



Integrating Mental Health Screening into Antenatal Care

Kulkarni A*

Department Patient Care, Dr Khanade Hospital, India

***Corresponding author:** Aditi Kulkarni, Department of Patient Care, Dr Khanade Hospital
Founder & Director, Yuvana Wellness, Pune, India, Tel: +91 951 163 5136; Email: aditi@yuvanawellness.com

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Abstract

Pregnancy demands comprehensive care, focusing on mental well-being and physical health. Depression and anxiety are prevalent during pregnancy, potentially impacting the mother and foetus. Early intervention is crucial, as severe prenatal depression can adversely affect foetal neurocognitive development. Additionally, a significant proportion of postpartum depression cases originate in the antenatal period, with stressors intensifying throughout pregnancy. Routine screening offers a sophisticated safety net for both mother and foetus. However, effective implementation requires collaborative efforts among healthcare stakeholders. The Obstetrics and Gynaecological Distress Measurement Scale (OGDMS) is a promising tool for comprehensive early screening for the Indian population. It evaluates distress across psychological, physiological, and environmental domains.

The OGDMS facilitates dialogue between practitioners and patients, driving modifications in treatment protocols. Involving attending doctors and caregivers fosters a more engaged and effective therapeutic journey. While promising, further studies are essential to solidify the OGDMS's impact. Future advancements in screening methods promise even more targeted and timely results, ensuring optimal care for expectant mothers.

Keywords: Prenatal Care; Maternal Mental Health; Obstetric Distress; Mental Health Screening

Abbreviations: OGDMS: Obstetrics and Gynaecological Distress Measurement Scale.

Introduction

Pregnancy care is essential and crucial for every individual. It is a critical period where utmost care needs to be provided to the pregnant female and the foetus. A female has to adapt and manage many physical and psychological modifications. The World Health Organization specifically emphasizes the importance of physical and mental health care in the antenatal and post-natal phases [1]. A detailed understanding of the obstetrics population's problems is essential for providing cohesive care. Pregnancy is the most

vulnerable time for a woman to have mental health issues.

Pregnant women constantly need emotional, physical and social support [2]. The most commonly prevalent mental health issues during pregnancy seem to be depression and anxiety [3]. Due to the presence of several unknown and uncertain factors involved in pregnancy, anxiety and depression seem to be quite common [4]. The most common causal factors are worries, pregnancy-related doubts, labour and postpartum, low confidence, lack of interest, societal pressures, or preexisting mental health conditions [3]. It is important to note that while these conditions have an adverse effect on the individual, they can also impact the foetus. Let us explore the risk factors and the requirement

for early detection further.

Need For Intervention

A study by Reilly [5] found that severe depression during pregnancy hyper activates the Hypothalamic-Pituitary-Adrenaline Axis (HPA Axis), adversely affecting the foetus's neurocognitive development and functioning. It is also found that children exposed to maternal depression gestationally are at a higher risk of developing mood-related disorders as adults [6]. The antenatal period is crucial for maternal and foetal care. One-third of all postpartum depression cases have an onset in the antenatal period [7]. Psychological stressors have the most effect progressively throughout pregnancy, reaching a pinnacle during the third trimester [8]. Thus, it is indicative that protection through intervention is essential, and depression and anxiety during the antenatal period should not be taken lightly.

The standard treatment for depression and anxiety-related issues is psychotherapy, followed by medication as required. An early intervention can help deal with the issues, reducing risks. Providing treatment depends upon when the problem is addressed or detected. Self-report cases or reports by general practitioners might only address a small population, whereas the prevalence of the problem can be quite high. Hence, it seems imperative that an early screening or assessment be used across the population.

Early Assessment

Considering the prevalence of antenatal anxiety and depression and its significant risk to foetal health, early detection and management are essential [9]. The screening aims to detect current symptoms, identify possible risk factors early on and prepare the individual to manage the condition accordingly [5,10]. Several risk factors become detectable through routine screening during the prenatal and antenatal period [11]. Screening can play a predictive role in the management of mental distress. Pre- identification promotes improved efficiency of treatment, thus potentially avoiding problems and promoting a happy and peaceful postpartum period [12].

Early intervention facilitated by early screening is a sophisticated way of providing a safety net to both the mother and the foetus. However, the early assessment can only work if the healthcare system collaborates. Doctors, nursing staff, psychotherapists, patients and their caregivers must collaborate to ensure sufficient support and care is provided to the patient. Screening can provide the healthcare system with vital information regarding the patient's mental health condition so that appropriate measures can be taken. The psychotherapist can plan the therapy intervention and

continue therapy throughout pregnancy to ensure that the patient is supported throughout the duration and that their symptoms can be managed. The attending doctors can modify the medications to facilitate progressive improvement in the symptoms.

When shared with the patient, the screening results help them better understand their condition, thus letting them participate proactively in their treatment process. Similarly, the patient's caregivers can better gauge their situation and provide the best care possible because they are more aware of their condition. While early screening can benefit several facets of the treatment, getting the different treatment stakeholders involved is a challenge. Thus, an optimal screening test that gives everyone the best and crisp results would be beneficial.

The Obstetrics and Gynaecological Distress Measurement Scale (OGDMS)

The OGDMS has been developed to provide a tool that gives combined results to doctors, psychotherapists, patients and caregivers to identify potential mental health problems [13]. The OGDMS is a robust early screening scale that measures patients' distress levels going through gynaecological and obstetric issues. It primarily measures distress through three facets- psychological, physiological and environmental. The scale is a short 20-item inventory with a five-point Likert scale. It has items targeting the three aforementioned domains that help better gauge the patients' condition. It is a comprehensive scale that measures the distress levels of Indian gynaecological and obstetrics patients and can be efficiently used to indicate problems. It has no regional or demographic limitations and thus can be used across the population. This could help attain unified results and assist practitioners in sharing results in a standardised format. Some of the items are as follows:

No	Item
1	My sense of self is somewhere lost currently.
2	I feel disappointed when I look at myself in the mirror.
3	The physical pain from my present health condition scares me constantly
4	I can go from calm to upset easily.
5	I get affected by things that don't seem to influence others.

Table 1: Title Items in OGDMS.

The available literature and scales for screening are standardized and based on the Caucasian population. No

tests are available for Indian populations; thus, OGDMS attempts to potentially fill a major gap.

How Does OGDMS Help

The OGDMS is a screening tool that can be used at the prenatal or antenatal stage of pregnancy. It provides vital information about the patient's mental health condition in a structured and cohesive manner. The scale is not a diagnostic tool in itself but an identifier. It will allow the practitioner and the patient to better view their problem. The results could be a conversation starter and facilitate modifications and improvements in the treatment protocol. The tool is also a means to get the attending doctor and the caregivers more involved in the treatment and therapy routine. The OGDMS can help understand the triggers and issues early to provide targeted care through the healthcare ecosystem. The efficacy of the OGDMS is currently mapped through the changes made in a patient's treatment protocol. When the patient shows a reduction in symptoms and improvement in their current condition, it can be assumed that the OGDMS successfully helped to address their issues. However, there is a need for a longitudinal study in the future with a pre-test and post-test setup that can show statistical and tangible results of OGDMS's impact.

Conclusion

In conclusion, integrating mental health screening into prenatal care is imperative for ensuring the well-being of both expectant mothers and their developing fetuses. The antenatal and post-natal phases represent a critical period where comprehensive care, encompassing physical and mental health, is paramount. Recognizing the prevalence of emotional distress, particularly depression and anxiety, during pregnancy is essential. Studies have demonstrated the far-reaching effects of maternal mental health on fetal development and the long-term well-being of the child. The OGDMS not only provides crucial information for practitioners but also encourages active patient involvement in their treatment process. It serves as a catalyst for dialogue between healthcare providers, patients, and caregivers, leading to more targeted and effective care. While the efficacy of the OGDMS has shown promise in initial assessments, further longitudinal studies are warranted to establish its impact definitively.

Looking at the future, more robust systems need to be developed. The screening methods can be made more targeted to provide better and narrowed-down results. The testing time can be reduced even further so that results can be procured as early as possible. The test is currently being implemented in the antenatal stage. In the future, it could be worth exploring whether early screening could be more

beneficial if used in the prenatal stage and periodically throughout the pregnancy to track symptoms. In essence, integrating mental health screening, particularly through tools like the OGDMS, is a pivotal step towards safeguarding the mental and emotional well-being of expectant mothers, ultimately promoting a healthy and harmonious transition into motherhood. By recognizing and addressing emotional distress early on, we empower individuals to embark on their journey into parenthood with confidence and resilience.

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