

Prevalence of Anxiety and Depression Symptoms During Pregnancy Among Women's Residing in Sitamarhi Dist., Bihar

Nirjala Kumari

Research Scholar, Department of Nursing, Shri Venkateshwara University, Gajraula, India

Abstract: This paper presents an overview on prevalence of anxiety and depression symptoms during pregnancy among women's residing in Sitamarhi Dist., Bihar.

Keywords: anxiety, symptoms, pregnancy

1. Introduction

Pregnancy is a time of growth and hope, but it is also a time when woman is very vulnerable. Psychologically healthy woman often finds a pregnancy a means of self-realization. Other women use pregnancy to diminish self-doubts about feminity or to reassure that they can function as women in the most basic sense. Still others view pregnancy negatively; they may fear childbirth or feel inadequate about mothering. At least one in ten mothers in all levels of society, and regardless of socioeconomic conditions experience clinical depression and/or anxiety before and up to a year after childbirth. The trimesters can bring their characteristic challenges and rewards, the nausea, fatigue & emotionality. For many women, the first and third trimesters are difficult.

Approximately 21% of women experience a mood disorder and 30% anxiety disorder at some points in their lives. Although historically it was believed that pregnant women are at lower risk of anxiety and mood disorders, but recent studies don't support this belief. Rather between 10 and 27% of women experience depressive symptoms during pregnancy, including 2-11% who experience major depressive disorder.

The aim of present research was to detect the prevalence of anxiety and depression in pregnant women residing in Sitamarhi dist., Bihar State in order to grasp the attention of health care system by monitoring such psychological issues and to help them to deal with the burden of anxiety and depression. Based on previous findings it could be hypothesized that anxiety and depression phenomenon would be prevalent during pregnancy.

2. Methodology

The present research recruited a sample of on hundred participants. They included pregnant women coming to obstetric clinics for their prenatal checkup in selected hospitals in residing in Sitamarhi dist., Bihar. Sample for control group was taken from non-pregnant women by matching on age, education, and marital-status and monthly income. This was a cross-sectional study and the sampling technique was of convenience sampling. The study was spread over the period of six months. Pilot study was conducted on five participants and informed consent was taken by each participant.

For assessing the anxiety and depression (Hospital Anxiety and Depression scale), was used. This is basically 14-item selfreport valid scale, designed to briefly measure current anxiety & depression symptomatology. Before administering HADS, the participants were asked to fill in a brief demographic form.

3. Results

The results indicate that Thirteen women (10%) were seen during first trimester, twenty-nine (28%) during the second trimester and fifty-eight (62%) during third trimester and also significant difference between the scores of pregnant women on the scale of anxiety (9.22) and on the scale of depression (7.55) as compared to non-pregnant women. Our findings showed that anxiety and depression symptoms are common in pregnant women than among closely matched controls. The results obtained appear to strongly reaffirm earlier findings of various researchers and clinicians working in this area.

4. Conclusions

High prevalence of anxiety and depression symptoms during pregnancy indicate that women in childbearing years could be vulnerable to anxiety and depressive disorder. It is suggested that physicians in all patient care specialties need to be familiar with the prevalence and course of these disorders, particularly during pregnancy & post-partum period. The obstetrician should regularly test for anxiety and depression with simple means from the very first moment of planning for a child and should use the test results for pregnancy mood profile. The profile could assist in determining the risk of postpartum depression & serve as an early alert for postpartum suicide.



References

- [1] Saddock K. Synopsis of Psychiatry. Behavioral Sciences and Clinical Psychiatry.9th edition. Lippincott Williams & Wilkins USA 2003.
- [2] Kessler R, Mc Gonagle K, Zhao S. Lifetime and 12 months' prevalence of DSM-III-R Psychiatric Disorders in the United States: Results from the National Co morbidity survey. ArchiGen Psychiatry 1994;51:8-19 (Abstract)
- [3] O'Hara MW, Zekoski EM, Philipps LH. Controlled prospective study of postpartum mood disorders: comparison of childbearing women. J Abnormal Psych 1990;99:3-15.
- [4] Kelly RH, Russo J, Katon W. Somatic complaints among pregnant women cared for in obstetrics: normal pregnancy or depressive and anxiety symptom amplification revisited. Gen Hosp Psychiatry 2001;23(3):107-13.
- [5] Teixeria JM, Fisk NM, Glover V. Association between maternal anxiety in pregnancy and increased uterine artery resistance index: cohort based study. BMJ 1999;318(7193):1288-9.

- [6] Sjostrom K, Valentin L, Thelin T, Marsal K. Maternal anxiety in late pregnancy and fetal heodynamics. Eur J Obstet Gynecol Reprod Biol 1997;74(2):149-55.
- [7] Zigmond AS, Snaith RP. The Hospital Anxiety & Depression Scale. Acta Psychiatr Scand 1983;67:361-70.
- [8] American Psychiatric Association. Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition. Washington, DC: American Psychiatric Association 1994.
- [9] Megan V, Robert A, Mary A. Screening for and detection of Depression, Panic Disorder & PTSD in public sector Obstetric clinics. Psychiatric Service 2004;55:407-14.
- [10] Klein MH, Essex MJ. Pregnant or Depressed? The effect of overlap between symptoms of depression & somatic complaints of pregnancy on rates of major depression in the second trimester. Depression 1995;2:308-14.
- [11] Marcus S, Flynn H, Blow F. Depressive symptoms among pregnant women screened in obstetric settings. J Women Health 2003;12:373-80.
- [12] Heron J, Thomas G, O' Conner. The course of anxiety and depression through pregnancy and postpartum in a community sample. J Affective Disorders 2004;80:65-73.