

PSYCHOLOGICAL PROBLEMS OF POST-PARTUM PERIOD

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The spectrum of periparturient psychiatric illnesses varies from post partum blues to depression and frank psychosis. Psychological stresses, endocrinological changes and pre-existing psychiatric illnesses may play a vital role in their development. A study was conducted at Ghurki Trust Teaching Hospital which is attached to Lahore Medical and Dental College Lahore from January 2014 to December 2016. A total number of 47,769 patients presented to Department of OB/GYN. During this period 12,441 patients were delivered either vaginally or by LSCS, 1,532 patients (12.3%) showed signs of psychiatric disturbance in the post partum period. Of these 1,532 patients, 1,354 patients (88.38%) had maternity blues only, 178 patients (11.6%) had depression while 3 patients (0.19%) had psychosis. The number of caesarean section was 4,199 (33.8%). The ratio of psychiatric illness was a little higher 858 (56%), while patients undergoing vaginal delivery 674 (44%) had psychiatric illness. Most patients of depression and psychosis responded well to appropriate pharmacological intervention. 178 patients had depression. 75 (42.13%) were withdrawn and aloof, while 103 (57.86%) patients were agitated. In collaboration with a psychiatrist the patients who were withdrawn were prescribed SSRI (Selective Serotonin Reuptake Inhibitors). While agitated patients were prescribed Trazadone or Miralapine. Patients with frank psychosis were prescribed Risperidone. No patient received ECT. This showed that the commonly neglected problem of psychiatric disorders in periparturient can easily be managed if diagnosed and treated timely

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