

Women, Gender and Mental Health

EW628

Exploratory randomized controlled trial of a group psychological intervention for postnatal depression in British mothers of South Asian origin

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Introduction The rates of postnatal depression (PND) in British South Asian (BSA) women are higher than the general population. PND is known to cause disability and suffering in women and negative consequences for their infants and their family with huge costs to society. Due to linguistic and cultural barriers, BSA women do not access health care services.

Objectives To conduct an exploratory trial to test the feasibility and acceptability of a culturally adapted group Cognitive Behavioural Therapy (CBT) intervention (Positive Health Programme (PHP)).

Aim We aimed to determine if depressed BSA women receiving the PHP intervention will show significant improvements in terms of severity of depression, marital support, and social support as compared to the control group.

Methods We used a two-arm pragmatic single-blind randomised controlled design. Women meeting the inclusion criteria were randomised either to the experimental group receiving PHP or treatment as usual (TAU) that is standard care usually provided by the GP.

Results A total of 615 mothers were screened for participation in the trial, of these 137 were assessed further to determine eligibility. Eighty-three mothers were randomized to receive either PHP ($n = 42$) or treatment as usual (TAU) ($n = 41$). Mothers found the intervention to be acceptable and felt an overall positive change in their attitudes, behaviour and confidence level.

Conclusion The recruitment and retention figures (70%) highlight the ability of the research team to engage with the population. The findings suggest the acceptability of the culturally adapted PHP intervention for British South Asian women with postnatal depression.

Disclosure of interest The authors have not supplied their declaration of competing interest.

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Gender differences in benzodiazepines prescription in old age patients

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Objectives To assess the prescription of benzodiazepines (BZD) in elderly patients, and to explore any gender differences.

Methods Six hundred and fifty-four patients (≥ 65) admitted in an emergency service of a general hospital due to a fall. BZD use information was collected (dose, half-life profile).

Results BZD are significantly more prescribed to women (47.6%) than men (36.1%) ($X^2 = 8.097$, $P = 0.004$). We conducted a logistic regression analysis using as dependent variable taking or not BZD and sex as the independent one, covariating the model by age. We noted that sex remains significant despite enter the age variable in the model ($OR = 1.5$, $P = 0.013$). A total of 21.6% of patients consumed intermediate or long half-life BZDs, appearing a greater tendency to prescribe such BZD to women ($X^2 = 3.606$, $P = 0.058$). In the 58.0% of prescriptions, prescribed dose was higher than the recommended for the elderly. The percentage is significantly higher for men (70.0%) than women (53.1%). Furthermore, a total of 54 prescriptions (15.8%) were even higher than the recommended adult dose, with no significant differences between men and women.

Conclusions We found evidence of a higher prescription of BZD in women independently of age. Despite not being recommended, prescription of intermediate or long half-life BZD continues, in a slightly higher manner in women. BZD are prescribed above the recommended dose for elderly in a large number of patients, especially in men. A considerable proportion of elderly patients (15.8%) consume BZD doses even higher than the recommended for adults.

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Post-partum depression risk factors in pregnant women

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Introduction Postpartum depression has a prevalence of 15% and has consequences for mother and baby (delayed physical, social and cognitive development). It's essential to prevent the illness with an early identification of Risk Factors (RF).

Methods Five hundred and seventy-two women in 3rd trimester of pregnancy were evaluated and selected those with ≥ 1 RF

($n=290$). We re-evaluated in the postpartum with Edinburgh Depression Scale and selected those with subsyndromal depressive symptoms (≥ 7.5) ($n=57$). Clinical, demographic and functional data were collected.

Results A total of 50.7% had RF. A percentage of 48.6 had family history of mental illness (MI), 34.1% had personal history of (MI) and 34.1% had some pregnancy associated illness. Twenty percent had needed some assisted reproductive technique, 14.1% had little family support and 15.2% had little couple support, 3.8% showed anxiety-depressive disorders during pregnancy, 19.7% had depressive symptoms after delivery. The mean age was 33.67. No significant differences between patients with and without RF ($T=1858$, $P=0.064$). Among women with RF, 59.6% were married, 35.1% single and 3.0% had other situation. 89.5% live with their own family, 8.8% with their family of origin, 1.8% alone. 50.8% had university studies.

Conclusions Assessing RF during pregnancy can help these women, since we see that the 19.7% will have serious risk of developing postpartum depression. The RF to take more into account are not those related to social-academic development, neither the presence of anxiety-depressive symptoms during pregnancy, but the family or personal history of (MI) and the presence of a pregnancy associated illness. Early detection and treatment may prevent the development of this disease improving the quality of life of mother and babies' development.

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Others

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Chronic rhinosinusitis and mood disturbance

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Introduction Chronic rhinosinusitis (CRS) is a condition of inflammation of the nose and paranasal sinuses affecting 6.8 million Britons. It has a great impact on quality of life and productivity. CRS is currently subdivided into two main types – with and without nasal polyps (CRSwNPs and CRSsNPs respectively). Allergic fungal rhinosinusitis (AFRS) is severe subtype of CRSwNPs.

Objectives This study is part of the Chronic Rhinosinusitis Epidemiology Study (CRES). The overarching aim is to determine factors influencing onset and severity of CRS.

Aims To determine whether those with CRS are more likely to report mood disturbance compared with healthy controls.

Methods CRES is study-specific questionnaire asking about demographic and socioeconomic factors and past medical history as well as a nasal symptom score (SNOT-22) and SF-36 (QoL – quality of life tool). Questionnaires were distributed to patients with CRS attending ENT outpatient clinics at 30 centres across the United Kingdom from 2007–2013.

Results A total of 1470 participants were recruited (Table 1). Differences between those with CRS and controls were found; those with CRSsNPs reported significantly more consultations with their

GP for depression and anxiety. Patients with CRS also showed significantly poorer mental well-being than controls across the mental health and emotional well-being domains of the QoL tools used. Those with CRSsNPs scored significantly worse than those with nasal polyps across all domains.

Conclusions Mood disturbance is significantly more common in patients with CRS compared to healthy controls, especially in those with CRSsNPs. This added mental health morbidity needs consideration when managing such patients.

Table 1

	Controls	CRSsNP	CRSwNP	AFRS
Participants	221	553	651	45
Females	143 (68.4%)	259 (53.1%)	185 (32.2%)	19 (43.2%)
Mean Age (s.d)	47.3 (14.9)	51.8 (15.3)	56.0 (14.6)	56.1 (12.7)
Range	19-82	18-84	17-102	20-76

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EW634

Impact on personal growth and environment conservation self-perception in a volunteering program with adults with severe mental illness (SMI)

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Introduction “Viaje del Parnaso” is a volunteering project developed at the Day Center Aranjuez2 (CD2) for helping adults with SMI to get a satisfactory and responsible occupation through their implication in a volunteering work in the community, while involved in the maintenance of a green area in the city of Aranjuez. **Objectives/aims** The aim of this study was to evaluate the impact of the project on the volunteers' lives in terms of personal growth and environment conservation and compare its results with non-volunteers also attended at the CD2.

Methods The project was carried once a week during 45 weeks. 11 volunteers participated on the project, plus 5 non-volunteers were considered as quasi-control group. The instruments applied were an item on “environment conservation” and 2 subscale items of “Personal Growth” from the Ryff Scales of psychological well-being. Measures were applied at baseline, 6 and 12 months after.

Results Significant differences were found on the environment conservation item between volunteers at baseline and 6 months after ($P<0.05$). Results also revealed a significant difference ($P<0.05$) between volunteers and non-volunteers at both variables (“environment conservation” and “Personal Growth”) in baseline and 6 months after treatment.

Conclusions The data from this study suggest that a volunteering program seems to be an effective intervention for bringing about improvements in well-being of people with SMI, and also for increasing their environmental awareness. These improvements