Impact of Ante- and Postnatal Depression Screening in Women with HIV: A Scoping Review

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Purpose

 This scoping review aimed to identify existing knowledge regarding the impact of ante- and postnatal depression screening in women with Human Immunodeficiency Virus (HIV) and to adduce the necessity for effective screening.

Defined goals:

- Explore available peer-reviewed literature for the impact of ante- and postnatal depression screening.
- Evaluate importance of screening.
- Evaluate effectiveness of screening tools.

Background

- Maternal depression has been identified as a strong predictor of poor prenatal care with studies showing a higher rate of depressive symptoms in HIV positive pregnant women than in HIV negative pregnant women.
- Globally, in 2020, there were an estimated 19.3 million women living with HIV in 2020. It was shown that in 2021, women living with HIV in the United States was 258,000 and 6-7000 of those women give birth annually.
- Among pregnant women living with HIV, mental health-related factors such as depression could potentially undermine effective antiretroviral therapy (ART) adherence, increased mortality, poor HIV viral suppression consequently impacting vertical transmission of HIV.

Figure 1

Adults and children estimated to be living with HIV -2020





(https://www.unaids.org/en/resources/documents/2021/core-epidemiology-slides)



Note. From Depression, Pregnancy, and HIV: The Case to Strengthen Mental Health Services for Pregnant and Post-Partum Women in Sub-Saharan Africa [Figure], by Stringer et al., 2014, Lancet Psychiatry

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Methods

Search & Selection

- Literature search of CINHAL Complete, Directory of Open Access Journals, MEDLINE, EBSCOHost, and PubMed databases.
- Keywords "HIV" AND "pregnancy" AND "depression". Results screened by title and abstract, then collectively reviewed by
- abstract, methods, and discussion to confirm inclusion.
- Search yielded 53 articles for potential inclusion.
- 12 articles fully met inclusion criteria for this scoping review. Preferred Reported Items for Systematic Review and Meta-analyses reporting guidelines for scoping reviews (PRISMA-ScR) was
- implemented.

Eligibility Criteria

- Peer-reviewed scientific research.
- Approved by the IRB if applicable.
- Published between 01/01/2000 to 10/13/2021.
- Participants must be female humans with HIV-positive serostatus.
- postnatal timeframe.
- Language was not limited.

Synthesis of Results

- Outcomes assessed
 - Maternal adherence to ART
 - CD4+ cell counts
 - Infant outcomes
 - Maternal outcomes.

Results

Characteristics of Sources of Evidence

Level of evidence of the included articles is as follow: two Level I (synthesis of cohort/case-control studies), nine Level II (single cohort/case-controlled studies), one Level III (meta synthesis of qualitative/descriptive studies).

Synthesis of Results

Outcomes Synthesis Table												
	1	2	3	4	5	6	7	8	9	10	11	12
SD	\checkmark											
ART	↓a	↓a	↓a	NE	NE	↓b	↓a	NE	NE	_	↓a	↓a
CD4	↓a	NE	↓a	NE	NE	NE	NE	NE	\checkmark	↓a	↓a	NE
ΙΟ	NE	↓a	_	↓a	↓a	↓b	NE	↓a	NE	NE	NE	↓b
ΜΟ	NE	↓a	↓a	↓a	NE	↓b	NE	NE	NR	↓a	↓b	↓b

LEGEND

 \uparrow = increased; \downarrow = decreased; - = No Change; NE = Not Examined; NR = Not Reported; \checkmark = present; a = Statistically significant findings; b = Statistical significance not reported

SD = screening for depression in mother; ART = adherence to antiretroviral therapy; CD4 = effect on CD4 counts; IO = effect on infantoutcomes; MO = effect on maternal outcomes

1. Brittain et al. (2014); 2. Hegarty et al. (2019); 3. Kapetanovic et al. (2009); 4. Kapetanovic et al. (2014); 5. Mbatha et al. (2020); 6. Psaros et al. (2009); 7. Psaros et al. (2020); 8. Rodriguez et al. (2018); 9. Rubin et al. (2011); 10. Sarna et al. (2019); 11. Sheth et al. (2015); 12. Zhu et al. (2019)

Outcomes must include screening for depression during ante- or

Implications for Practice

- decreased infant wellbeing.
- population.

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• Findings underscore the need to integrate routine screening for perinatal depression in women with HIV.

• A positive finding of depression from screening does have an impact on ART adherence, CD4+ count, and the wellbeing of ante-and postnatal women with HIV and their infant.

The positive screening was indicative of decreased ART adherence, decreased CD4+ count, decreased maternal wellbeing, as well as

• Further research on this topic is needed to understand the implication of specific screening tools and the effect of timely recognition and treatment for this population.

Furthermore, depression screenings could positively impact not only maternal and infant health, but also healthcare costs and provision of care through increased understanding of timely treatment for this

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