

P-989 - PSYCHOSOCIAL RISK FACTORS FOR POSTPARTUM DEPRESSION: A DESCRIPTIVE SAMPLE OF PREGNANTS

S.Chiappini, L.D'Oria, E.Righino, A.Bruschi, F.Di Nardo, G.Oliva, L.Janiri

¹Institute of Psychiatry, ²Institute of Gynaecology, ³Hygiene Institute, Catholic University of the Sacred Heart, Roma, Italy

Introduction: PostPartum Depression (PPD) is a common problem connected to pregnancy. Related previous data show a prevalence of depressive symptoms between 8% and 51% and a prevalence of Major Depressive Disorder between 10% and 17%.

Objectives: Find a correlation between Psychosocial Risk Factors and the develop of Mood Disorders during pregnancy and post-delivery.

Aims: Develop strategies of prevention and treatment of PPD.

Methods: A population of pregnant has been analyzed proposing an anamnestic questionnaire, the Edinburgh Postnatal Depression Scale (EPDS) and the Hypomania checklist Symptoms (HCL), in two times: between the 35th and the 37th week of pregnancy and 2-3 days after the delivery.

Results: We found that at the first survey were depressed (EPDS score >9) 21 women of 149 (14.1%) and hyperthymic (HCL score >14) 59 women of 149 (39.9%). We noticed that risk factors for depression were a complicated pregnancy ($p=0.004$), a conflicting relationship with the partner ($p=0.009$) and a permanence in Italy < 6 months ($p< 0.001$). An history of illnesses during pregnancy ($p=0.042$) and previous psychological problems ($p=0.049$) were correlated to an hyperthymic state.

At the second survey, data were confirmed: the incidence of depression was 17,4% (12 /69 women) and that of hyperthymia was 44% (30/69 women).

Conclusions: Our data confirm previous evidences about the incidence of PPD and the contribution of risk factors of the pregnancy in its pathogenesis; moreover, high scores at HCL can express an hyperthymic dimension peculiar of pregnancy, rather than a mood disorder, considering HCL as a dimensional assessment.