

Impact of cognitive-behavioral therapy for early postpartum depression among primiparous women

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Dear Editor,

We would like to share our experiences with Psychiatric Danubina audience that postpartum depression (PPD) an often-encountered issue in the early phase of postpartum. Postpartum is the most crucial period in a woman's life as it affects both her physically and mentally. PPD is a serious mental illness that negatively impacts new mothers during the early postpartum period that typically emerges a few weeks postpartum which may persist for several weeks to a year, often with subtle or overlooked symptoms. Despite experiencing symptoms of depression, nearly half of the affected mothers tend to ignore their condition and refrain from seeking professional support (Zauderer,2009). Psychological illness and postpartum depression cause negative perception of insecurity leading to mental instability causing a critical health issue (Akbar et al., 2024) (Hipwell et al., 2000). Enhancing screening mechanism is essential for early detection and effective treatment of PPD.

Literatures have reinforced that Cognitive Behavioral Therapy (CBT) as an effective intervention for addressing psychological related to postpartum (Alhammedi et al., 2017).

CBT is a psychotherapy that focuses on restructuring dysfunctional thoughts and behaviours that would enhance maternal self-care and efficacy (Beck, 2011) (Milgrom et al.,2005).

We presented here a case diagnosed with Postpartum depression (PPD) and when treated with CBT had a positive significance. The study was approved by the Institutional Ethical committee on human subjects (04/019/2024/ISRB/PGSR/SCPT) and was in accordance with Declaration of Helsinki 1995(revised in Edinburg 2000)

The study was explained and consent was obtained while maintaining subject's anonymity. A 23year-old primiparous woman presented two weeks postpartum with persistent low mood, irritability, crying spells fatigue, sleep disturbance and impaired infant bonding. She presents with no history of mental illness and had not undergone any psychological counselling for the same.

We obtained a detailed history of her mental state and found that she's been encountering both physical and mental issues in her daily life. She was uneducated and worked in a small-scale garment factory. She got married at very young age and

this being her first pregnancy, had undergone hardship during the phase. Her husband was alcoholic and her in-laws were not supportive resulted in emotional burden. She had to work for long hours to meet both the medical and general expense which was a financial burden. Even during her delivery hospitalization her husband was not with her and her in-laws didn't come to see as she delivered a girl baby. She felt neglected and abandoned by her family. Feeling of inadequacy and guilt haunted her. She had fear of leading and taking up this life with her baby that resulted in insomnia, irritable, depressed state with impaired infant bonding.

We assessed her Edinburgh Postnatal Depression Scale (EPDS) and Postpartum Bonding Questionnaire for her level of depression and infant bonding for which she scored 23/30 and 18 respectively being considered as higher scores for depression and impaired bonding. Based on the assessment, intervention plan was focused towards CBT as three sessions per week for eight weeks with each session for 45 minutes.

The sessions started by introducing CBT principles, assessment of the bio-psycho-social and psychological awareness and education on depression and postnatal care that focused on addressing emotional stress and behavioral withdrawals.

The psychoeducation sessions enabled the mother to understand PPD is merely a medical condition and restructure negative thoughts and challenges into positive patterns. Behavioral activation techniques were induced to break the cycle of inactivity and low mood to engage in pleasurable and meaningful activities. Deep breathing exercises, relaxation and mindfulness techniques were imparted to overcome anxiety and physical symptoms of depression. Self-care coping strategies and sleep hygiene education were emphasized and advised as home care advises as to maintain progress and handle future stressors. There was a progressive reduction in the depression and improved infant bonding score to 6/30 and 8 respectively at the end of eight weeks of intervention which was considered as mild stage of depression and good infant bonding.

The sessions emphasized her to understand and overcome the challenges, improved her problem- solving abilities, adapt to healthy coping mechanisms. She gained confidence to lead

a balanced life which significantly improves maternal mental health and family dynamics.

She had demonstrated decreased signs of depression with marked improvement infant bonding which improved the overall mental health and the care towards her baby. By concluding CBT had a very marked significant impact in the management of Postpartum depression during the early phase of motherhood. I believe this work would be helpful in delivering knowledge and the application of CBT as an efficient technique to alleviate mental health problems in future studies.

Sincerely
Nethraa R

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Depression during postmenopausal age: An overlooked challenge

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Dear Editor,

I would like to bring to the attention of the readers of *Psychiatria Danubina* the often-overlooked challenge of depression during postmenopausal age. Post menopause is a critical period in a woman's life, characterized by a significant reduction in hormone levels, particularly estrogen, which can have profound effects on both physical and mental health. Depression during

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this time is a common yet underdiagnosed condition that can severely impact a woman's quality of life.

The hormonal fluctuations during post menopause are closely linked to psychoemotional disturbances, including depression. Research has indicated that postmenopausal women are at a heightened risk for developing depressive symptoms due to these biological changes (Petrova et al., 2021). Additionally, the presence of neurovegetative disorders during post