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Perinatal grief, emergency evaluations: about a case

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Introduction: Perinatal grief is the process that occurs after the loss of a baby, either during pregnancy or during the period immediately before or after childbirth (up to a year). In recent years, the increase in specific training and development of programs focused on perinatal mental health has facilitated the creation of specific action protocols. The case of a 38-year-old woman who suffers a gestational loss during the third month of pregnancy is explored. The presence of personal and family antecedents that suppose risk factors for the adequate elaboration of the duel, raise doubts about the handling of the case.
Objectives: This work has several objectives, including reviewing the published literature on perinatal bereavement in an emergency situation and, on the other hand, presenting a case.
Methods: A bibliographic search has been carried out in the main sources of medical information such as pubmed, uptodate as well as in national and international journals. Likewise, the knowledge and clinical experience of the team has been reviewed in order to expose its own experience in this field, defining specific interventions as well as results.
Results: On evaluation, the patient was conscious and oriented to person, time, and space. Approachable and cooperative. Overall calm, although with intermittent crying. Low mood reactive to vital situation, without apathy, apathy, or anhedonia. No previous episodes of hypomania or mania. Not another major affective clinic. Fluid and coherent speech, formally well constructed without glimpse alterations in the course or content of thought. She denied sensory- perceptual alterations, without showing a listening attitude, or suspicion or any other psychotic or dissociative symptoms. She denied ideas of self-harm, death or self-harm, presenting an adequate request for help and coherent and realistic future plans. Altered biological rhythms with insomnia of three days of mixed pattern evolution, preserved appetite. Judgment of reality preserved.
The grief reaction is an experience that must be normalized after the loss of a loved one. However, given the risk factors presented by the patient, preventive management is established in the face of possible complicated perinatal grief. A new appointment is established in less than 10 days to reassess the case with the perinatal mental health team.
Conclusions: Perinatal mental health is an area of knowledge that could provide assistance to mothers, fathers and family systems plunged into a crisis of perinatal grief.
Prevention in situations of possible complicated perinatal mourning is no less important than treatment when the disorder is already established.

Disclosure of Interest: None Declared

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"Girls Questionnaire for Autism Spectrum Condition" as a screening protocol - pilot study

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Introduction: Currently, we see an increase in the identification and diagnosis of girls with Autism Spectrum Disorder (ASD) over the years, but where are these girls, now adult women, in the Brazilian population? There are barriers that delay and prevent early diagnosis and intervention in women with ASD, such as active attempts to camouflage or mask the signs of ASD in challenges related to social situations. It is known that people with ASD have high rates of depression, self-harm, and suicidal thoughts, which are exacerbated by difficulties in accessing treatment, professional, and family support. In this sense, obtaining the correct diagnosis and treatment for women with ASD is a challenge, as the measures developed and validated are primarily based on male samples and may not be sensitive to the female autism phenotype. With this in mind, the use of screening protocols is a tool that could minimize these impacts, improve quality of life, and drastically change the referral pathways for adult women with ASD.
Objectives: To present the results of the use of the Girls Questionnaire for Autism Spectrum Condition (GQ-ASC) protocol.
Methods: The screening questionnaire, Girls Questionnaire for Autism Spectrum Condition (GQ-ASC), developed by Brown et al., 2020, was used. In this study, a freely translated version was used, as there is no cross-cultural adaptation to Brazilian Portuguese. The questionnaire was sent via an online form, where participants who accepted the Informed Consent Form had access to the GQ-ASC. The study was approved by the Research Ethics Committee under protocol 65890317.9.0000.0065. The questionnaire consists of 21 items, assessed on a 4-point Likert scale (1=Strongly Disagree, 2=Disagree, 3=Agree, 4=Strongly Agree) that evaluate specific clinical characteristics of ASD presentation in adult females across five dimensions: imagination and play, camouflage, sensory sensitivity, socialization, and interests. At the end, the scores are summed, with a total score above 56 indicating a high level of autistic traits, with 80% sensitivity in the author's studies.
Results: 31 women with self-reported ASD diagnoses responded to the questionnaire. The average age was 24.09 years, 80.64% identified as white, 61.29% reported incomplete higher education, and 22.58% postgraduate education, 25.80% identified as bisexual, and 25.80% as heterosexual. For the GQ-ASC questionnaire, 83.87% of the participants scored above 56, with an average final score of 64.12 and a standard deviation of 7.95.
Conclusions: The results of the pilot study demonstrated that the final score of the GQ-ASC corroborates the self-reported diagnosis of ASD in adult women. The GQ-ASC can be considered a screening tool for this population, requiring cross-cultural adaptation to Brazilian Portuguese and validation so that more research and refinement of this tool can improve the quality of life for these women.

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