

## **Chapter 2**

### **GYNECOLOGY AND OBSTETRICS PSYCHIATRY**

**Ömer Furkan YILMAZ<sup>1</sup>**

#### **INTRODUCTION**

Gynecology and Obstetrics Psychiatry is a sub-specialty of psychiatry that focuses on the mental health of women throughout pregnancy and postpartum period. This field of study is becoming increasingly important as research has shown that up to 20% of women through some form of mental health issue during pregnancy or postpartum (1).

Common conditions in this field include postpartum depression and anxiety, prenatal depression, bipolar disorder, and psychosis. These conditions can have significant consequences for both of the mother and the child, and early identification and intervention is crucial (2).

Obstetricians and gynecologists play an significant role in identifying and managing these conditions, as they are commonly the first point of contact for pregnant women. They can screen for these conditions using standardized questionnaires and refer to an obstetric psychiatrist or other mental health professional as needed (3).

Treatment options for obstetric psychiatric conditions include psychotherapy, medication, and support groups. Antidepressant medication is commonly used, but it is vital to note that these medications can have potential risks and advantage for both of the mother and the baby, and should be attentively considered (4).

It is critical to note that perinatal mental health is a complex and multifaceted field and it is essential that obstetric and gynecological care providers work in collaboration with mental health professionals to provide the finest care possible for women experiencing mental health issues throughout pregnancy and postpartum (5).

In conclusion, Gynecology and Obstetrics Psychiatry is an important field of study that focuses on the mental health of women while pregnancy and postpartum

<sup>1</sup> MD, Yesilyurt Public Hospital, Gynecology and Obstetrics Clinic, ylmz.omerfurkan@gmail.com ,  
ORCID iD: 0000-0002-6923-4847

## **CONCLUSION: THE IMPORTANCE OF OBSTETRIC PSYCHIATRY IN WOMEN'S HEALTH CARE**

Obstetric psychiatry is a vital field of study that concentrates on the mental well-being of women during pregnancy and postpartum. Research has shown that as much as 20% of women encounter some form of mental health issue during this period, with the most prevalent conditions being postpartum depression, prenatal depression, anxiety, and bipolar disorder (26).

Early identification and intervention is crucial to ensure the finest outcome for both of the mother and the child. Obstetricians and gynecologists play an critical role in identifying and managing these conditions, and a variety of treatment options are available, including psychotherapy, medication, and support groups (26).

It's important to note that perinatal mental health is a complex and multifaceted field and it is essential that obstetric and gynecological care providers work in collaboration with mental health professionals to provide the optimal care possible for women experiencing mental health issues throughout pregnancy and postpartum (5).

The field of Obstetric Psychiatry is also important in addressing the mental health requirements of women, regardless of their life stage, and it is essential to evaluate the potential long-term impacts of psychiatric disorders on the mother's overall well-being and on her future pregnancies (27).

In summary, Obstetric Psychiatry is a significant field of study that concentrates on the mental well-being of women during pregnancy and postpartum. Early identification and intervention are crucial to guarantee the optimal outcome for both of the mother and the child. Obstetricians and gynecologists have an essential role in identifying and treating these conditions, and various treatment options are accessible. It is crucial that healthcare providers collaborate with mental health professionals to provide the optimal care possible for women and to address their mental health requirements in the long-term (27).

## **REFERENCES**

1. Tsakiridis, I., Bousi, V., Dagklis, T. et al. Epidemiology of antenatal depression among women with high-risk pregnancies due to obstetric complications: a scoping review. *Archives of Gynecology and Obstetrics* 300, 849–859 (2019). <https://doi.org/10.1007/s00404-019-05270-1>.
2. Collardeau F, Corbyn B, Abramowitz J, et al. Maternal unwanted and intrusive thoughts of infant-related harm, obsessive-compulsive disorder and depression in the

- perinatal period: study protocol. *BMC Psychiatry*. 2019;19(1):94. Published 2019 Mar 21. doi:10.1186/s12888-019-2067-x.
3. Jin, Y., Bi, Q., Song, G. et al. Psychological coherence, inclusive leadership and implicit absenteeism in obstetrics and gynecology nurses: a multi-site survey. *BMC Psychiatry* 22, 525 (2022). <https://doi.org/10.1186/s12888-022-04137-1>.
  4. Garbarino Abigail AB; Kohn Jaden BS; Coverdale John MD, et al. Current Trends in Psychiatry Education Among Obstetrics & Gynecology Residency Programs: A Cross-sectional Survey of Program Directors. *Obstetrics & Gynecology* 132():p 38S, October 2018. | DOI: 10.1097/01.AOG.0000546607.11541.ce.
  5. Vannuccini S., Lazzeri L., Orlandini C., et al (2018) Mental health, pain symptoms and systemic comorbidities in women with endometriosis: a cross-sectional study, *Journal of Psychosomatic Obstetrics Gynecology*, 39:4, 315-320, DOI: 10.1080/0167482X.2017.1386171.
  6. Yan H, Ding Y, Guo W. Mental Health of Pregnant and Postpartum Women During the Coronavirus Disease 2019 Pandemic: A Systematic Review and Meta-Analysis. *Frontiers in Psychology*. 2020;11:617001. Published 2020 Nov 25. doi:10.3389/fpsyg.2020.617001.
  7. Silva BPD, Matijasevich A, Malta MB, et al. Common mental disorders in pregnancy and postnatal depressive symptoms in the MINA-Brazil study: occurrence and associated factors. *Revista de saude publica*. 2022;56:83. Published 2022 Sep 26. doi:10.11606/s1518-8787.2022056004028.
  8. Mangla K., Hoffman M. C., Trumpff C., et al (2019), Maternal self-harm deaths: an unrecognized and preventable outcome, *American Journal of Obstetrics and Gynecology* 221 (4), 295-303. <https://doi.org/10.1016/j.ajog.2019.02.056>.
  9. Kingston D.E., McDonald S., Austin MP. et al. The Public's views of mental health in pregnant and postpartum women: a population-based study. *BMC Pregnancy Child-birth* 14, 84 (2014). <https://doi.org/10.1186/1471-2393-14-84>.
  10. Bener A., Gerber L. M, Sheikh J. (2012) Prevalence of psychiatric disorders and associated risk factors in women during their postpartum period: a major public health problem and global comparison, *International Journal of Women's Health*, 4:, 191-200, DOI: 10.2147/IJWH.S29380.
  11. Hamidia, A, Kheirkhah, F, Chehrizi, M, et al. Screening of psychiatric disorders in women with high-risk pregnancy: Accuracy of three psychological tools. *Health Science Reports*. 2022; 5:e518. doi:10.1002/hsr2.518.
  12. Cox JL, Chapman G, Murray D, Jones P. Validation of the Edinburgh Postnatal Depression Scale (EPDS) in non-postnatal women. *Journal of affective disorders*. 1996;39(3):185-189. doi:10.1016/0165-0327(96)00008-0.
  13. Kroenke K, Spitzer RL, Williams JB. The PHQ-9: validity of a brief depression severity measure. *Journal of general internal medicine*. 2001;16(9):606-613. doi:10.1046/j.1525-1497.2001.016009606.x.
  14. Hoffman MC, Wisner KL. Psychiatry and Obstetrics: An Imperative for Collaboration. *The American journal of psychiatry*. 2017;174(3):205-207. doi:10.1176/appi.ajp.2016.16111233.
  15. Bharadwaj B, Endumathi R, Parial S, Chandra PS. Management of Psychiatric Disorders during the Perinatal Period. *Indian journal of psychiatry*. 2022;64(Suppl 2):S414-S428. doi:10.4103/indianjpsychiatry.indianjpsychiatry\_12\_22.

16. Molyneaux E, Poston L, Ashurst-Williams S, Howard LM. Obesity and mental disorders during pregnancy and postpartum: a systematic review and meta-analysis. *Obstetrics and gynecology*. 2014;123(4):857-867. doi:10.1097/AOG.000000000000170.
17. Glasheen C., Colpe L., Hoffman V. et al. Prevalence of Serious Psychological Distress and Mental Health Treatment in a National Sample of Pregnant and Postpartum Women. *Maternal and Child Health Journal* 19, 204–216 (2015). <https://doi.org/10.1007/s10995-014-1511-2>.
18. Byatt N, Cox L, Moore Simas TA, et al. How obstetric settings can help address gaps in psychiatric care for pregnant and postpartum women with bipolar disorder. *Archives of women's mental health*. 2018;21(5):543-551. doi:10.1007/s00737-018-0825-2.
19. Rodriguez-Cabezas L, Clark C. Psychiatric Emergencies in Pregnancy and Postpartum. *Clinical obstetrics and gynecology*. 2018;61(3):615-627. doi:10.1097/GRF.0000000000000377.
20. Bhat A, Reed SD, Ünützer J. The Obstetrician-Gynecologist's Role in Detecting, Preventing, and Treating Depression. *Obstetrics and gynecology*. 2017;129(1):157-163. doi:10.1097/AOG.0000000000001809.
21. Nagle-Yang, S., Sachdeva J., Zhao L.X. et al. Trauma-Informed Care for Obstetric and Gynecologic Settings. *Maternal and Child Health Journal* 26, 2362–2369 (2022). <https://doi.org/10.1007/s10995-022-03518-y>.
22. Dathe K, Schaefer C. The Use of Medication in Pregnancy. *Deutsches Arzteblatt international*. 2019;116(46):783-790. doi:10.3238/arztebl.2019.0783.
23. Lynch MM, Squiers LB, Kosa KM, et al. Making Decisions About Medication Use During Pregnancy: Implications for Communication Strategies. *Maternal and child health journal*. 2018;22(1):92-100. doi:10.1007/s10995-017-2358-0.
24. Smith Erin K. MD; Gopalan Priya MD; Glance Jody B. MD; Azzam, Pierre N. MD. Postpartum Depression Screening: A Review for Psychiatrists. *Harvard Review of Psychiatry* 24(3):p 173-187, May/June 2016. | DOI: 10.1097/HRP.000000000000103.
25. Meltzer-Brody S., Maegbaek M., Medland S., et al. (2017). Obstetrical, pregnancy and socio-economic predictors for new-onset severe postpartum psychiatric disorders in primiparous women. *Psychological Medicine*, 47(8), 1427-1441. doi:10.1017/S0033291716003020.
26. Ghahremani T, Magann EF, Phillips A, Ray-Griffith SL, Coker JL, Stowe ZN. Women's Mental Health Services and Pregnancy: A Review. *Obstetrical & gynecological survey*. 2022;77(2):122-129. doi:10.1097/OGX.0000000000000994.
27. Raiff EM, D'Antonio KM, Mai C, Monk C. Mental Health in Obstetric Patients and Providers During the COVID-19. *Clinical obstetrics and gynecology*. 2022;65(1):203-215. doi:10.1097/GRF.0000000000000668.