

## Bölüm 17

# DOĞUM ARDI BAŞLANGICI DEPRESYONUN TANINMASI VE TEDAVİ YÖNETİMİNDE BİRİNCİ BASAMAK HEKİMLERİNE YÖNELİK ÖNERİLER

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### GİRİŞ

Gebelik, doğum ve doğum sonrası dönem bir kadın için fiziksel, ruhsal ve sosyal açıdan hızlı değişimlerin yaşandığı periyotlardır. Doğumla birlikte ortaya çıkan yeni sorumluluklara ve rollere karşı uyum sorunları, alışılmış yaşam tarzının dışına çıkma, yeterli sosyal desteğin olmaması gibi durumlar bu dönemi daha zorlu hale getirebilmektedir. Bu dönemde ayrıca psikiyatrik hastalıklar da oldukça sık görülebilmekte ya da alevlenebilmektedir. En sık görülen psikiyatrik tablolardan biri doğum ardi başlangıçlı depresyondur (postpartum depresyon-PPD). Yapılan çalışmalarda PPD'nin sıklığı oldukça farklı oranlarda bulunmaktadır. Bunda örneklemin ve metodolojik yöntemlerin farklı olmasının da rolü vardır. Ülkemizde PPD sıklığı %9-51 arasında değişkenlik göstermektedir. PPD'nin nedeni multifaktöryel olup genetik, biyolojik, psikolojik, hormonal, sosyal, çevresel risk faktörleri tanımlanmıştır. PPD'nin anne, bebek, aile hatta tüm toplum için olumsuz sonuçları mevcuttur. Tedavide farmakolojik ve psikoterapi, yoga, meditasyon, egzersiz gibi farmakoloji dışı yöntemler kullanılmaktadır. Son yıllarda PPD'nin taranmasına yönelik çalışmalar hız kazanmıştır. PPD açısından risk altındaki annelerin öngörülmesi ve taranması PPD sıklığını azaltılabilmekte ve erken müdahale sağlanarak tedavi süreci kolaylaşabilmektedir.

Bu kitap bölümünde PPD'nin tanımlanması, sıklığı, risk faktörleri, sonuçları, tedavisi, taraması ve korunma yöntemleri güncel literatürler ışığında değerlendirilmiştir. Ayrıca anne ve bebekle sıklıkla karşılaşan birinci basamak hekimlerine bu sürecin yönetimiyle ilgili önerilerde bulunulmuştur.

### POSTPARTUM DEPRESYON

Ruhsal Bozuklukların Tanısal ve İstatiksel El Kitabı, 5. Baskısı (DSM-5) tanı ölçütlerine göre depresyon tanısı; çökkün duygu durum, etkinliklere karşı ilgide

sıklıkla atlanmaktadır. Böyle durumlarda hastalık kronikleşebilmekte ve annenin işlevselliği olumsuz etkilenebilmektedir. Yeterli anne bakımının ve anne-bebek bağlanmasının sağlanamadığı durumlarda bebekte fiziksel, psikolojik, bilişsel ve davranışsal sorunlar ortaya çıkabilmektedir. PPD tanısını atlamamak için; öncelikle hem doğum öncesi hem de aşılama-bebek izlemi gibi doğum sonrası süreçte anneye yakın temasta olan birinci basamaktaki sağlık çalışanlarının ayrıca kadın doğum uzmanlarının ve pediatristlerin konuyla ilgili eğitimi, duyarlılığı, hastanın yardım arayışını desteklemeleri, hastaları geçerli ve güvenilir tarama araçlarıyla taramaları, gerekirse tedavi/ danışmanlık sağlamaları ve kişileri ruh sağlığı profesyonellerine yönlendirmeleri önemli rol oynamaktadır.

**Anahtar Kelimeler:** Postpartum depresyon, tarama, tedavi

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