

Boletim BiblioCovid

Boletim BiblioCovid v.2 n.3, março 2021 | COVID-19 e Saúde da Mulher

Boletim destinado a apresentação de estratégias e artigos científicos sobre temas relacionados à Covid-19.

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COVID-19 e Saúde da mulher



Vocabulário controlado

MeSH – Medical Subject Headings (NLM/NIH)

Bases utilizadas

Pubmed

Termos Utilizados (com base no Medical Subject Headings)



Descritores e/ou palavras-chave

Saúde da Mulher
Sars-CoV-2
COVID-19

Filtros utilizados

Free full text
Journal Article
Ano: 2020-2021

Estratégias de busca

("Women's Health"[Mesh]) AND ("COVID-19"[Mesh] OR "SARS-CoV-2"[Mesh])

Seleção dos dez artigos mais relevantes, segundo critérios da base de dados PubMed e U.S. National Library of Medicine incluindo os filtros, "Journal Article" " Free full text", "Ano: 2020-2021"

1. Pandemics and maternal health: the indirect effects of COVID-19

[doi: 10.1111/anae.15408](https://doi.org/10.1111/anae.15408)

Resumo

Infectious diseases can directly affect women and men differently. During the COVID-19 pandemic, higher case fatality rates have been observed in men in most countries. There is growing evidence, however, that while organisational changes to healthcare delivery have occurred to protect those vulnerable to the virus (staff and patients), these may lead to indirect, potentially harmful consequences, particularly to vulnerable groups including pregnant women. These encompass reduced access to antenatal and postnatal care, with a lack of in-person clinics impacting the ability to screen for physical, psychological and social issues such as elevated blood pressure, mental health issues and sex-based violence. Indirect consequences also encompass a lack of equity when considering the inclusion of pregnant women in COVID-19 research and their absence from vaccine trials, leading to a lack of safety data for breastfeeding and pregnant women. The risk-benefit analysis of these changes to healthcare delivery remains to be fully evaluated, but the battle against COVID-19 cannot come at the expense of losing existing quality standards in other areas of healthcare, especially for maternal health.

Referência

LUCAS, D. N.; BAMBER, J. H. Pandemics and maternal health: the indirect effects of COVID-19. *Anaesthesia*. v. 76, suppl. 4, p. 69-75, apr. 2021.

2. The need for additional mental health support for women in the postpartum period in the times of epidemic crisis

[doi:10.1186/s12884-021-03544-8](https://doi.org/10.1186/s12884-021-03544-8)

Resumo

Background: This retrospective study aimed to identify possible intensification of mental health difficulties among women seeking support in the postpartum period during the epidemic state in Poland. We assumed that the epidemic crisis, social isolation, and restrictions in hospitals which affect pregnant and postpartum women - lack of family labors, lack of the possibility to be with the newborn when he/she is hospitalized, may increase fear and reduce psychosocial resources of women, hinder their normal process of transition to motherhood and thus contribute to the intensified severity of depressive symptoms.

Methods: The study participants were women seeking support at the on-line platform of the project 'Next Stop: Mum', which is a part of the postpartum depression prevention's program implemented by the Ministry of Health in Poland, and enables remote self-screening for the severity of the postpartum depression symptoms with the Edinburgh Postnatal Depression Scale developed by Cox and collaborators. The analyzed data in this study were obtained from 139 women: 61 filled forms from October 1 - November 10, 2019 (non-epidemic period), and 78 filled forms from February 20-March 30 (beginning of the COVID-19 epidemic), 2020.

Results: A statistically significant difference in the severity of postpartum depression symptoms were observed among women making a self-assessment with EPDS scale at the beginning of the COVID-19 epidemic in Poland ($M = 15.71$; $SD = 6.23$), compared to the pre-epidemic neutral period ($M = 13.56$; $SD = 6.46$).

Conclusions: The results of this study indicate that the epidemic crisis may be associated with an increased need for additional caution and support of women's mental health in the postpartum period. We believe that recommendations for medical staff, policy, and families of women struggling with postpartum depression symptoms during crisis should be widespread as the second wave of COVID-19 disease may develop in the autumn-winter 2020 and spring 2021.

Referência

CHRZAN-DEŹTKOŚ, M.; WALCZAK-KOZŁOWSKA, T.; LIPOWSKA, M. The need for additional mental health support for women in the postpartum period in the times of epidemic crisis. *BMC Pregnancy and Childbirth*, v. 21, n. 1, p. 114, 8 feb. 2021.

4. Addressing inequities in maternal health among women living in communities of social disadvantage and ethnic diversity

[doi:10.1186/s12889-021-10182-4](https://doi.org/10.1186/s12889-021-10182-4)

Resumo

The response to the coronavirus outbreak and how the disease and its societal consequences pose risks to already vulnerable groups such those who are socioeconomically disadvantaged and ethnic minority groups. Researchers and community groups analysed how the COVID-19 crisis has exacerbated persisting vulnerabilities, socio-economic and structural disadvantage and discrimination faced by many communities of social disadvantage and ethnic diversity, and discussed future strategies on how best to engage and involve local groups in research to improve outcomes for childbearing women experiencing mental illness and those living in areas of social disadvantage and ethnic diversity. Discussions centred around: access, engagement and quality of care; racism, discrimination and trust; the need for engagement with community stakeholders; and the impact of wider social and economic inequalities. Addressing biomedical factors alone is not sufficient, and integrative and holistic long-term public health strategies that address societal and structural racism and overall disadvantage in society are urgently needed to improve health disparities and can only be implemented in partnership with local communities.

Referência

TURIENZO, C. F.; NEWBURN, M.; AGYEPONG, A.; BUABENG, R.; DIGNAM, A.; ABE, C.; BEDWARD, L.; RAYMENT-JONES, H.; SILVERIO, S. A.; EASTER, A.; CARSON, L. E.; HOWARD, L. M.; SANDALL, J.;NIHR ARC South London Maternity and Perinatal Mental Health Research and Advisory Teams. Addressing inequities in maternal health among women living in communities of social disadvantage and ethnic diversity. **BMC Public Health**, v. 21, n. 1, p. 176, 21 jan. 2021.

3. A validation of the postpartum specific anxiety scale 12-item research short-form for use during global crises with five translations

[doi:10.1186/s12884-021-03597-9](https://doi.org/10.1186/s12884-021-03597-9)

Resumo

Background: Global crises inevitably increase levels of anxiety in postpartum populations. Effective and efficient measurement is therefore essential. This study aimed to create a 12-item research short form of the 51-item Postpartum Specific Anxiety Scale [PSAS] and validate it for use in rapid response research at a time of global crises [PSAS-RSF-C]. We also present the same 12-items, in five other languages (Italian, French, Chinese, Spanish, Dutch) to increase global accessibility of a psychometric tool to assess maternal mental health.

Methods: Twelve items from the PSAS were selected on the basis of a review of their factor loadings. An on-line sample of UK mothers (N = 710) of infants up to 12 weeks old completed the PSAS-RSF-C during COVID-19 'lockdown'.

Results: Principal component analyses on a randomly split sample (n = 344) revealed four factors, identical in nature to the original PSAS, which in combination explained 75% of the total variance. Confirmatory factor analyses (n = 366) demonstrated the four-factor model fit the data well. Reliability of the overall scale and of the underlying factors in both samples proved excellent.

Conclusions: Findings suggest the PSAS-RSF-C may prove useful as a clinical screening tool and is the first postpartum-specific psychometric scale to be validated during the COVID-19 pandemic. This offers psychometrically sound assessment of postpartum anxiety. By increasing the accessibility of the PSAS, we aim to enable researchers the opportunity to measure maternal anxiety, rapidly, at times of global crisis.

Referência

SILVERIO, S. A.; DAVIES, S. M.; CHRISTIANSEN, P.; APARICIO-GARCÍA, M. E.; BRAMANTE, A.; CHEN, P.; COSTAS-RAMÓN, N.; WEERTH, C.; VEDOVA, A. M. D.; GIL, L. I.; LUSTERMANS, H.; WENDLAND, J.; XU, J.; HALFORD, J. C. G.; HARROLD, J. A.; FALLON, V. A validation of the postpartum specific anxiety scale 12-item research short-form for use during global crises with five translations. *BMC Pregnancy and Childbirth*, v. 21, n. 1, p. 112, 8 feb. 2021.

5. Impact of COVID-19 on maternal mental health

[doi:10.1097/NMC.0000000000000692](https://doi.org/10.1097/NMC.0000000000000692)

Resumo

The COVID-19 pandemic led to several states mandating social distancing and sheltering in place along with a shift in health care delivery, unprecedented unemployment rates, financial stress, and emotional concerns. For pregnant and postpartum women, limited social support and social isolation with social distancing and fear of COVID-19 exposure or infection for themselves, their fetus, or their newborn infants, have implications for maternal mental health. An overview of the potential impact of COVID-19 on mental health risk for pregnant and postpartum women is presented with implications for nursing practice to promote maternal-infant wellbeing.

Referência

GOYAL, D.; SELIX, N. W. Impact of COVID-19 on maternal mental health. **MCN The American Journal of Maternal/Child Nursing**. v. 46, n. 2, p. 103-109, mar.-apr. 2021.

6. The impact of the COVID-19 pandemic on maternal and perinatal health: a scoping review

[doi:10.1186/s12978-021-01070-6](https://doi.org/10.1186/s12978-021-01070-6)

Resumo

Introduction: The Covid-19 pandemic affects maternal health both directly and indirectly, and direct and indirect effects are intertwined. To provide a comprehensive overview on this broad topic in a rapid format behoving an emergent pandemic we conducted a scoping review.

Methods: A scoping review was conducted to compile evidence on direct and indirect impacts of the pandemic on maternal health and provide an overview of the most significant outcomes thus far. Working papers and news articles were considered appropriate evidence along with peer-reviewed publications in order to capture rapidly evolving updates. Literature in English published from January 1st to September 11 2020 was included if it pertained to the direct or indirect effects of the COVID-19 pandemic on the physical, mental, economic, or social health and wellbeing of pregnant people. Narrative descriptions were written about subject areas for which the authors found the most evidence.

Results: The search yielded 396 publications, of which 95 were included. Pregnant individuals were found to be at a heightened risk of more severe symptoms than people who are not pregnant. Intrauterine, vertical, and breastmilk transmission were unlikely. Labor, delivery, and breastfeeding guidelines for COVID-19 positive patients varied. Severe increases in maternal mental health issues, such as clinically relevant anxiety and depression, were reported. Domestic violence appeared to spike. Prenatal care visits decreased, healthcare infrastructure was strained, and potentially harmful policies implemented with little evidence. Women were more likely to lose their income due to the pandemic than men, and working mothers struggled with increased childcare demands.

Conclusion: Pregnant women and mothers were not found to be at higher risk for COVID-19 infection than people who are not pregnant, however pregnant people with symptomatic COVID-19 may experience more adverse outcomes compared to non-pregnant people and seem to face disproportionate adverse socio-economic consequences. High income and low- and middle-income countries alike faced significant struggles. Further resources should be directed towards quality epidemiological studies. The Covid-19 pandemic impacts reproductive and perinatal health both directly through infection itself but also indirectly as a consequence of changes in health care, social policy, or social and economic circumstances. The direct and indirect consequences of COVID-19 on maternal health are intertwined. To provide a comprehensive overview on this broad topic we conducted a scoping review. Pregnant women who have symptomatic COVID-19 may experience more severe outcomes than people who are not pregnant. Intrauterine and breastmilk transmission, and the passage of the virus from mother to baby during delivery are unlikely. The guidelines for labor, delivery, and breastfeeding for COVID-19 positive patients vary, and this variability could create uncertainty and unnecessary harm. Prenatal care visits decreased, healthcare infrastructure was strained, and potentially harmful policies are implemented with little evidence in high and low/middle income countries. The social and economic impact of COVID-19 on maternal health is marked. A high frequency of maternal mental health problems, such as clinically relevant anxiety and depression, during the epidemic are reported in many countries. This likely reflects an increase in problems, but studies demonstrating a true change are lacking. Domestic violence appeared to spike. Women were more vulnerable to losing their income due to the pandemic than men, and working mothers struggled with increased childcare demands. We make several recommendations: more resources should be directed to epidemiological studies, health and social services for pregnant women and mothers should not be diminished, and more focus on maternal mental health during the epidemic is needed.

Referência

KOTLAR, B.; GERSON, E.; PETRILLO, S.; LANGER, A.; TIEMEIER, H. The impact of the COVID-19 pandemic on maternal and perinatal health: a scoping review. **Reproductive Health**. v. 18, n. 1, p. 10, 18 jan.2021.

7. To treat or not to treat: perceptions of the initial American Society for Reproductive Medicine COVID-19 recommendations among women's health providers

doi: [10.1007/s10815-021-02064-w](https://doi.org/10.1007/s10815-021-02064-w)

Resumo

Purpose: The objective of this study was to evaluate the perception of the initial ASRM COVID-19 recommendations for infertility treatment held by women's health providers within varying subspecialties, as well as their attitudes toward pregnancy and fertility during this time.

Methods: An electronic survey was sent to all women's healthcare providers, including physicians, mid-level providers and nurses, in all subspecialties of obstetrics and gynaecology (Ob/Gyn) at a large tertiary care university-affiliated hospital.

Results: Of the 278 eligible providers, the survey response rate was 45% (n = 127). Participants represented 8 Ob/Gyn subspecialties and all professional levels. Participants age 18-30 years were significantly more likely to feel that women should have access to infertility treatment despite the burden level of COVID-19 in respective community/states ($p = 0.0058$). Participants within the subspecialties of general Ob/Gyn, maternal foetal medicine and gynecologic oncology were significantly more likely to disagree that all women should refrain from planned conception during the COVID-19 pandemic, in comparison to those in urogynecology and reproductive endocrinology and infertility ($p = 0.0003$).

Conclusions: Considering the immediate and unknown long-term impact of the COVID-19 pandemic on fertility care delivery, a better understanding of perceptions regarding infertility management during this time is important. Our study shows overall support for the initial ASRM recommendations, representing a wide spectrum of women's health providers.

Referência

WILTSHIRE, A.; JACKSON-BEY, T.; WALKER, Z.; CHIANG, J. L.; MACLENNAN, P.A.; GUNN, D.; HURD, W. W. To treat or not to treat: perceptions of the initial American Society for Reproductive Medicine COVID-19 recommendations among women's health providers. **Journal of Assisted Reproduction and Genetics**. v. 38, n. 3, p. 621-626, mar. 2021. Epub 14 jan.2021.

8. Generation COVID-19 - Should the foetus be worried?

[doi:10.1111/apa.15693](https://doi.org/10.1111/apa.15693)

Resumo

Aim: The aim of this narrative review was to evaluate the risks, both direct and indirect, to the foetus from the COVID-19 pandemic.

Methods: Direct and indirect risks were defined as (a) vertical infection (congenital or intrapartum), (b) maternal infection and its sequelae, and (c) sources of maternal stress during lockdown, including social isolation and altered healthcare provision.

Results: Early studies suggest that vertical viral transmission is low; however, there may be an important effect of maternal infection on foetal growth and development. The impact of various degrees of lockdown on prospective mothers' health, habits and healthcare provision is of concern. In particular, increased maternal stress has been shown to have a significant effect on foetal brain development increasing the risk of mental health, and cognitive and behavioural disorders in later life.

Conclusion: From the evidence available to date, direct risks to the foetus from the SARS-CoV-2 virus are low. Indirect effects of the pandemic, particularly resulting from the effect of maternal stress on the developing brain, can have lifelong detrimental impacts for this generation of children.

Referência

IQBAL, A.; BURRIN, C.; AYDIN, E.; BEARDSALL, K.; WONG, H.; AUSTIN, T. Generation COVID-19 - Should the foetus be worried? *Acta Paediatrica*. v. 110, n. 3; p. 759-764, mar. 2021. Epub 10 dec. 2020.

9. Ethical challenges for women's healthcare highlighted by the COVID-19 pandemic

[doi:10.1136/medethics-2020-106646](https://doi.org/10.1136/medethics-2020-106646)

Resumo

Healthcare policies developed during the COVID-19 pandemic to safeguard community health have the potential to disadvantage women in three areas. First, protocols for deferral of elective surgery may assign a lower priority to important reproductive outcomes. Second, policies regarding the prevention and treatment of COVID-19 may not capture the complexity of the considerations related to pregnancy. Third, policies formulated to reduce infectious exposure inadvertently may increase disparities in maternal health outcomes and rates of violence towards women. In this commentary, we outline these challenges unique to women's healthcare in a pandemic, provide preliminary recommendations and identify areas for further exploration and refinement of policy.

Referência

BRUNO, B.; SHALOWITZ, D. I.; ARORA, K. S. Ethical challenges for women's healthcare highlighted by the COVID-19 pandemic. **Journal of Medical Ethics**, v. 47, n. 2, p. 69-72, feb. 2021. Epub 12 oct. 2020.

10. Women's perspective on the COVID-19 pandemic: Walking into a post-peak phase.

[doi:10.1016/j.ijcard.2020.08.025](https://doi.org/10.1016/j.ijcard.2020.08.025)

Resumo

The pandemic of Novel Coronavirus Disease 2019 (COVID-19), caused by severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), has provoked hundreds of thousands of deaths, resulting in catastrophe for humans. Although some insights have been garnered in studies on women, children and young adults infected with COVID-19, these often remain fragmented in literature. Therefore, we discussed the impact of COVID-19 pandemic on women, children and young patients, particularly those with underlying cardiovascular comorbidities or congenital heart disease. Furthermore, we gathered and distilled the existing body of literature that describes their cardiovascular complications and the recommended actions in favour of those patients toward the post-peak pandemic period. Although many questions still require answers, this article is sought to help the practicing clinician in the understanding and management of the threatening disease in special populations.

Referência

SABATINO, J.; MOSCATELLI, S.; RUSTAMOVA, Y.; KOTLAR, I.; AVESANI, M.; BRIDA, M.; GÖK, G.; BORRELLI, N.; MARCHENKO, O.; CALVIERI, C.; CZERWIŃSKA-JELONKIEWICZ, K.; MOHAREM-ELGAMAL, S.; GRAPSA, J.; KEMALOĞLU ÖZ, T.; PINK International Young Academy of Cardiology. Women's perspective on the COVID-19 pandemic: walking into a post-peak phase. **International Journal of Cardiology**, v. 323, p. 29-33, 15 jan. 2021. Epub 13 aug. 2020.



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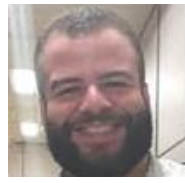
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