



ORIGINAL RESEARCH ARTICLE

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ASSESS THE RISK FACTORS AND LEVEL OF POSTPARTUM DEPRESSION AMONG POSTNATAL MOTHERS WITH GESTATIONAL DIABETES MELLITUS IN SELECTED URBAN HEALTH CENTRE AT CHENNAI

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ABSTRACT

Aim of the study: To Assess the level of depression among postnatal mothers with gestational diabetes mellitus.

Background: 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. While the prevalence of GDM is increasing regardless of how it is defined, point estimates depend greatly on the population studied as well as the diagnostic criteria employed to identify GDM.

Design: Quantitative design.

Methods: The research approach used for this study was quantitative approach and descriptive research design. The study was conducted for a period of 4 weeks. The total study sample is 60 postnatal mothers were selected by purposive sampling technique. The demographic and associated risk factors of postpartum depression data was collected by structured interview questionnaires and edinburgh depression scale was used to assess the level of depression.

Result: There was a statistically significant association between the age, occupation, type of family with the level of depression among mothers with gestational diabetes mellitus at $P < 0.05$, $P < 0.01$ level respectively.

Conclusion: Several measures have been created to detect depressive symptomatology in women who have recently given birth; the development of a postpartum depression screening program requires careful consideration further research studies.

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INTRODUCTION

Depression is a major public health problem that is twice as common in women as men during the childbearing years. Postpartum depression is defined within this report as an episode of non-psychotic depression according to standardized diagnostic criteria with onset within 1 year of childbirth.

Gestational diabetes also known as gestational diabetes mellitus (GDM), is when a woman without diabetes, develops high blood sugar levels during pregnancy. Gestational diabetes generally results in few symptoms; however, it does increase the risk of pre-eclampsia, depression, and requiring a Caesarean section. Babies born to mothers with poorly treated gestational diabetes are at increased risk of

being too large, having low blood sugar after birth, and jaundice. If untreated, it can also result in a stillbirth. Long term, children are at higher risk of being overweight and developing type 2 diabetes. 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 behavioural 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 pre emotive treatment has been found as well.

Aim of the study: To Assess the level of depression among postnatal mothers with gestational diabetes mellitus.

MATERIALS AND METHODS

The study was conducted in various maternal health centres at Poonamalle Taluk, Thiruvallur district. The research approach used for this study was quantitative approach and descriptive research design. The study was conducted for a period of 4 weeks. The prior permission was obtained from the medical officer in selected maternal health centres. Informed concern was obtained by the investigator from the study participants and explained the purpose of the study to ensure better cooperation. The total study sample is 60 postnatal mothers were selected by purposive sampling technique. The demographic and associated risk factors of postpartum depression data was collected by structured interview questionnaires and Edinburgh depression scale was used to assess the level of depression. Data were analysed by using descriptive and inferential statistics.

Ethical consideration: The project has been approved by the ethics committee of the institution. Informed consent was obtained from the participants before initiating the study.

RESULTS

Section-1: The demographic variable shows than out of 60 postnatal mothers who had gestational diabetes mellitus 35(58%) were in the age group of above 30 years and majority of them are Hindu 40(66.66%), 16(53.33%) were graduates, most of the people from joint family 26(43%), 21(35%) mothers are primi gravida and regarding mode of delivery 42(70%) mothers had LSCS 18(30%) mothers had normal delivery.

Section 2: The fig 1 shows that Out of 60 gestational diabetic postnatal mother 12(20%) had severe depression 25(41.6%) had moderate level of depression 23(38%) mothers had mild level of depression.

Section 3: In this Regarding associated risk factors of postpartum depression out of 60 postnatal mothers who had gestational diabetes mellitus 2(3%) had anxiety, 6(10%) had stress, 8(13%) had poor social support, 5(8%) had previous depression, 10(16.66%) had child care stress, 2(3%) mothers had low self-esteem. None of them had maternal neuroticism,

7(11.66%) mothers had pregnancy complication, 1(1.66%) had single marital status, 4(6.66%) had poor relationship with partners and 15(25%) lower socio economic status.

N=30

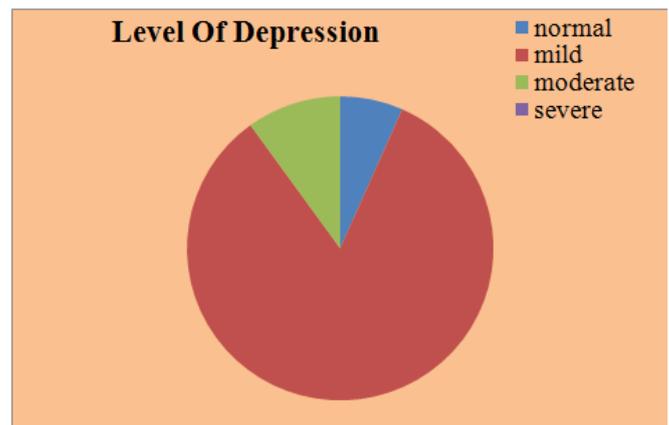


Figure 1. Frequency and percentage distribution of level of depression

Section 4: There was a stastical significant association between the age, occupation, type of family with the level of depression among mothers with gestational diabetes mellitus at $P < 0.05$, $P < 0.01$ level respectively.

DISCUSSION

The object of the study was to assess the level of depression among postnatal mothers

Gestational diabetes also known as gestational diabetes mellitus (GDM), is when a woman without diabetes, develops high blood levels during pregnancy. Gestational diabetes generally results in few symptoms; however, it does increase the risk of pre-eclampsia, depression, and requiring a Caesarean section. Babies born to mothers with poorly treated gestational diabetes are at increased risk of being too large, having low blood sugar after birth, and jaundice. While the prevalence of GDM is increasing regardless of how it is defined, point estimates depend greatly on the population studied as well as the diagnostic criteria employed to identify GDM. Out of 30 Post natal mothers who had gestational diabetes mellitus, Normal 2 (6.66), Mild 25 (83.33), Moderate 3(10) having moderate level of depression.

The object of the study was to associate the level of depression with their demographic variables among postnatal mothers

Depression is a major public health problem that is twice as common in women as men during the childbearing years. Postpartum depression is defined within this report as an episode of non-psychotic depression according to standardized diagnostic criteria with onset within 1 year of childbirth. 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. Out of 60 gestational diabetic postnatal mother 12(20%) had severe depression 25(41.6%) had moderate level of depression 23(38%) mothers had mild level of depression. There was a stastical significant association between the age, occupation, type of family with the level of depression among

mothers with gestational diabetes mellitus at $P < 0.05$, $P < 0.01$ level respectively.

Conclusion

Out of 30 Post natal mothers who had gestational diabetes mellitus, Normal 2 (6.66), Mild 25(83.33), Moderate 3(10) having moderate level of depression. 15(50%) were in the age group of 20-25 years and Majority of them are Hindu 20(66.66%) , they are graduates 16(53.33%), Most of the people from joint family 18(60%) , for 21(70%) of them this is a first child. 18(60%)child born alive. Majority of them had LSCS delivery.

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