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To lose a child who was never born: PTSD, depression and spousal relationships following late pregnancy loss

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Background: Pregnancy loss (PL) is recognized as a very difficult life experience, particularly when it occurs at the late stages of pregnancy. Often, PL is regarded as a feminine trauma, experienced individually by the woman, thus neglecting the role of the parental dyad in coping with the loss.

Methods: Data were collected at the Hadassah Ein-Kerem Hospital in Jerusalem, Israel. Participants were 100 women, ages 24-49 (M=35.07, SD=5.28), who have experienced late PL. The mean pregnancy week of loss was 27.29, with the average woman being 22 months post-loss. 84.6% experienced stillbirth. Participants completed self-report questionnaires assessing posttraumatic stress disorder (PTSD), MDD, dyadic adjustment and dyadic self-disclosure.

Results: We have found high rates of both PTSD and MDD among women following late PL. The rate of PTSD was 30% and 53% of the sample reported mild depressive symptoms or higher. A positive association was found between the number of former pregnancy losses and the severity of MDD. Also, both PTSD and MDD were negatively associated with the levels of dyadic consensus, dyadic self-disclosure regarding guilt and shame, and dyadic affectional expression.

Conclusion: Late PL entails a heavy burden of PTSD and MDD, presumably since mothers must cope with their shattered expectations regarding motherhood, and since many are already strongly attached to their unborn child. Although PL is rightfully regarded as traumatic for the pregnant woman, it is often experienced by both expecting mother and father. Thus, the quality of the spousal relationship following PL is an important factor, contributing to the woman's ability to cope. Therefore, there is a pressing need for novel interventions in couple's therapy following PL.

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