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Perinatal depressive disorder prevalence in Africa: A systematic review and Bayesian analysis
(2021) *General Hospital Psychiatry*, 69, pp. 55-60. Cited 3 times.

DOI: 10.1016/j.genhosppsych.2021.01.006

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Abstract

Objective: To curb the burden of perinatal depression (PND) in Africa, it is important to have an accurate estimate of its burden in the continent. Hence, we determined the prevalence of (major) depressive disorder in the perinatal period in Africa. **Methods:** We searched PubMed, EMBASE, Africa Index Medicus, and Africa Journal Online, to identify studies reporting the prevalence of (major) depressive disorder in the perinatal period in Africa, between January 1st 2000 and February 17th 2020. PND prevalence was estimated using Bayesian modelling. **Results:** We identified 154 studies (192 data points; 113,147 women). In pregnant women, the prevalence of depressive disorder was 22.8% (95%CrI: 21.5–24.1) among women with no specific condition and 31.9% (95%CrI: 30.2–33.6) among those with HIV. In post-partum, the prevalence was 21.2% (95%CrI: 20.0–22.5), 30.0% (95%CrI: 28.2–31.8), and 44.6% (95%CrI: 35.9–53.8) among women with no specific condition, with HIV, and with poor pregnancy outcomes, respectively. **Conclusions:** This study depicted a high prevalence of PND in Africa. This prevalence varied across pre-defined clinical profiles. HIV-infected women or those with poor pregnancy outcomes having a higher prevalence of depression. This highlights the need for more attention and preventive interventions geared towards these sub-groups. © 2021 Elsevier Inc.

Author Keywords

Africa; Depression; Depressive disorder; Post-partum; Pregnancy

Index Keywords

Africa, Bayes theorem, disease burden, Edinburgh Postnatal Depression Scale, geographic distribution, human, Human immunodeficiency virus infection, major depression, perinatal depression, perinatal period, postnatal depression, pregnancy outcome, prenatal period, Review, systematic review, epidemiology, female, major depression, pregnancy, pregnancy outcome, prevalence; Africa, Bayes Theorem, Depressive Disorder, Major, Female, Humans, Pregnancy, Pregnancy Outcome, Prevalence

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Publisher: Elsevier Inc.

ISSN: 01638343

CODEN: GHPSD

PubMed ID: 33550036

Language of Original Document: English

Abbreviated Source Title: Gen. Hosp. Psychiatry
2-s2.0-85100375174

Document Type: Review

Publication Stage: Final

Source: Scopus