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**Psychological impact on women who immediately followed early pregnancy failure in the Obstetrics and Gynaecology professorial unit at Teaching Hospital Peradeniya, Sri Lanka**

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**Background:** Early Pregnancy Failure (EPF) seriously affects the psychological status of women and their families. Only a limited number of research studies have been conducted in Sri Lanka.

**Objectives:** To assess the psychological impact among women who had EPF in Obstetrics and Gynaecology Professorial unit, Teaching Hospital Peradeniya, Sri Lanka.

**Methods & Materials:** This study was a descriptive cross-sectional study. Data were collected through a pre-tested, interviewer-administered questionnaire, including 102 participants who had EPF by using a convenient sampling method. Psychological impact was assessed by using General Health Questionnaire-12 (GHQ), 11 Likert-typed questions and two close-ended simple questions. Collected data were analysed using descriptive analysis, Chi-square test and Spearman correlation test. p- value of  $<0.1$  was considered to be statistically significant.

**Results:** Among 102 participants, 55.9% of participants belonged to 30 to 39 years age group. 99.0% of them were married. 52.0% of participants were housewives and 04.9% of participants were self-employed. Around two third of participants (64.7%) had failure with their pregnancy before 12 weeks of gestation and most of them (55.9%) presented with miscarriages. The data illustrated that, psychological impact significantly associate with age of the participant( $p=<0.$ ), religion( $p=<0.1$ ), level of education ( $p=<0.1$ ), occupation( $p=<0.1$ ), satisfaction with monthly income( $p=<0.1$ ), current living status( $p=<0.1$ ), current place of residence( $p=<0.1$ ) and presence of household smokers ( $p=<0.1$ ). Psychological impact was significantly and positively correlated with gestational age( $p=<0.1$ ), participation for counselling program prior to the previous pregnancy losses( $p=<0.1$ ), planned or unplanned status of pregnancy and usage of family planning methods ( $p=<0.1$ ). Also psychological impact was significantly and negatively correlated with the experience of giving birth to a fetus with a gestational age of 28 weeks or more( $p=<0.1$ ), experienced with pregnancies ending up before 28 weeks of gestation( $p=<0.1$ ), correct intake of supplement during antenatal period( $p=<0.1$ ), and use of medication other than antenatal medication ( $p=<0.1$ ).

**Conclusion:** Psychological impact significantly affect EPF. Therefore, counselling programmes should be delivered as part of the care giving process.