

CORRELATES OF POSTPARTUM ANXIETY

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Introduction: Factors associated with postpartum/PPT anxiety have been insufficiently investigated.

Objective: To identify correlates of PPT anxiety.

Methods: 201 3-months postpartum women completed the Portuguese versions of Postpartum Depression Screening Scale (PDSS), Beck Depression Inventory/BDI-II, Profile of Mood States, Difficult Infant Temperament Questionnaire/DITQ, Multidimensional Perfectionism Scale and questions on sociodemographic variables, Lifetime history of insomnia/LTHD, Lifetime history of depressive symptomatology/LTHDS, Current insomnia, Health perception/HP, Stress perception/SP, Perceived social support/PSS, Quality of life/QOL, Health problem/complication postpartum, Sensibility to hormonal fluctuations, Type of delivery and Type of feeding. Postpartum anxiety was measured with the Anxiety/Insecurity (AI) subscale of the PDSS.

Results: AI significantly correlated with LTHDS ($r_S=.32$), LHI ($r_S=.18$), Current insomnia ($r_S=.32$), BDI-II ($r=.76$), SP ($r_S=.38$), PSS ($r_S=.25$), Perceived QOL ($r_S=.37$), Health perception ($r_S=.29$), Health problem in the postpartum ($r_S=.26$), Negative Affect/NA ($r=.66$), Positive Affect/PA ($r=.58$), Conditional Acceptance/CA ($r=.29$) and DIT ($r=.38$) (all $p<.01$). Mean comparisons revealed that women with vs. without LHDS, with vs. without LTHI, good sleepers vs. with insomnia syndrome, high vs. low SP, low vs. high PSS, bad/very bad vs. good/very good QOL, bad/very bad vs. good/very good HP, high ($< M+1DP$) vs. low ($> M-1DP$) DIT, CA, NA and low vs. high PA had significantly higher mean scores in AI (all $p<.01$). Linear regression model composed of all correlated variables explained 53.7% of AI variance and showed that NA, PA and DIT are significant ($p<.05$) predictors of AI.

Conclusion: Our findings are in accordance with previous research and contribute to the progress on this topic.