

History of depression puts women at risk for diabetes during pregnancy, study finds

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A history of depression may put women at risk for developing diabetes during pregnancy, according to research published in the latest issue of the *Journal of Obstetric, Gynecologic & Neonatal Nursing* by researchers from Loyola University Chicago Marcella Niehoff School of Nursing (MNSON). This study also pointed to how common depression is during pregnancy and the need for screening and education.

"Women with a history of depression should be aware of their risk for gestational <u>diabetes</u> during pregnancy and raise the issue with their doctor," said Mary Byrn, PhD, RN, study co-author and assistant professor, MNSON. "Health-care providers also should know and understand the prevalence and symptoms of prenatal depression and gestational diabetes and screen and manage these women appropriately."

Loyola researchers used the Edinburgh Postnatal Depression Screen to measure symptoms of depression in 135 pregnant women attending routine prenatal care visits. Sixty-five study participants had gestational diabetes. These women were 3.79 times more likely to have a history of depression than women without gestational diabetes. In addition, 20 percent of women with gestational diabetes and 13 percent of women without gestational diabetes had significant symptoms of depression. Anxiety and perceived stress were significant predictive factors of depression for both groups.

Each year, more than 200,000 pregnancies are complicated by gestational diabetes. Pregnant women who have gestational diabetes and the added issue of depression are at an even greater risk for possible negative outcomes. Pregnant women who are depressed are more likely to practice unhealthy behaviors such as smoking, alcohol use and missing prenatal doctor visits.

The relationship between diabetes and depression

is complex. Clinicians initially believed that depression in people with diabetes was due to the demands of living with a chronic illness. More contemporary thinking suggests that having depression may precipitate the onset of type 2 diabetes. Therefore, if depression is present prior to pregnancy, it may be important to monitor for the development of gestational diabetes.

"Depression may also contribute to the poor self-management of gestational diabetes and potentially increase the chance for complications during pregnancy," said Sue Penckofer, PhD, RN, study co-author and professor, MNSON. "We must further explore the relationship between diabetes and depression to help understand and improve prenatal care and outcomes for women and infants."

Provided by Loyola University Health System



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