



## A survey of postpartum psychiatric illness in eastern part of uttar pardesh India

### KEYWORDS

postpartum blues, psychosis, schizophrenia

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### ABSTRACT

Postpartum psychiatric disorder is very sad experience for mother, family and society. Its wide range of presentation in patient from postpartum blues to schizophrenia making this disease of so much concern. Its overall incidence is 15-20%. Pregnancy related anxiety, sudden withdrawal of hormones, past history of psychiatric illness, marital conflict, unexpected complication during pregnancy all are risk factors for postpartum depression. In our cross-sectional study we have taken history of 200 patients. Out of 200 patients 35 patients were having symptoms of postpartum blues, 13 patients having symptoms of postpartum depression and 2 cases of schizophrenia. Postpartum psychosis is public health problem as it affects not only patients but also child, partner and other family members. Schizophrenic mother may kill her own child or self harm by suicide. Considering its effect on health and society, risk assessment and timely intervention should be considered.

### INTRODUCTION

Postpartum psychiatric illness is more common within first 3 months of delivery. It is differentiated into postpartum blues, postpartum depression and postpartum psychosis depending on symptoms and duration of illness. It is due to antenatal risk factors, withdrawal of hormone estrogen and progesterone and other emotional causes. It is covered under mood disorder in mental health classification. During pregnancy and after delivery patients undergo different phases of emotional changes, such as anticipation, excitement, happiness, anxiety, frustration, confusion, or guilt. This problem is largely under-diagnosed and undertreated. This disease if not treated, it can affect mother-child bond and relationship, so effort should be made for early identification of mental illness and intervention for prevention.

### MATERIALS AND METHODS

This study was a cross-sectional type study done in obs & gynae department of IMS, BHU over the period of 3 months. Total 200 postpartum patients were selected for study and out-off these 50 patients having symptoms of psychiatric illness. Detailed history was taken regarding age, parity, antenatal complication, family history, fetal complications, marital history, hospitalization and duration of development of symptoms. Consent taken after counselling of patients and attendants, proforma with above headings made and findings noted.

### OBSERVATIONS

200 patients was covered under study. 50 cases were positive with symptoms.

Table 1- Different psychiatric illness

	Number(N=50)	Percentages(%)
Postpartum Blues	35	70
Post partum Depression	13	26
Post partum psychosis	2	4

Maximum no of patients having symptoms of blues(70%), Depression (26%) and psychosis (4%)

Table 2- Correlation of age with postpartum illness

Age of patients in years	Number(N=50)	Percentage(%)
<25 years	36	72%
≥25 years	14	28%

Patients (<25 years) are mostly of reproductive age in india ,So more chances of psychosis.

Table 3- Correlation of risk factors

Conditions	Number(N=50)	Percentages (%)
Unmarried mother	1	2
Antenatal complications	20	40
Fetal complications	8	16
Family history	5	10
Others	16	32

Table shows association of these risk factors with psychosis. Antenatal medical complications like hypertension, haemorrhage, cardiac disease all leading to admission and mental trauma to patient so more chances of psychiatric illness

### DISCUSSION

Our study shows incidence of postpartum blues(70%), postpartum depression(26%) and postpartum psychosis(4%), in one study incidence of postpartum blues is 50-75%<sup>(1)</sup>, postpartum depression 10-13%<sup>(2)</sup> and of postpartum psychosis is 0.14-0.26%, increased incidence of depression and psychosis may be due to tertiary referral centre.

Primigravida patients are 72% in all psychiatric patients in this study. Similar result was seen in this study by Gautam S. <sup>(2)</sup>. Postpartum psychiatric syndromes are seen more commonly (81%) in patients below 25 years of age. The majority of the Indian women conceive during this part of the childbearing age as the age at marriage is comparatively lower.<sup>(3)</sup>

There is a considerable decrease in the levels of progesterone after the first and second stages of labor, and estrogen levels drop suddenly following the expulsion of the estrogen-secreting placenta.

Pregnancy and delivery give so much stress to a patient as she has to adjust with her body shape ,her relation with husband, responsibility of child and family.<sup>(5)</sup>

Table 3 of our studies shows correlation of these risk factors with psychosis. Similar result seen by Causey. Risk factors for psychiatric symptoms are primigravida,unmarried mother, antenatal complications, fetal complications and past history of psychiatric problem, family history of psychosis.<sup>(6)</sup>

### CONCLUSION

Incidence of postpartum psychiatric disorder is very high. These disorders are being more common due to day by day stress , frustration and exposure to other risk factors. This preventable disease should be timely screened,diagnosed and treated so that a global problem can be prevented at earlier stage.

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