



## DEPRESSION IN ANTENATAL

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**ABSTRACT**

**BACKGROUND:** Women who experience antenatal depression often continue to have depressive symptoms in the post-partum period. A study shows that more than 54% of those with post-partum depression report having depressive episodes during pregnancy

**METHOD:** All pregnant women in the study area in their II or III trimester who were attending the antenatal clinic at the health subcentre were enlisted in the study after obtaining informed consent.

**RESULT:** According to EPDS score, 74 had antenatal depression. So the prevalence of antenatal depression in our study is 14.80%. The mean EPDS score was  $8.62 \pm 4.07$  with a minimum score of 0 and maximum score of 21.

**CONCLUSION:** The present study conducted in a rural area. Of the 500 antenatal mothers examined 14.80% were positive for antenatal depression. Presence of marital conflicts and a perceived lack of social support were significantly associated with antenatal depression

**KEYWORDS :** Prevalence, Depression, Antenatal

**INTRODUCTION**

Pregnancy and depression affect each other. In the background of chronic life stressors, women may have difficulty in coping with the additional demands of pregnancy. Many women, particularly those living in poverty or having dependent children, may have a negative view of pregnancy. Memories of poor parenting or abuse, the women have suffered may resurface and cause distress. Domestic conflicts also lead to emotional problems. Maternal mental state in pregnancy may have significant impact on the mental and behavioural of the off springs.<sup>1</sup>

Depression, when it occurs in pregnancy is called Antenatal Depression. The prevalence of prenatal depression is estimated to be 10–15% in developed countries and 19–25% in low income countries.<sup>2</sup>

Women who experience antenatal depression often continue to have depressive symptoms in the post-partum period. A study shows that more than 54% of those with post-partum depression report having depressive episodes during pregnancy.<sup>3</sup>

**Materials And Methods**

**Study Design:** Cross sectional study

**Study population:** Pregnant women attending the antenatal clinic

**Inclusion criteria:** Pregnant Women in their third trimester of pregnancy attending the antenatal clinic

**Exclusion Criteria:** Pregnant Women with serious medical conditions and who are in labour were excluded

**Method Of Data Collection:**

All pregnant women in the study area in their II or III trimester who were attending the antenatal clinic at the health subcentre were enlisted in the study after obtaining informed consent. After establishing rapport, Socio demographic details, obstetric data and details of risk factors was collected from them with a structured and validated questionnaire administered in the local language. Presence of antenatal depression was assessed using the translated version of EPDS (The Edinburg Postnatal Depression Scale). A score of 13 or above was considered abnormal and was indicative of

Antenatal Depression.

**Results**

**Table 1. Socio-demographic Variable**

Mean age	25.36±2.10 Yrs
Primi : Multi para	380 : 120
Hindu : Muslim	420 : 80

500 pregnant women were involved in the study, Among these partakers, the majority were reside in the age group of 25-29 years.

**Table 2. Prevalence Of Ante Partum Depression**

EPDS	No of patients
Depression > 13	74 (14.80%)
No depression < 13	426 (85.20%)

According to EPDS score, 74 had antenatal depression. So the prevalence of antenatal depression in our study is 14.80%. The mean EPDS score was  $8.62 \pm 4.07$  with a minimum score of 0 and maximum score of 21.

**DISCUSSION**

According to EPDS score, 74 had antenatal depression. So the prevalence of antenatal depression in our study is 14.80%. The mean EPDS score was  $8.62 \pm 4.07$  with a minimum score of 0 and maximum score of 21. This is comparable to the result of a study done by Amar D Bavle et al in a tertiary hospital where 12.3% of the population had antenatal depression.<sup>4</sup> In a community based study done in coastal south India, the prevalence of antenatal depression was 16.3%. Also a study done among pregnant women in Urban area of Delhi, the prevalence of antenatal depression was 17%.<sup>5</sup> The prevalence of antenatal depression was 18% in rural Bangladesh in a study done by E. Nasreen et al<sup>6</sup>. The prevalence of antenatal depression in our study is lower compared to other studies done in India because of the better health care system in Tamilnadu and various welfare measures taken by the Government of Tamilnadu such as the Dr.Muthulakshmi Reddy Maternity benefit Scheme which provides financial assistance to pregnant mothers. Also the successful implementation of various national programs for reproductive and child health in the state. In contrast a study done by Biratu et al in Ethiopia found a prevalence 24.94% of antenatal depression. This may be due to the lower socio economic status of the study population and due to the inadequate primary care facilities in Ethiopia.<sup>7</sup>

**CONCLUSION:**

The present study conducted in a rural area. Of the 500 antenatal mothers examined 14.80% were positive for antenatal depression. Presence of marital conflicts and a perceived lack of social support were significantly associated with antenatal depression.

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