

STUDY OF THE PSYCHOEMOTIONAL STATE OF WOMEN WITH INDUCED PREGNANCY AGAINST THE BACKGROUND OF COVID-19 INFECTION

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The Purpose of the Study:

To evaluate and study the features of the psycho-emotional state of women with a complicated course of induced pregnancy by COVID-19 infection.

Material and Methods

11 women with induced pregnancy with COVID-19 and 24 women without COVID-19 were included in the study to assess the level of anxiety/depression during pregnancy. 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 using a special combined PHQ-ADS scale, which is the sum of the scores from the PHQ-9 and GTR-7 questionnaires (the maximum score is 48, the combination of PTSD, anxiety and depression manifests itself at 20 or more points).

Results. During psychodiagnostics during pregnancy, all women with COVID-19 (n=11; 100%) showed a high degree of anxiety/depression with an average score of 32.4 ± 3.4 (from 22 to 42 points). Whereas in the group without COVID-19, the frequency of clinically significant anxiety-depressive state was 66.7% (16 out of 24) with an average PHQ-AES score of 24.7 ± 3.7 (from 15 to 40 points), which was statistically significantly lower ($\chi^2=4.75$; $p=0.03$) than in the group of women with induced pregnancy and COVID-19 infection. Among women with induced pregnancy and COVID-19 pneumonia, in 5 (45.4%) cases after recovery from COVID-19, pregnancy was continued and successfully completed, and in 6 (54.6%) cases, pregnancy was resolved even before the start of treatment for COVID-19 pneumonia due to an extremely severe course. In this group, 1 fatal outcome of mother and child was observed. In the group of induced pregnancy without COVID-19, all cases with a favorable outcome, both for the mother and for the child, i.e. all successfully completed all periods of pregnancy, despite the high level of anxiety and depression. The results of the detection of

PTSD after delivery showed that in the group with COVID-19 infection in all cases (n=11; 100%), PTSD was noted with an average of 3.4 ± 0.3 (from 2.7 to 4.0) on the IES-6 scale. Whereas in the group without COVID-19, the frequency of postpartum was significantly lower ($\chi^2=9.6$; $p=0.002$) and amounted to 37.5% (9 out of 24) with an average of 2.1 ± 0.2 (from 1.2 to 3.7) on the IES-6 scale. Cases of PTSD in this group were associated with aggravating social factors and lack of support from loved ones. PTSD in induced pregnancy against the background of COVID-19 was manifested by tension, internal stiffness, anxiety, nervousness and concern. During pregnancy, due to changes in the hormonal and psycho-emotional background, women with induced pregnancy experience an increase in the level of reactive anxiety. As the symptoms of TRB become more frequent and worsen, there is an increase in anxiety and tension. Symptoms of anxiety during pregnancy can relate to several types of anxiety, such as general anxiety, anxiety disorders and pregnancy-related anxiety, anxiety characterized by specific fears and worries. At the same time, numerous factors related to the causes of infertility, the duration of treatment and psychological stress can affect the functional state of various physiological systems that ensure the adaptation of the body and the development of complications of the gestational process. Consequently, with induced pregnancy, changes in the course of already existing psychological disorders occur. At the same time, the detection of depression in this category of women is difficult, since many symptoms, such as lability of the emotional background, increased fatigue, changes in appetite and decreased cognitive functions are often found in a physiologically normal pregnancy.

Conclusion. Psychoemotional disorders were noted in all women with induced pregnancy and COVID-19 infection, both during gestation and after delivery, it was noted in all, which was associated with aggravating social factors and lack of support from relatives. A comparative analysis of the features of the violation of the psycho-emotional state of pregnant women during induced and physiological pregnancy showed statistically significant differences and a strong influence in addition to COVID-19 infection, a long history and prolonged courses of infertility, repeated failures and complicated previous pregnancies.