



A study to assess the level of depression among postnatal mothers

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Abstract

Postpartum depression (PPD), also called postnatal depression, is a form of clinical depression which can affect women, and less frequently men, after childbirth. For most the symptoms are mild and short-lived; however, 10 to 15% of women develop more significant symptoms of depression or anxiety. The objective of the study is to assess the level of depression in postnatal mothers. A quantitative study was chosen to assess the level of post natal depression among the post natal mothers. 50 samples were selected who come under the inclusion criteria by purposive random technique. Data was collected using demographic variables which include Age, type of family, religion, occupation, education, obstetrical score and family history etc. The level of depression among postnatal mothers was assessed through Edinburgh postnatal depression scale. The study results revealed that majority of the mothers had mild depression 32 (64%) 14 (28) are moderate depression, 4 (8%) severe depression among postnatal mothers. The result shows that the mean value for level of depression among postnatal mothers was SD= 17.90 with mean difference of 21.82. The study suggests that Professional counselling will be very beneficial if the mother is depressed.

Keywords: postpartum depression, puerperium, Edinburgh postnatal depression scale (EPDS)

Introduction

Postnatal depression is the most frequent psychiatric disorder seen after childbirth, with a prevalence rate of 10% to 15%. The women at risk need to be identified by a valid and reliable method, either using a screening instrument or an interview schedule. Postnatal depression rates have increased significantly over the past 50 years, up from 8% in the 1950s to 27% today (and with a further 25% also feeling that they've possibly suffered). Why is this? There's more support available than in decades past, and more people are accessing it. The study can't give us specific causes, but it's noticeable that fewer of us have enough contact with our families these days, and that more of us are working than previously.

Modern day stresses, along with less day to day practical support through the tough times, seems to be resulting in an ever advancing epidemic. Postpartum depression may lead mothers to be inconsistent with childcare. Women diagnosed with postpartum depression often focus more on the negative events of childcare, resulting in poor coping strategies. There are four groups of coping methods, each divided into a different style of coping subgroups. Avoidance coping is one of the most common strategies used. It consists of denial and behavioral disengagement subgroups (for example, an avoidant mother might not respond to her baby crying). This strategy however, does not resolve any problems and ends up negatively impacting the mother's mood, similarly of the other coping strategies used.

Early identification and intervention improves long term prognoses for most women. Some success with preemptive treatment has been found as well. A major part of prevention is being informed about the risk factors, and the medical community can play a key role in identifying and treating postpartum depression. Women should be screened by their physician to determine their risk for acquiring

postpartum depression. Currently, Alberta is the only province in Canada with universal PPD screening which has been in place since 2003. The PPD screening is carried out by Public Health nurses in conjunction with the baby's immunization schedule. Also, proper exercise and nutrition appears to play a role in preventing postpartum, and general, depression.

Postnatal depression is an important public health problem worldwide. Recent evidence suggests that rates may be relatively higher in developing countries. Thirty six percent women scored ≥ 12 on EPDS. High depression score was associated with lower social support, increased stressful life events in the preceding year and higher levels of psychological distress in the antenatal period. There have been a number of studies that look at the effectiveness of treatment of postnatal depression. One of the most recent publications provides a meta-analysis of the factors which influence the outcome in the condition. The author concluded that the only strategy that was shown to have —a clear preventative effect was intensive post-partum support from the healthcare professionals involved in the case. Curiously, this was found to be more effective than similar regimes which included an ante-natal component as well. One of the most significant is the fact that one episode of postnatal depression is the greatest predictor (or risk factor) for another episode after subsequent pregnancies.

The children are likely to have difficulties because of possible problems with bonding and the mother's possible negative perceptions of the behavior of the children. The morbidity associated with postnatal depression has a number of potential consequences not only for the mother, but also the child and the rest of the family as well. Some studies have shown that mothers with postnatal depression have derived beneficial help from social support during pregnancy. It would therefore appear that the key issues in this area are identification of the predictive factors that

make postnatal depression more likely and then the provision of prompt supportive measures if those factors are established. The objectives of the study are to assess the level of depression in postnatal mothers.

Method and Materials

A quantitative research design was chosen to assess the level of depression in postnatal mothers in Saveetha Medical College and Hospital. 50 samples were selected who come under inclusion criteria by using purposive random technique. The inclusion criteria of the study are the Mothers available at the time of data collection, Mothers willing to participate in the Study II and Mothers who are having psychotic symptoms were excluded from the study. Informed consent was obtained and data was collected. Data was collected using demographic variables which include Age, type of family, religion, occupation, education, obstetrical score and family history etc. The level of depression among postnatal mothers was assessed through Edinburgh postnatal depression scale. Informed consent was obtained and data was collected. The data were analyzed by inferential statistics.

Result and Discussion

The study characteristics reveal that 35% belong to age group of 18-32 yrs, 52% have completed secondary schooling, 58% were housewives, 50% live in a joint family, 58% belong to Hindu religion, 58% delivered by normal vaginal delivery and 34 % had two children.

Table 2: Frequency and percentage distribution of the level of depression among postnatal mothers

Level of knowledge	Frequency	Percentage
Mild depression	32	64%
Moderate depression	14	28%
Severe depression	4	8%

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The present study is supported by Gawass M., Al-Maghur L, Gantri R., Ragab H. had done prospective study on 100 postnatal women to identify the prevalence of postnatal depression using Edinburgh Postnatal Depression Scale & study results showed that 42% patients were not depressed, 15% had borderline depression & 44% patients suffered from postpartum depression. So, in this study out of 100 subjects, majority women suffered from depression.

The present study is also supported by Tukaram B. Zagade, Prasanna Deshpande did a research design to assess the level of depression in postnatal mothers with considering age & used EPDS. They observed that distributions of depression among postnatal mothers are more observed in age group of 21-25 years. i.e. 63%. Similarly we also found that postnatal depression was more in age group of 20-25 years.

Conclusion

The study suggests that Professional counselling will be very beneficial if the mother is depressed. Antenatal education programme needs to be implemented on large

scale. Also the screening should be performed earlier after birth to identify more mothers at risk of developing postnatal depression.

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