesses six dimensions of sleep quality: daytime dysfunction, restoration after sleep, difficulty initiating and maintaining sleep, waking problems, and overall satisfaction with sleep. Responses reflect the extent of sleep difficulties, with higher scores indicating poorer sleep quality. It is a widely accepted instrument in both clinical and research contexts for evaluating subjective sleep disturbances.
4. **Generalized Anxiety Disorder-7 (GAD-7):** The GAD-7 is a 7-item self-report scale used to screen for and assess the severity of generalized anxiety symptoms. Each item is rated on a scale from 0 (not at all) to 3 (nearly every day), with total scores ranging from 0 to 21. Higher scores indicate more severe symptoms. The GAD-7 is recognized for its efficiency, reliability, and validity in both clinical practice and academic research.

RESULTS AND DISCUSSION

Purpose of the Study

The primary aim of this study was to examine the relationships between Generalized Anxiety Disorder (GAD), Fear of Negative Evaluation (FNE), Sleep Quality (SQS), and Perceived Stress (PSQ) in adults. The study utilized Pearson correlation coefficients to assess the strength and direction of associations among these psychological variables.

The sample consisted of 64 adult participants, both male and female, aged between 25 to 35 years. Each participant completed standardized self-report measures, including the GAD-7, the Brief Fear of Negative Evaluation Scale, the Sleep Quality Scale, and the Perceived Stress Questionnaire.

Table 1: Correlation Matrix

Tools		GAD	FNE	SQS	PSQ
GAD	Pearson correlation	1	.296*	.214	.068
	Sig.(2-tailed)		.017	.089	.592
	N	64	64	64	64
FNE	Pearson correlation	.296*	1	.315*	.212
	Sig (2 tailed	.017		.011	.093
	N	64	64	64	64
SQS	Pearson Correlation	.214	.315*	1	.142
	Sig.(2-tailed)	.089	.011		.262
	N	64	64	64	64
PSQ	Pearson Correlation	.068	.212	.142	1
	Sig. (2-tailed)	.592	.093	.262	
	N	64	64	64	64

**Correlation is significant at the 0.05 level (2-tailed)*

Correlations

- Fear of Negative Evaluation (ENE) and Generalised Anxiety Disorder (GAD). At the 0.05 level, it was determined that there was a significant connection between CAD and FNE (r =.296, p =.017, two-tailed). This implies a positive association between GAD and FNE, indicating that people with higher levels of GAD have a stronger tendency to dread criticism. This result is consistent with earlier studies that highlighted the contribution of social anxiety to the symptoms of generalised anxiety.
- Steep Quality Scale (SQS) and Generalised Anxiety Disorder (r=.214, p=.089, 2-tailed) The association between GAD and SQS was not statistically significant. This implies that there is no connection between GAD and the SQS's measure of sleep quality.
- Perceived Stress Questionnaire (PSQ) and Generalised Anxiety Disorder (GAD) (t-.068, p =.592, 2-tailed) The association between GAD and PSQ was not statistically significant. This demonstrates that there is no meaningful association between GAD and PSQ-measured subjective stress levels
- Sleep Quality Scale (SQS) and fear of negative evaluation (FNE) At the 0.05 Level, the correlation between FNE and SQS was shown to be significant (rp.315, p=.011 the two-tailed). This Suggests that there is a link between quality of sleep and Fear of negative evaluation, and that people with greater levels of . FNE may find it More difficult to get better-quality sleep.
- Fear of Negative Evaluation (FNE) and Perceived Stress Questionnaire (PSQ): There is no statistically significant link between fear of negative evaluation and perceived stress levels, according to the results of the FNE and PSO tests (r = .212, p =.093, two-tailed).
- Perceived Stress Questionnaire (PSQ) and Sleep Quality Scale (SOS): The lack of a statistically significant correlation between SQS and PSQ (r=.142, p =.262, Two-tailed) shows that there is no connection between perceived stress levels and sleep Quality. .

Table 2: Descriptive Statistics

NO	Mean	N	Std deviation
GAD	10.84	64	4.883
FNE	38.77	64	9.669
SQS	41.38	64	10.890
PSQ	76.42	64	14.287

Descriptive Statistics

- Generalised Anxiety Disorder (GAD): A mean score of 10.84 and a standard Deviation of 4.883_Were recorded for GAD. This shows that, on average, sample Mild levels of symptoms of generalised anxiety The standard Members reported implies some variation in the participants' replies, pointing to a variety of Deviation Anxiety intensities.
- Steep Quality (SQS); A mean SQS score of 41.38 was obtained, with a standard Deviation of 10.890. This shows that individuals generally reported having a fair Amount of sleep. The standard deviation shows that participant sleep quality Varies, with some reporting average or better than average steep, Perceived Stress-(PSQL) Participants mean PSQ scores were 76.42, with A Standard deviation of 14,287, for perceived stress. This shows that participants' Perceptions of stress were generally moderate. The standard deviation indicates That participants' perceptions of their own stress levels vary, with some reporting Higher or lower levels of stress than the average..

CONCLUSION

The present study investigated the relationships between Generalized Anxiety Disorder (GAD), Fear of Negative Evaluation (FNE), Sleep Quality (SQS), and Perceived Stress (PSQ) in adults. The results of the descriptive statistics and Pearson correlation analyses provide meaningful insights into how these psychological variables are interconnected.

The findings revealed a significant positive correlation between Fear of Negative Evaluation (FNE) and both Generalized Anxiety Disorder (GAD) and Sleep Quality (SQS). This suggests that adults who experience higher levels of fear regarding negative evaluation are more likely to report increased anxiety symptoms and poorer sleep quality.

However, no significant correlations were found between GAD and PSQ, FNE and PSQ, or between SQS and PSQ, indicating that perceived stress may not be directly related to these variables in this particular sample.

Overall, these results underscore the complex and multifaceted nature of the relationships among sleep quality, perceived stress, anxiety symptoms, and fear of negative evaluation in adults. Further research with larger and more diverse samples is recommended to explore these associations more deeply and to better understand the underlying mechanisms.

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Conflict of Interest

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