

BOLETIM RAMB COVID-19

Número 5
27 de abril de 2020

Pregnant, uninfected, stressed, and confined in the COVID-19 period: what can we expect in the near future?

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Em um momento em que há uma emergência mundial de saúde pública, é fundamental que o conhecimento científico gerado durante a pandemia chegue rapidamente à classe médica classe médica.

Dentro desta dinâmica a Revista da Associação Médica Brasileira (Ramb) está adotando uma série de medidas a fim de acelerar o processo editorial para publicação de artigos sobre a Covid-19. A partir de hoje (14/04/2020), a AMB publicará o Boletim Ramb Covid-19, que antecipará os artigos científicos selecionados pelos editores da Ramb sobre o tema.

“Os artigos foram escritos por especialistas e selecionados dentro dos critérios da Ramb para esclarecer temas fisiopatológicos, assim como oferecer orientações de prevenção e tratamento da doença. Dessa forma, esperamos colaborar com os médicos para o melhor atendimento aos seus pacientes, com a disponibilidade mais ágil desses artigos, antes de sua publicação na Ramb”, comenta Carlos Serrano Jr., editor-chefe da Ramb.

Para o diretor científico da AMB, Antonio Carlos Palandri Chagas, “neste momento ímpar vivido no mundo por conta da pandemia de Covid-19, a AMB cumpre seu papel de estar levando à comunidade científica brasileira os recentes artigos sobre os mecanismos fisiopatológicos e aspectos clínicos relevantes dessa situação que assola a saúde pública”.



Carlos Serrano Jr.



Antonio Carlos Palandri Chagas

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(JOURNAL OF THE BRAZILIAN MEDICAL ASSOCIATION)**

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The RAMB, Journal of The Brazilian Medical Association, is an official publication of the Associação Médica Brasileira (AMB – Brazilian Medical Association), indexed in Medline, Science Citation Index Expanded, Journal Citation Reports, Index Copernicus, Lilacs, and Qualis B2 Capes databases, and licensed by Creative Commons®. Registered in the 1st Office of Registration of Deeds and Documents of São Paulo under n. 1.083, Book B, n. 2.

Publication norms are available on the website www.amb.org.br

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Pregnant, uninfected, stressed, and confined in the COVID-19 period: what can we expect in the near future?

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Pregnancy can be associated with a period of distress and psychological vulnerability. The transition to parenting involves fast physical, psychological, and social changes. Stress is the perception of a discrepancy in the availability of resources to meet the demands of external events or stimuli¹. Stress and anxiety are highly related and involve systemic responses as cortisol reactivity². Anxiety is the perception of external stimuli to uncertain danger or potential threats and involves an organic response³.

The World Health Organization declared COVID-19 as a public health emergency of international concern in January 2020. In Face of the possibility of an uncontrolled outbreak, many cities and countries have established mass quarantine, and public authorities have asked the population to self-isolate at home for weeks. Quarantine involves the loss of freedom, uncertainty over disease status, physical distance from beloved relatives, and boredom. The imposition of

quarantine presents psychological costs that cannot be measured and are sometimes neglected⁴.

During the COVID-19 outbreak, pregnant women are experiencing stress and anxiety from the perception of disruption in prenatal services and reduced access to health facilities and medication for themselves and for their newborns⁵, fear of infecting family members and the newborn, boredom, frustration, financial loss, and the effect of the disease or its treatment on the fetus. These perceptions are contrived or enhanced by many reliable and unreliable media sources⁶.

In pregnancy, little is known about the stress in infectious outbreaks and/or quarantine. However, the effects of stress and anxiety during pregnancy and delivery are very well documented and should be expected in the large population of uninfected or asymptomatic pregnant women⁷. The consequences of stress nowadays on these patients may affect the obstetrics

and fetal medicine services, and the neonatal intensive care units in a very short period due to increased risks of preterm delivery and low birth weight. Additionally, the effects of anxiety extend to a risk of puerperal complications, such as poor parental bonding and postpartum depression. The long-term effects on a child extend beyond inherited genes and the quality of the pregnancy care and are known as functional teratology or Baker hypothesis. Maternal stress is also linked to interferences in the neurodevelopment of the fetus, which adds to the risk of inherited psychiatric illness⁸.

Maternal-fetal medicine has developed and achieved great results in the prevention of pregnancy complications through various measures such as early fetal ultrasound, maternal psychological support, and by increasing the maternal-fetal attachment and helping parents to cope with adverse conditions through the prediction and prevention of fetal growth restrictions,

preeclampsia, and spontaneous preterm delivery. During the COVID-19 outbreak, maternal-fetal specialists know they have a great task ahead: to continue supporting those suffering from known conditions and to face new, unknown challenges.

However, stress and anxiety are well-known threats that silently harm women and future generations and cannot be neglected. Hence, further knowledge about the harmful effects of stress and anxiety during pregnancy is necessary in the future. ■

Submitted Date: 29-Mar-2020
Accepted Date: 01-Abr-2020

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