

## FEATURES OF PSYCHOEMOTIONAL DISORDERS IN PREGNANT WOMEN AND WOMEN IN LABOR AGAINST THE BACKGROUND OF COVID-19 INFECTION

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### **The Purpose of the Study**

to study the nature of psychosomatic disorders in pregnant women against the background of COVID-19 pneumonia.

### **Material and Methods**

The study was based on the results of examination and treatment of 3080 pregnant women and young mothers infected with SARS-CoV-2 during the COVID-19 pandemic in the maternity ward of the Republican Specialized Infectious Diseases Hospital Zangiota-1 from December 2020 to January 01, 2022. The majority of women (48.0%; 1478 out of 3080) were in the age range of 26-30 years, as well as the majority of women (84.0%; 2586 out of 3080) had no history of miscarriages. According to the number of pregnancies in the anamnesis, the most cases were with two (31.0%; 956 out of 3080) and one pregnancy (27.5%; 847 out of 3080) in the anamnesis. Only 5.9% (183 out of 3080) of pregnant women were primiparous. At the time of admission of patients to the hospital, 889 out of 3080 women (28.9%) were in the first trimester of pregnancy (13 weeks of gestation), 1056 women (34.3%) were in the second trimester of pregnancy (13-27 weeks of gestation) and most of all in the third trimester of pregnancy ( $\geq 28$  weeks of gestation) – 1135 women (36.8%). According to international criteria for assessing the severity of COVID-19 infection in pregnant women, the vast majority (64.3%; 1980 out of 3080) cases, a moderate course of pneumonia was diagnosed. The clinical picture of pregnant women with COVID-19 infection was represented by bilateral pneumonia in 48.0% (1478 out of 3080). At the same time, up to 50% of lung lesions according to MSCT had the majority (60.0%; 1848 out of 3080) of patients. The identification and assessment of the severity of psychoemotional disorders were carried out according to the GTR-7 anxiety disorders assessment scale, the IES-6 post-traumatic stress disorder (PTSD) assessment scale, and the PHQ-9 depressive syndrome assessment scale. The combined psychoemotional pathology was detected according to a special combined PHQ-ADS scale, which is the sum of

points from the PHQ-9 and GTR-7 questionnaires (the maximum score is 48, a combination of PTSD, anxiety and depression manifests itself at 20 or more points).

## Results

The prevalence of various psychoemotional disorders against the background of COVID-19 pneumonia among pregnant women and women in labor was 80.1% (2467 out of 3080). The structure of psychoemotional disorders consisted of post-traumatic stress states (54.3%; 1671 out of 3080), anxiety disorders (13.4%; 413 out of 3080) and depressive states (12.4%; 383 out of 3080). Mixed mental disorders were detected in 23.0% (712 out of 3080) cases. In pregnant women in the first trimester of pregnancy against the background of COVID-19 infection, the incidence of various psychoemotional disorders was 71.1% (632 out of 889) with a predominance of PTSD (42.0%; 374 out of 889). The prevalence of psychoemotional disorders against the background of COVID-19 in the second trimester of pregnancy was 100% (1056 out of 1056), while the highest frequency (68.0%; 718 out of 1056) has PTSD and mixed psychological disorders (50.6%; 534 out of 1056). Among women in the third period of pregnancy, the incidence of PTSD was also the highest, amounting to 51.0% (579 out of 1135). Anxiety disorders were diagnosed in 11.1% (126 out of 1135) of cases and depressive states were the least, amounting to 6.5% (74 out of 1135)., women in the first trimester of pregnancy most often (64.2%; 240 out of 374) noted their constant mood and expectation of something bad for the unborn child due to the disease COVID-19 against the background of uncontrolled thoughts about infection. Women in the second trimester of pregnancy associated stress disorders with difficulties concentrating on something, which was also explained by the efforts of women to forget about the disease that happened in the middle term of pregnancy. They noted increased nervous excitability, anxiety and irritability (78.0%); inability to cope with excitement (80.5%); excessive anxiety about various things (62.4%); inability to relax (67.3%); slight yielding to a sense of anxiety or irritability (57.6%). Women in the third trimester of pregnancy most often associated their stress disorders with excessive thoughts about what happened against their will and associations with something from the past; and the anxiety syndrome was characterized by somewhat higher degrees of fear of something terrible (in 82.5% of cases) than in the first (24.4%) and second (75.1%) trimesters. Also, women in the third trimester of pregnancy were more concerned about such items of the PHQ-9 questionnaire as fatigue/loss of strength (86.5%), lack of appetite (70.3%), difficulty concentrating (74.3%) and slowness with inhibition (87.8%). The majority of pregnant women with psychoemotional disorders (51.5%; 1585 out of 3080) were assigned to the cohort of moderate COVID-19.

## **Conclusion**

The influence of pregnancy status on the prevalence of disorders of psychoemotional status in each gestation period is shown. Thus, women with PTSD and combinations of depression with anxiety were significantly more in the second trimester of pregnancy and had a lower frequency among women in the first trimester of pregnancy, which was shown by a private and general structural analysis. The influence of the severity of COVID-19 pneumonia on the frequency of anxiety disorders and combined disorders of psychoemotional status during pregnancy is shown.