

The relationship between mode of delivery and postpartum depression

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Abstract

Introduction: Postpartum period is the most vulnerable time for the onset of mood disorders including the blues, depression and psychosis. Depression is the most important mood disorder in the postpartum period that can be associated with mother-baby and family conflictual interactions and may lead to irreparable consequences if not addresses well. Regarding different etiologies of postpartum depression, among them mode of delivery, and the existence of numerous controversies about this matter, the present study was conducted to determine the relationship between mode of delivery and postpartum depression in pregnant women attending some selected Health Centers affiliated to Shahid Beheshti University of Medical Sciences in 2005.

Materials & Methods: In this prospective analytical study, 258 pregnant women in their 3rd trimester of pregnancy were evaluated for signs of depression within 8 months and about 50 people were excluded from the study because of depression (Getting more than 12 from Edinburgh Postnatal Depression Scale, EPDS) and those not suffering from depression were included in the study. Subjects who had histories of quitting parents before the age of 15, abortion, infertility, complications during pregnancy, prolonged pregnancy, postpartum complications, chronic diseases, nervous diseases in the family, hospitalization of the mother or the neonate and those with fetal demise were excluded from the study too. During 2 to 6 weeks from delivery, study subjects completed EPDS, marital satisfaction and social support questionnaires, were divided into NVD (73 women) and CS (75 women) groups and were matched for confounding factors before statistical analysis. Data analysis was performed by SPSS software, version 13, and the significance level was considered 0.05.

Results: The mean age of subjects was 22.71±3.15 years. Most of them had high school diplomas and were housewives. The prevalence of postpartum depression was 20.3%. 13.6% of the cases in NVD and 27.6% in CS groups scored more than 12 on EPDS and they were at risk for postpartum depression. There was a significant relationships between mode of delivery and postpartum depression ($p < 0.05$) and a two fold risk for depression was seen in CS group (OR=2).

Conclusion: According to the findings of this study that postpartum depression has been twice as much prevalent in the CS group compared to that of NVD group, it can be concluded that CS should be performed in women who meet the criteria for this procedure. Implementing this strategy can have an effective role in preventing postpartum depression and help reduce expenses from its proper practice.

Key Words: Postpartum depression, Delivery, Normal vaginal delivery, Caesarean section, Marital satisfaction, Social support, PMS.

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