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The Interconnection among Post-Traumatic Stress Disorder, Sexual Dysfunction, and Severe Postpartum Hemorrhage

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Introduction: Severe postpartum hemorrhage (PPH) can be a life-threatening obstetric complication with enduring consequences beyond the immediate physical risks. Increasing evidence suggests that PPH may trigger psychological trauma, notably post-traumatic stress disorder (PTSD), which itself can negatively affect sexual health. Exploring the interconnection between PTSD and sexual dysfunction in women exposed to severe PPH is crucial for understanding the full spectrum of its impact and guiding comprehensive postnatal care.
Objectives: The aim of this study was to investigate the relationship between post-traumatic stress disorder (PTSD), sexual dysfunction, and severe postpartum hemorrhage (PPH).
Methods: A cross-sectional, descriptive, and analytical study was conducted between January and December 2024 among 49 women who experienced severe PPH between 2017 and 2023 at the Gynecology-Obstetrics Department of Hedi Chaker University Hospital in Sfax.
PTSD was assessed using the Post-Traumatic Stress Disorder Checklist for DSM-5 (PCL-5), with a diagnostic threshold set at a total score ≥ 31. Sexual function was measured using the Female Sexual Function Index (FSFI), with a total score ≤ 26.55 indicating sexual dysfunction. Statistical analysis was performed using SPSS-26 software.
Results: The mean PCL-5 score was 31.81 ± 18.54 (range: 4–71), with 44.9% of participants (22/49) meeting diagnostic criteria for PTSD.
The mean FSFI total score was 19.3 ± 8.15 (range: 0–34.5), with sexual dysfunction observed in 79.6% of participants (n = 39).
A highly significant association was observed between PTSD and sexual dysfunction. Participants with PTSD were significantly more likely to report sexual dysfunction than those without PTSD (44.9% vs 34.7%; p = 0.001).
Conclusions: Severe PPH was associated with a high risk of PTSD, which in turn appears to contribute to marked sexual dysfunction. These findings underscore the importance of targeted PTSD screening in women who have experienced severe PPH to enable early, specialized interventions aimed at preserving both sexual and mental health.

Disclosure of Interest: None Declared

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Exploring Interpersonal Trauma and Post-Traumatic Stress Disorder Across Different Income Level Countries

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Introduction: The consequences of interpersonal trauma and post-traumatic stress disorder (PTSD) are significant individual and societal burdens worldwide.
Objectives: Investigations aiming to clarify the social and economic factors that affect PTSD experiences and perceptions in low- and middle-income countries (LMICs) are scarce.
Methods: We conducted a systematic review of studies on the types and prevalence of interpersonal traumatic events, prevalence of PTSD among individuals exposed to interpersonal trauma, and PTSD interventions in LMICs and compared to in high-income countries (HICs). We screened PubMed, ScienceDirect, and Web of Science for relevant literature according to the Preferred Reporting Items for Systematic Reviews and Meta-analyses (PRISMA) guidelines.
Results: We reviewed 32 studies on interpersonal trauma types, PTSD prevalence, and intervention availability in LMICs. Our findings reveal interpersonal trauma exposure is related to elevated PTSD prevalence, particularly among women and youth in LMICs. Evidence-based interventions such as trauma-focused cognitive behavioral therapy and narrative exposure therapy have been implemented in LMICs; however, research on PTSD treatment remains limited. Compared to HICs, LMICs publish fewer studies and have more limited access to standardized PTSD interventions.
Conclusions: This review highlights the substantial burden of interpersonal trauma in LMICs and low recognition of PTSD among populations who have experienced trauma. However, national and methodological differences may have confounded the findings. Future research should prioritize the development of culturally sensitive interventions and acquire localized knowledge to better detect and treat PTSD in people who have experienced interpersonal trauma.

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Emotional state in children after acute trauma in social disasters: psychological and psychiatric assistance

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Introduction: Acute severe trauma in social disasters is accompanied by multiple stress factors of varying etiology, severity, and duration, often overlapping. In the context of phased care, prolonged hospitalization, and multiple surgical interventions, given the complex nature of the trauma, children must overcome not only physical pain but also emotional pain. Questions arise regarding the need for psychological and psychiatric support: how much and when to include in the treatment and rehabilitation process.

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