

ORIGINAL RESEARCH

Evaluation of Post-Natal Depression: A District Hospital Based Study in Rajasthan

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ABSTRACT

Background: The present study was conducted for evaluating Post-Natal Depression.

Materials & Methods: A total of 100 subjects were enrolled. Out of the total, 70 belonging to the first group of women in the immediate postnatal period, and 30 at 6-8 weeks post-delivery. Edinburgh Postnatal Depression Scale (EPDS) was taken under consideration. Mean EPDS scores were taken. Data was analyzed using SPSS software.

Results: Mean score for women in the immediate postnatal period was 11.20 and that for those at 6-8 weeks post-delivery was 11.73. There was no difference between these two means. 41.5% among women within one week of delivery and 43.4% among women within 6-8 weeks of delivery screened positive for postnatal depression.

Conclusion: It can be concluded that there was high prevalence of postnatal depression in women. However; further studies are recommended.

Keywords: Mental Health, Post-Natal Depression, Relationships.

INTRODUCTION

After childbirth, a mother can experience varied emotions ranging from joy and pleasure to sadness and crying bouts. These feelings of sadness and tearfulness are called "baby blues," and they tend to decrease over the first 2 weeks after delivery. Around one in seven women can develop postpartum depression (PPD).¹⁻³

Postnatal depression, also known as postpartum depression is defined as depression with onset usually within 6 weeks of delivery.¹ Symptoms are found to occur anytime from immediately after delivery to up to a year post delivery.² Postnatal depression has been linked to lesser quality mother-child interactions, insensitive engagement of mothers with infants and even negative feelings towards the baby.^{2,3} This has been found to have several immediate and long term adverse effects on children. Children of depressed mothers tend to have less effective sharing and less initial sociability with strangers, more behavioral problems, more instances of malnutrition, as well as significantly affected cognitive and emotional development in the long run.⁴⁻⁶ Poor marital and familial relationships, and adverse effects on the mental health of partners are also some of the known consequences of postnatal depression.⁷ Hence; the present study was conducted for evaluating Post-Natal Depression.

MATERIALS & METHODS

A total of 100 subjects were enrolled. The study population consisted of two groups of subjects: the first group included women admitted in the post-natal ward immediately after delivery; and the second group for immunization of their infants at 6-8 weeks post-delivery. Out of the total, 70 belonging to the first group of women in the immediate postnatal period, and 30 at 6-8 weeks post-delivery. Edinburgh Postnatal Depression Scale (EPDS) was taken under consideration. Mean EPDS scores were taken. Data was analyzed using SPSS software.

RESULTS

Mean score for women in the immediate postnatal period was 11.20 and that for those at 6-8 weeks post-delivery was 11.73. There was no difference between these two means. 41.5% among women within one week of delivery and 43.4% among women within 6-8 weeks of delivery screened positive for postnatal depression. There was no significant difference in the proportion of women who screened positive for postnatal depression at less than one week and at 6-8 weeks post-delivery. Postnatal depression was found to be significantly associated with mood swings during pregnancy ($P=0.02$). Women who did not live with their husbands around the period of delivery (that is, they resided with their family of birth) were found to be more likely to have postnatal depression ($P=0.010$). Women who had postnatal depression were found to be more likely to perceive their life as stressful ($P=0.011$).

Table 1: Postnatal depression and Mean EPDS scores among the 2 groups of women

Time since delivery	N	Screen positive by EPDS		Mean EPDS score	p- value
		Yes	No (%)		
<1 week	70	29 (41.5%)	41 (58.6%)	11.20	0.3
6-8 weeks	30	13 (43.4%)	17 (56.7%)	11.73	0.8
Total	100	42 (42%)	58 (58%)	11.41	

Table 2: Associations of postnatal depression

	Screen positive by EPDS		p- value
	Yes	No (%)	
Moods swings during antenatal period			
Yes	14 (70%)	6 (30%)	0.02
No	30 (37.5%)	50 (62.5%)	
Residence at time of delivery			
Birth with family	12 (60%)	8 (40%)	0.01
With husband	32 (40%)	48 (60%)	
Perception of one's life as stressful			
Yes	15 (75%)	5 (25%)	0.01
No	32 (40%)	48 (60%)	

DISCUSSION

Postpartum blues have been reported to occur in 15–85% of women within the first 10 days after giving birth, with a peak incidence at the fifth day. Common symptoms include mood swings, mild elation, irritability, tearfulness, fatigue, and confusion. Antenatal depression, previous depression not related to pregnancy, and previous premenstrual dysphoria have been identified as risk factors. No clear biologic measure has been identified to be causative or predictive of postpartum blues. Although postpartum blues is a common and transient postpartum occurrence and generally does not require intervention, its recognition is

important because postpartum blues is a risk factor for subsequent PPD.⁷⁻¹⁰ Hence; the present study was conducted for evaluating Post-Natal Depression.

Mean score for women in the immediate postnatal period was 11.20 and that for those at 6-8 weeks post-delivery was 11.73. There was no difference between these two means. 41.5% among women within one week of delivery and 43.4% among women within 6-8 weeks of delivery screened positive for postnatal depression. There was no significant difference in the proportion of women who screened positive for postnatal depression at less than one week and at 6-8 weeks post-delivery. Anokye R et al determined the prevalence of postpartum depression and interventions utilized for its management. Simple random sampling technique was used to select 257 mothers, while a convenience sampling technique was used to select 56 health workers for the study. Postpartum depression was prevalent among 7% of all mothers selected. The severity ranged from minimal depression to severe depression. Psychosocial support proved to be the most effective intervention ($p=0.001$) that has been used by the healthcare workers to reduce depressive symptoms. Postpartum depression is prevalent among mothers although at a lower rate and psychosocial support has been the most effective intervention in its management.¹⁰

In the present study, postnatal depression was found to be significantly associated with mood swings during pregnancy ($P=0.02$). Women who did not live with their husbands around the period of delivery (that is, they resided with their family of birth) were found to be more likely to have postnatal depression ($P=0.010$). Women who had postnatal depression were found to be more likely to perceive their life as stressful ($P=0.011$). Upadhyay, R. P et al estimated of the burden of postpartum depression in Indian mothers and investigate some risk factors for the condition. They searched PubMed®, Google Scholar and Embase® databases for articles published from year 2000 up to 31 March 2016 on the prevalence of postpartum depression in Indian mothers. Thirty-eight studies involving 20 043 women were analysed. Studies had a high degree of heterogeneity ($I^2=96.8\%$) and there was evidence of publication bias (Egger bias = 2.58; 95% confidence interval, CI: 0.83–4.33). The overall pooled estimate of the prevalence of postpartum depression was 22% (95% CI: 19–25). The pooled prevalence was 19% (95% CI: 17–22) when excluding 8 studies reporting postpartum depression within 2 weeks of delivery. Small, but non-significant differences in pooled prevalence were found by mother's age, geographical location and study setting. Reported risk factors for postpartum depression included financial difficulties, presence of domestic violence, past history of psychiatric illness in mother, marital conflict, lack of support from husband and birth of a female baby. The review showed a high prevalence of postpartum depression in Indian mothers.¹¹

CONCLUSION

There was high prevalence of postnatal depression in women. However; further studies are recommended.

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