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Correspondence

HEALTH ANXIETY AND BEHAVIOURAL CHANGES OF PREGNANT WOMEN DURING THE COVID-19 PANDEMIC



Dear Editor

We note that SARS-CoV-2 (Covid-19) has resulted in significant psychological impact on mental health of the general population, with widespread depression and anxiety in early phase of disease [1]. Accurate information from reliable sources is essential in fast-moving global health crises such as Covid-19, with misinformation adding to fear and anxiety. Health anxiety is also an influential factor in the success of public health strategies to manage pandemics [2]. We sought to assess maternal anxiety due to Covid-19, adaptations in behaviour, and information sources used by pregnant patients.

We questioned patients in the second and third trimester of pregnancy when presenting for out-patient assessment, examining perception of Covid-19, information sources and maternal anxiety. Patients with respiratory symptoms or potential diagnosis of Covid-19 were excluded. After the questionnaire patients were

provided with official information sources, (Health Service Executive [3], Health Protection Surveillance Centre [4]).

From the 16th to the 27th of March 2020, 71 women completed the questionnaire (Table 1). This represented the first two weeks of the pandemic's delay phase. Most women (83.1%, 59/71) did not often worry about their health previously. During the delay phase, over half of women (50.7%, 36/71) worried about their health often or all the time. Pregnant women had heightened anxiety regarding their older relatives' health (83.3%,55/66). This was followed by concern about their other children (66.7%, 28/42) and then their unborn baby (63.4%, 45/71).

Over 35% of patients (25/71) were self-isolating to avoid getting the disease. One third (32.4%, 23/71) began staying at home from work due to fears regarding the virus while a further one in five patients (19.7%, 14/71) began working from home. Almost half of women questioned (46.5%, 33/71) altered their primary method of transportation. Bulk-buying was reported by many participants (66.2% food, 42.3% Hand sanitizer, 25.4% toiletries, 9.9% fuel, 8.5% protective personal equipment). Following the closure of schools in Ireland just before data collection, 38.2% (26/71) of women needed additional child support. A further 23.9% (17/71) had to stay home to care for existing children, 11.3% (8/71) were relying on

Table 1Responses from 71 pregnant women to a questionnaire on their attitudes and behaviour relating to Covid 19.

		% Positive	Yes	No	n
Worry Often or All the Time	About self – prior to pandemic	16.9	12	59	71
	About self – after arrival of pandemic	50.7	36	35	71
	About unborn baby	63.4	45	26	71
	About existing children	66.7	28	14	42
	About older relatives	83.3	55	11	66
Behavioural Changes	Working from home	19.7	14	57	71
	Staying home from work	32.4	23	48	71
	Self-isolating	35.2	25	48	71
	Avoiding large social gatherings	63.4	45	26	71
	Avoid all socialising	70.4	50	21	71
	Altered transportation	46.5	33	38	71
Stocking up	Food	66.2	47	24	71
	Hand sanitizer	42.3	30	41	71
	Toiletries/toilet roll	25.4	18	53	71
	Fuel/batteries	9.9	7	64	71
	Personal Protective Equipment	8.5	6	65	71
Child support	Need additional child support	38.2	26		71
	No support - have to stay home from work	23.9	14	57	71
	Shared childcare (friends, colleagues)	5.6	4	67	71
	Grandparents	11.3	8	63	71
Information sources	Television News Bulletins	80.3	57	14	71
	Newspaper	25.4	18	53	71
	Mobile phone news applications	49.3	35	36	71
	Health Service Executive Website	63.4	45	26	71
	WHO Website	16.9	12	59	71
	Twitter	4.2	3	68	71
	Other social media	11.3	8	63	71

grandparents and 5.6% (4/71) received help from friends to care for their children.

Information sources that were utilised by patients included TV News (80.3%, 57/71), HSE website (63.4%, 45/71) and national news phone apps (49.3%, 35/71). Smaller proportions used newspapers (25.4%, 18/71), WHO website (16.9%, 12/71), Twitter (4.2%, 3/71) or other social media (11.3%, 8/71).

When information resources were presented to patients at the conclusion of the survey, 77.5% (55/71) found this information extremely helpful, while 29.6% (31/71) did not know about these information sources prior to our study.

The Covid-19 pandemic has caused anxiety among the pregnant population to rise. Women are most concerned about older relatives, then their children, followed by their unborn child. Our patients are least concerned about their own health, but despite this, over half of women have significant health anxiety. Government instruction on social distancing has resulted in major changes in behaviour among pregnant patients. Pregnant women being under additional pressure may have indirect adverse effects on their physical and mental health. It is critical to recognise this and support patients through the provision of accurate and up-todate information, with simple strategies such as in this study leading to improved patient satisfaction and empowerment. Television news bulletins remain the most utilised source of information. Few patients used twitter or other social media as information sources, which is reassuring given the concerns over distribution of misinformation through social media. This data can be used to guide public health strategy regarding patient anxieties, changes in behaviour and health information sources, revealing the highest yield platforms to relay health messages to patients.

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None

Declaration of Competing Interest

The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper.

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