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Anxiety experienced in high-risk pregnancy

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Abstract

Pregnancy is the time of new experiences. A woman is preparing for significant changes that will strengthen the process of maternity. It is the moment of numerous changes both physiological and emotional. A pregnant woman is experiencing various emotions, such as hope and happiness but also anxiety and concern. In a natural way she starts to change her goals and plans, she is imagining her future. However, on each stage of pregnancy there can occur numerous complications related to various factors, for example: infant diseases, injuries, mother illnesses. Different factors can cause the incorrect course of pregnancy. Situation like

this often causes difficult feelings in women, especially strong anxiety. Numerous researchers emphasize different social-economic situation of women with possible high-risk pregnancy than women with normal pregnancy because the process of preparing to labor is interrupted. Women often need medical treatment, hospitalization, their physical activity is changed as it is often advised to lie down for long periods of time. This strengthens a woman fears and anxiety for child's health and life [1,2].

Key words: physical activity, pregnancy, anxiety

Introduction

Pregnancy is a time of modifications and a woman needs to prepare to them. The purpose of physiological, hormonal and emotional changes is to prepare a woman to maternity [2]. A woman during pregnancy experiences changes in her functioning and creates a bond with the infant. In each trimester of pregnancy we can distinguish important factors which condition its course.

Awareness of being pregnant, waiting and the course of pregnancy condition appearing of various emotions. Many researchers claim that pregnancy is a stress-inducing experience and it requires a proper adaptation.

When the course of pregnancy is not correct, complications occur in both fetal development and woman's health. The process of preparing to maternity is interrupted. A woman experiences difficult emotions, for example anxiety, fear, anger. There can occur mental disorders, such as depression, post-traumatic stress disorder, anxiety disorder.[1]

Normal pregnancy

Pregnancy causes changes in several systems: circulatory, respiratory, digestive, coagulation, urinary, endocrine, nervous [3]. Normal course of pregnancy lasts for 280 days (40 weeks, 10 months) [4]. According to the recommendations of the executive council of Polish Society of Gynecologists for antenatal care in a normal course of pregnancy, a woman is experiencing various medical conditions (nausea, vomiting, edema, polyuria, back pain) and they are typical in this time [5]. During normal pregnancy a woman needs to somehow limit her physical activity, diet and professional work [6]. Situation is changed extremely during high-risk pregnancy and its incorrect course.

High-risk pregnancy

High-risk pregnancy occurs when its proper course is threatened. There can be distinguished a few factors which cause an incorrect course of pregnancy, for example incorrect development and illnesses of the fetus but also illnesses, mechanical trauma and physiological changes of the woman [7]. During high-risk pregnancy the risk of medical emergency increases [8]. There is a risk of premature birth or miscarriage. Premature birth is defined as the birth after the 20th week of pregnancy and before 37th week, regardless the birth weight of the fetus [9].

High-risk pregnancy is a special time which changes woman's psychological and social functioning. A woman needs specific medical treatment, hospitalization in the neonatal intensive care unit is often needed. A woman can experience difficult emotional states, such as anger, despair, anxiety [10].

Anxiety experienced by women during high-risk pregnancy

High-risk pregnancy is a stress-inducing experience in which development and life of the infant and the mother is at risk. Aforementioned situation is not what the woman has expected of maternity. She has to change her plans and behaviors. The woman often needs additional medical treatment, follow up appointments and hospitalization in a neonatal intensive care unit [1]. Necessity of being in the hospital makes it harder to fulfill psychosocial needs of a woman; moreover, it contributes to the escalation of negative emotions connected with high-risk pregnancy. Often, future mothers can experience anxiety while facing complications which threaten the safety of them and the future child. Generally, it is fear for child's health and life [11].

Anxiety can be defined as an unpleasant emotion, a feeling of worry and fright. It is a feeling similar to fear but it occurs with no clear reason. It is a reaction to a subjective danger, so it is a feeling of being worry while there are no objective reasons which could threaten a life and health. Very often anxiety and fear are accompanied by such physiological symptoms as: rapid breathing, rapid heart rate, dry mouth, sweating [12]. It is worth noticing that fear has the adaptive nature which is connected to warning about possibility of being in danger before it could happen, and thanks to that an organism can be prepared to the "fight-or-flight response [13].

Anxiety, according to the Spielberger's conception, is defined as a distinction between a temporary, situational state and anxiety as a stable personality trait [14].

Pregnant women can suffer from anxiety disorders, which are characterized by occurrence of strong fear which can impair everyday functioning. Such disorders are, for example, obsessive-

compulsive disorder, post-traumatic stress disorder, generalized anxiety disorder, panic attacks, phobias [15]. Anxiety disorders occur at a similar rate to postnatal depression.

From the analysis of source literature one can see that an important factor is the period during which risk factors occurred. If they are present for a long period of pregnancy a woman can be in a situation of protracted anxiety. On the other hand, if complications occur at the end of pregnancy, emotions will last shorter but they can be as intensive [16,17]. Rudkowska et al. conducted a research among 61 women hospitalized because of complications during pregnancy and 50 women with normal course of pregnancy, who were a control group. In the treatment group, 33% of women needed to be hospitalized because of the risk of miscarriage, and about 30% because of the risk of premature birth. On the basis of the results, it turns out that women in high-risk pregnancy feel the higher level of the state of anxiety (dependent on stimuli, external situations and not a stable trait of an individual). Such results should be interpreted according to situational context of a women. A research conducted by Semczuk et al. concludes that women in high-risk pregnancy mostly experience emotions such as anger and regret, and their mood is disturbed. What is more, it turns out that women in high-risk pregnancy experience higher level of stress and emotional tension than women with a normal course of pregnancy. When pregnancy is at risk, future mothers do not concentrate on task strategies to deal with stress; more often they try to focus on substitute activities in order to not think about the problem [20]. Other research also point out the strong dependency between high-risk pregnancy and negative feelings of pregnant women, such as anger, sadness, fear [21].

Moreover, it is important to pay attention to negative consequences of higher level of anxiety on the course of pregnancy and labor. During high-risk pregnancy a woman experiences higher levels of anxiety and stress, and it can impair her health. Unfavourable anxiety level can be a direct reason of failure in obstetrics, for example premature birth, lower birth weight of the fetus. Among women with higher anxiety level, increased uterine artery resistance which can impair blood flow to the baby can be found. What is more, anxiety disorders are connected with the higher risk of pre-eclampsia [22].

Analyzing a psychological situation of a pregnant woman, who is often a patient in need of hospitalization and her maternity needs are usually not satisfied, it is important to pay attention to factors which can help to reduce the anxiety level. Such factor can be social and emotional support she can receive from her family and medical staff. Research conducted by Tałaj et al. points out that hospitalization in a neonatal intensive care unit and the feeling of being isolated from close ones causes the rise of negative emotions. However, the support women received

from midwives was helpful. Also in the research conducted by Ledwoń patients hospitalized in a neonatal intensive care unit declared that the support they received from their partner was helpful and it subjectively increased their well-being [23].

Summary

A period of pregnancy is a crucial moment in the life of a woman. It impacts her psychophysiological and social functioning. Emotions of a pregnant woman change rapidly, oscillate between happiness and hope, and fear and anxiety. When the course of pregnancy is incorrect and there are complications it is often a critical and stress-inducing situation because the life and health of a mother and a child can be at risk. The natural process of adaptation is interrupted, often impacted. A woman is in need of medical treatment, multiple follow up appointments and hospitalization. Such situation causes an increment of experiencing of negative emotions, especially anxiety. Aforementioned examples of research show that women in high-risk pregnancies are exposed to higher levels of experienced stress and anxiety, and it can cause an increment in medical issues.

The knowledge of psychological situation of pregnant women may be helpful to undertake support actions and those minimizing negative effects [20,24].

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