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BJOG. 2013 Jan;120(1):32-40. doi: 10.1111/1471-0528.12029. Epub 2012 Oct 26.

The effect of emotional distress on persistent pelvic girdle pain after delivery: a longitudinal population study.

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Abstract

OBJECTIVE: To study the prognosis for pelvic girdle **pain**, and to explore the association between presence of emotional distress during pregnancy and pelvic girdle syndrome 6 months after delivery.

DESIGN: Longitudinal population study.

SETTING: Norway, for the **period** 1999-2008.

POPULATION: A follow-up of 41 421 women in the Norwegian Mother and Child Cohort who reported pelvic girdle **pain** at 30 weeks of gestation.

METHODS: Data were obtained by self-administered questionnaires in weeks 17 and 30 of gestation, and 6 months after delivery.

MAIN OUTCOME MEASURE: Pelvic girdle syndrome 6 months after delivery, defined as **pain** in the anterior pelvis and on both sides in the posterior pelvis.

RESULTS: Six months after delivery, 78.0% of the women had recovered, 18.5% reported persistent **pain** in one or two pelvic locations, 3.0% reported pelvic girdle syndrome and 0.5% reported severe pelvic girdle syndrome. The recovery rates decreased with increasing levels of **pain** severity in pregnancy. Being emotionally distressed at two time points during pregnancy was associated with the presence of pelvic girdle syndrome (adjusted OR 1.5, 95% CI 1.2-1.9) and severe pelvic girdle syndrome (adjusted OR 1.9, 95% CI 1.1-3.1), after adjustment for **pain** severity in pregnancy, other medical conditions, body mass index, age at menarche, previous **low back pain**, and smoking during pregnancy.

CONCLUSIONS: In this follow-up of women with pelvic girdle **pain** in pregnancy, the recovery rates after delivery were high. Our findings suggest that the presence of emotional distress during pregnancy is independently associated with the persistence of pelvic girdle **pain** after delivery.

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PMID: 23107369 [PubMed - indexed for MEDLINE]

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