

PubMed

Search

Display Settings: Abstract

free full text  
available at [SciELO.org](http://SciELO.org)

Rev Assoc Med Bras. 2011 Sep-Oct;57(5):583-7.

## Risk of suicide in high risk pregnancy: an exploratory study.

[Article in English, Portuguese]

[Benute GR](#), [Nomura RM](#), [Jorge VM](#), [Nonnenmacher D](#), [Fráguas Junior R](#), [Lucia MC](#), [Zugaib M](#).

Serviço de Saúde da Divisão de Psicologia, Hospital das Clínicas, Faculdade de Medicina, Universidade de São Paulo, São Paulo, SP, Brazil. [rguerra@uol.com.br](mailto:rguerra@uol.com.br)

### Abstract

**OBJECTIVE:** To identify the risk of suicidal behavior in high-risk pregnant women at a public hospital in São Paulo.

**METHODS:** We conducted a semi-structured interview with each of the participants (n = 268) through a previously prepared questionnaire. Risk of suicidal behavior was assessed by the Portuguese version of PRIME-MD.

**RESULTS:** The mean age of patients was 29 years (SD = 0.507) and gestation period was 30 weeks (SD = 0.556). Of the total sample, specific risk of **suicide** was found in 5% (n = 14). Of these, 85% have a stable relationship (married or cohabitating), the pregnancy was planned in 50% of cases, and 71% have no religion or professional activities. The correlation of risk of **suicide** with data from marital status, planned birth, age, education, professional practice, risk of prematurity, and religion showed that having a religion is statistically significant (p = 0.012). There were no positive associations for any of the other selected variables when compared with the risk of **suicide**. By correlating the risk of **suicide** with other characteristic symptoms of major depression, there was statistical significance in the sample with regard to insomnia or hypersomnia (p = 0.003), fatigue or loss of energy (p = 0.001), decreased or increased appetite (p = 0.005), less interest in daily activities (p = 0.000), depressed mood (p = 0.000), feelings of worthlessness or guilt (p = 0.000), decreased concentration (p = 0.002), and agitation or psychomotor retardation (p = 0.002).

**CONCLUSION:** We found that religion can be a **protective factor** against suicidal behavior. Besides providing a social support network needed by women during pregnancy, religion supports belief in life after death and in a loving God, giving purpose to life and self esteem and providing models for coping with crises. The results show the importance of prevention and early diagnosis of suicidal behavior, since **suicide** is an attempt to move from one sphere to another by force, seeking to solve what seems impossible.

PMID: 22012295 [PubMed - indexed for MEDLINE] [Free full text](#)

**MeSH Terms**

**LinkOut - more resources**