



BÖLÜM 53

Gebelik ve Emzirme Döneminde Psikofarmakolojik Yaklaşımlar

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GİRİŞ

Gebelik ve postpartum dönemde ortaya çıkan psikiyatrik rahatsızlıklar güçlü biyolojik ve sosyal değişimleri ihtiva ettiği için dikkatle takip edilmektedir. Gebelik döneminde bazı stres hormonlarının artması fetüsün bedensel ve ruhsal gelişimini olumsuz etkilemekle birlikte annede yaşam kalitesinde bozulma, kişiler arası ilişkilerde bozulma, bebekle ilişkinin etkilenmesi gibi farklı sonuçları ortaya çıkarabilir (1). Dolayısıyla bu gözden geçirmede gebelik ve postpartum dönemdeki psikiyatrik rahatsızlıklar ve sağaltımları klinisyenlere yol göstermesi amacıyla güncel bilgiler çerçevesinde yeniden ele alınmıştır.

GEBELİK DÖNEMİNDE DEPRESYON

Gebelikte en sık görülen psikiyatrik hastalıktır. Yapılan bir meta-analizde gebelik ve postpartum dönemde depresyonun birleştirilmiş prevalansı %11.9 olarak gösterilmiştir (2)

Gebelik depresyonu fetus ve yenidoğanda premature doğum, düşük doğum ağırlığı, intrauterin gelişme geriliği, erken doğum riskini; annede ise gebelik diabeti, preeklampsi, gebelik takibinde ak-sama, madde/alkol kullanımı, yetersiz besin alımı ve kilo alma, riskini arttır (3,4) Erken yaş, ilk ge-

belik, aile içi taciz, ağır ruhsal travmalar, geçmişte şiddet öyküsünün olması (5), düşük eğitim seviyesi, istenmeyen gebelik, sosyal desteğin zayıf olması (6), marital problemler (7), boşanmış veya hiç evlenmemiş olma, geçmişte depresyon öyküsü, küretaj, abortus ya da ölü doğum öyküsü, ailede depresyon öyküsü, çocuk sayısının fazla olması, madde ya da alkol kullanımı, tıbbi ya da obstetrik komplikasyonlar, gebelik öncesi dönemde iki ya da daha fazla kronik hastalık bulunması (8,9) gebelik depreysonu için risk faktörleridir (10).

Gebelik fizyolojisinden kaynaklanabilen yorgunluk, uyku ve iştah değişikliklerigibi bulgular depresyonda da görülebildiğinden hastalığı tanı-mada değersizlik ve karamsarlık düşüncelerini ve anhedoni gibi bilişsel değişiklikleri göz önünde bulundurmakta yarar vardır (11). Tedavide psikoterapi, antidepressanlar ve elektrokonzülzif tedavi (EKT) gibi tedavi seçeneklerinden yararlanılabilir (12).

POSTPARTUM DEPRESYON

Amerikan Psikiyatri Birliği Ruhsal Bozuklukların Tanısal ve İstatistiksel El Kitabının beşinci baskısında (DSM-5) peripartum başlangıçlı bir major depresif epizod hamilelikte ya da doğum sonrası

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