#### **WOMEN'S MENTAL HEALTH**

#### [Abstract:0137] Women's mental health

# Repetitive transcranial magnetic stimulation for the treatment of depression during pregnancy and postpartum period

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**Objective:** Major depressive disorder is common during pregnancy and postpartum. These patients prefer non medicated treatment options. We present the outcomes of the treatment with repetitive transcranial magnetic stimulation (rTMS) for major depressive disorder during pregnancy and postpartum.

**Methods:** There were forty participants in our study, but twenty-five participants did not complete rTMS treatment sessions. Seven women suffered major depressive disorder during pregnancy and eight women major depressive disorder in the postpartum period. The rTMS intensity was set at 80 % of the motor threshold. A 20-Hz stimulation with a duration of 2s was delivered 20 times with 50s intervals. A session comprised 1,000 pulses. Treatment effect was assessed during treatment sessions 1, 7, and 15.

**Results:** Four out of fifteen (26%) subjects responded (decrease 50% in Hamilton Depression Rating Scale [HDRS-17] scores). Six out of fifteen (40%) subjects responded (decrease 50% in Hamilton Anxiety Rating Scale [HARS-14] scores). Eight out of fifteen (53%) subjects responded (under 13 points in Edinburgh depression scale [EDS-10] scores). There were no adverse effects in patient or infant during the pregnancy or in the post-natal period. Mild headache was the only common adverse event and was reported by 4 of 15 (26%) subjects. (p<0.05, Wilcoxon)

**Conclusions:** Maintenance rTMS may be an effective and feasible treatment option for pregnant and postpartum women with major depressive disorder who do not opt to take antidepressant medication.

Keywords: depression, pregnant and postpartum women, repetitive transcranial magnetic stimulation (rTMS)

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### [Abstract:0205] Women's mental health

# Childhood trauma, sexual function disorder and partner compliance in women who have married at an early age

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**Objective:** The purpose of the present study was to determine effects of early marriage on sexual function and partner compliance of the couples and to research the childhood trauma caused in women who were forced to marry or have married early.

**Methods:** Women who have been referred to the Obstetrics and Gynecology Department of the Faculty of Medicine, Dicle University, including 50 women who had married before the age of 18 and 50 women who had married after that age were included into our study during the first six month of their pregnancy. Sociodemographic data Form, the Childhood Trauma Questionnaire (CTQ), Arizona Sexual Experience Scale were applied to all participants.

**Results:** In the sociodemographic data form, it was detected that those who have married before the age of 18 tend to have a lower education level (3.02 years), generally live in rural areas, have seven or more siblings have married a relative. In early marriage, exposure to physical and sexual violence by the husband during the first years of marriage were found as 36% and 32%, respectively. In those who had married after the age of 18, these rates were reported as 4% and 5%, respectively. When Arizona Sexual Experience Scale scores were assessed, sexual desire (p=0.012), sexual arousal (p=0.034) and total scores (p=0.048) were found higher in the early married group than those who have married after 18 years. In CTQ, emotional abuse (p=0.04) subscale scores were significantly higher in the early married

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