

# The Relationship between the Level of Religious Attitudes and Postpartum Blues among Pregnant Women

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## Dear Editor

Postpartum blues, as a transient phenomenon of mood changes, generally begins 1 to 3 days after the child birth.<sup>1</sup> This phenomenon is accompanied with symptoms such as unstable moods, ranging from euphoria to sadness, high sensitivity, crying for no reason, restlessness, poor concentration, anxiety, irritability, and anger.<sup>2</sup>

Prevalence of postpartum blues has been estimated 44.3% in Hong-Kong,<sup>3</sup> 31.3% in Nigeria,<sup>2</sup> and 58% in India.<sup>4</sup> In Iran, 22.3% of women suffer from weak postpartum blues, 10.8% have medium, and 21.1% suffer from severe postpartum blues.<sup>5</sup> Interaction between different biological, psychological and social factors could affect the postpartum blues.<sup>6</sup>

Some researchers have indicated that there is a reverse relationship between religion related beliefs and spiritual attitudes, participation in religious activities and reduction of pregnancy and postpartum anxiety and depression.<sup>7</sup> Also, according to another study, 57% of the doctors believe that praying could enhance the healing effect of treatment.<sup>8</sup> However, some other studies reject this idea.<sup>9-10</sup>

In this cross-sectional study conducted in selected prenatal clinics of Tehran University of Medical Sciences in 2013, 176 healthy pregnant women aged 18-35 years old participated. For assessment of postpartum blues, standard questionnaire of Edinburg Postnatal Depression Scale (EPDS)<sup>11</sup> and Religious Attitude Scale (RAS-R) containing 25 questions with a Cronbach's alpha of 0.954 in Iran were used.<sup>12</sup>

EPDS was used to measure postpartum blues 7-10 days after delivery. This scale is used to identify the women with postpartum depression. Accordingly, the women with scores  $\geq 12$  are considered as depressed and those with scores  $< 12$  are considered as non-depressed. The intensity of pain after delivery in both groups was evaluated.

But the persistence of postpartum blues after 10 days in this study was not followed. The results showed that in the group with high religious attitudes 58.4% (73 persons) suffered from postpartum blues and 41.6% (52 individuals) had no symptoms, while in the groups with low and medium level of religious attitudes 76.2% (32 people) suffered postpartum blues and 23.4% (10 people) showed no symptoms. The majority of mothers (78.6%) did activities such as praying, religious activities and going on a pilgrimage to reduce the pregnancy anxiety. 13% went to parties and read books, 4% did exercise, and 3.6% did Yoga and meditation. Religious attitudes, from the most monotheistic forms to the extreme polytheism, all reflect one of the most original needs of human's internal need: seeking for God.<sup>13</sup> Therefore, regarding the sacredness of pregnant mother in Islamic culture and tendency of mothers, it is suggested that a combination of religious and pregnancy care topics should be taught in prenatal educational classes. In other words, regarding the mothers' beliefs, it is possible to use religion for influencing their health beliefs and behaviors and help them to cope with pregnancy anxiety and have safe pregnancy, child birth and postpartum period.

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