Original Research Article

Prenatal Anxiety among Pregnant Women Visiting in Antenatal Care Outpatient Department at Paropakar Maternity and Women's Hospital

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ABSTRACT

Background: Prenatal anxiety is a normal and natural experience. It can affect a person's feelings, thoughts, behavior, and physical well-being. The majority of maternal deaths are due to hemorrhage, infection, unsafe abortion, and eclampsia which is due to knowledge deficit and anxiety. The objective of this study is to assess the level of prenatal anxiety among pregnant women visiting in ANC OPD at Paropakar Maternity and Women's Hospital (PMWH).

Materials & Methods: A descriptive cross-sectional study included 337 respondents from Antenatal Care (ANC) outpatient department of Paropakar Maternity and Women's Hospital, Thapathali, Kathmandu. Ethical clearance was obtained from Nepal Health Research Council and Institutional Review Committee (IRC) of Paropakar Maternity and Women's Hospital, Kathmandu. Prenatal Anxiety Screening Scale was used for data collection. Period of data collection was October 1st to November 1st 2017. Interview technique was used and data was analyzed by using descriptive and inferential statistics. Findings; the finding revealed that mean age of the respondents were 24.68± 2.99 years. 39.5 % respondents were primi gravida. Less than fifty (40.9%) of respondents had minimal anxiety, 42.1% had mild to moderate level anxiety and least (16.9%) of the respondents had severe anxiety. The study showed that there is association between anxiety and gravida ($p<0.05$) of the respondents.

Conclusion: Based on the findings present study revealed that less than fifty percentages of respondents had minimal and mild to moderate level of anxiety and least of the respondent had severe level of anxiety. There was significant association between level of anxiety and gravida of the respondents. Furthermore, it is concluded that prenatal anxiety has relation with the gravid of pregnant women.

Key words: Pregnant women, Anxiety, Gravida, Para

INTRODUCTION

Pregnancy is a normal physiological process. However a pregnant woman face a lot of problems during prenatal period like morning sickness, backache, bowel and bladder problems, changes to skin, fatigue, headache and prenatal anxiety. [1] Prenatal anxiety is a normal and natural experience it may affect a person's feelings, thoughts, behaviors, and physical well-being. [2] The estimated global prevalence of anxiety disorder among general population in 2015 is 3.6%. [3] The occurrence of anxiety and depression during pregnancy is 10-15% in developed world. [4]

A study conducted in China showed that the prevalence rates for prenatal anxiety were 22.57 %, 17.41 %, and 21.04% at 1st

trimester, 2nd trimester, and 3rd trimester, respectively. [5] Similarly a research from India revealed that 8% of prenatal women had severe, 22 % had moderate and 70 % had mild level of anxiety. [6] Some study showed that different factors play role in developing prenatal anxiety such as history of domestic violence, personal history of mental illness, unplanned or unwanted pregnancy, past and present pregnancy complications and pregnancy loss [7] less educated, lower income and mothers of many children [8] being nulliparous and young and nuclear family. [9] Another study revealed that family preference for male child [10] and mother having only girls and repeated child bearing for sons [10] also leads for developing prenatal anxiety.

High levels of stress and anxiety during pregnancy have been linked to preterm birth and low birth weight. [12] The majority of maternal deaths are due to hemorrhage, infection, unsafe abortion, and eclampsia. It might be due to knowledge deficit and anxiety. [4] Pregnancy is a time of confusion, fear, sadness, anxiety, stress, and even depression. Mental health is often neglected even important component of reproductive health. Lacks of timely & systematic screening, most of the antenatal mental disorders are not detected. [13]

Maternity care is still poor in Nepal. Just one third of women nationwide have access to Skill Birth Attendance. [14] It is important to address to reduce the stress among the pregnant women. This can be made possible by providing counseling to the women regarding different aspects of pregnancy, possible pregnancy related complications. Providing effective counseling reduces the level of stress which in turn reduces the adverse outcomes associated with stress. [14] If this is not properly managed and controlled, it may develop suicide, pregnancy termination, postpartum anxiety in pregnant mother and low birth weight, premature birth, low APGAR, poor adaptation outside womb in baby. [16] Inadequate referral linkage, poor quality care, high cost for transportation,

level of illiteracy, cultural biases and gender bias are contributing factors for poor utilization of antenatal care. [17] Therefore this study was conducted to assess the level of prenatal anxiety among pregnant women.

Purpose of study

To assess the level of prenatal anxiety among pregnant women visiting in ANC OPD at Paropakar Maternity and Women's Hospital and to determine association between level of prenatal anxiety and selected socio demographic and obstretic variables among pregnant women.

METHODS

Study design and period

The descriptive cross-sectional study design was carried out between 2017 October 1st to November 1st.

Study area

The study was conducted in the Paropakar Maternity and Women's Hospital, Thapathali, Kathmandu. It is a tertiary central level hospital where treatment is carried out to women only and as there are high number of patient flow in this hospital. Also, it is situated in the center of the capital which is easily accessible to collect detail data and information from pregnant women.

Respondents

Inclusion criteria for respondents were (1) Pregnant women visiting Antenatal care outpatient department; (2) those who were willing to participant in study; (3) those who can understand and speak Nepalese language.

Instrument

The demographic and obstetric information related questionnaire was developed by researcher her-self. The demographic variables included age, ethnicity, religion, educational level, monthly family income, occupation. Obstetric information related question include gravida, gestational age and complication during pregnancy. Perinatal Anxiety Screening Scale (PASS) was used to measure the level of anxiety that was developed by Government of Western Australia, Department of Health that is

divided as: Not at all= 0; Sometime= 1;Often= 2; Almost all= 3

On the basis of the total marks obtained by the respondent's severity of anxiety was measured using the standardized scales listed below and anxiety diagnoses:

Minimal anxiety (PASS score of 0-20); Mild-moderate anxiety (score of 21-41) and Severe anxiety (score of 42-93)

Data collection method

First list of pregnant women those who receive services from ANC OPD of Maternity Hospital was identified than 337 pregnant women was selected purposively by calculating sample size formula. Verbal consent was taken from all respondents before data collection. Data was collected by interview technique.

Data quality assurance

Data quality was assured by consulting subject expert and extensive literature review. After that questionnaire on English language was translated into Nepali language and it was pretested in 10% of the total sample population having similar characteristics in the similar area of Paropakar Maternity and Women's Hospital. Those who were enrolled in pretesting; those were excluded in main study. After pretest some questions were modified.

Data processing and Analysis

Data were thoroughly checked for accuracy, completeness and consistency. The collected data were organized and coded. Data was entered and analysis in the Statistical Package for the Social Sciences Software (SPSS 20 version). Descriptive statistics were use to examine the demographic variable and obstetric information. Chi square test was done to determine the association between level of prenatal anxiety and selected socio demographic and obstetric variables.

Ethical consideration

Written approval sheet was obtained from Nepal Health Research Council (NHRC) and Institutional Review Committee (IRC-PMWH) by submitting the official written documents. All the process was carried out after getting approval letter from Asian College for Advance Studies. Verbal consent was taken from all respondents before data collection. The respondents could withdraw from the study at any time without giving reason and without fear. The privacy and confidentiality of the respondent was maintained throughout the study and thereafter. The author would be responsible for obtaining informed consent from respondents in this research study.

FINDINGS OF THE STUDY

Table 1: Socio-Demographic Information N=337

Socio demographic		Frequency (n)	Percentage (%)
Age (in years)	<21 years	67	19.9
	22-28 years	231	68.5
	>29 years	39	11.6
Mean ± SD= 24.68 ± 2.99 year, min- 18 year, max- 33 year			
Ethnicity	Brahmin	118	35.0
	Chhetri	142	42.1
	Newar	60	17.8
	Others	17	5.1
Others-Rai, Limbu, Gurung			
Religion	Hindu	271	80.4
	Buddhist	22	6.5
	Christian	44	13.1

SD= Standard Deviation,   Min. = Minimum,   Max. = Maximum

Table 1 shows that out of 337 respondents, 11.6% were aged above 29 years and 68.5 % respondents were aged between 22-28 years. Mean age of the students was 24.68 years with 2.99 SD.

Among 337 respondents less than fifty of the respondents (42.1%) were Chhetri ethnicity, one third of the respondents (35%) were Brahmin ethnicity, minority of the respondents (17.8%) were Newar, least of the respondents (5%) were Rai, Limbu, Gurung. Majority of the respondents (80.4%) were Hindu religion, least of the respondents (6.5%) were Buddhist, and minority of the respondents (13.1%) were Christian.

With regard to education status, least (5.9%) of the respondents were illiterate, most of the respondents (94.1%) were literate. Majority of the respondents (91.4%) had monthly income of more than Rs.10000/-, least of the respondents (5.6%) had monthly family income of Rs.5000/--Rs.10000/-, least of the respondents (3.0%) had monthly

income of Rs.5000/-. Regarding occupation less than fifty of the respondents (39.2%) were involved in agriculture. one third of the respondents (31.1%) were involved in service, around one fourth (27%) were involved in housewife, least of the respondents (2.7%) were involved in business.

Table 2: Socio-Demographic Information N= 337

Socio demographic	Frequency (n)	Percentage (%)
Education Level		
Illiterate	20	5.9
Literate	317	94.1
If literate, educational level (n=317)		
-Able to read and write	68	21.5
-Primary level	72	23
-Secondary level	23	7.2
-Higher secondary level	97	30.6
-Bachelor level and above	56	17.7
Monthly family income		
Rs.5000/-	10	3.0
Rs.5000-Rs.10000/-	19	5.6
Above Rs.10000/-	308	91.4
Occupation		
Service	105	31.1
Agriculture	132	39.2
House wife	91	27.0
Business	9	2.7

Table 3: Obstetrics Data of Respondents N = 337

Obstetric information		Frequency (n)	Percentage (%)
Gravida	Primi	133	39.5
	Second	117	34.7
	Third	87	25.8
Trimester	1st trimester	11	3.3
	2nd trimester	209	62.0
	3rd trimester	117	34.7
Complications during last pregnancy	Present	13	3.9
	Not present	324	96.1

Regarding gravida 39.5% were primi gravida, 34.7% were second time pregnant and 25.8 % were third time pregnant. Almost half of the respondents (62.0%) were in 2nd trimester, one third of the respondents (34.7%) were in 3rd trimester, and least of the respondents (3.3%) were in 1st trimester. Almost all of the respondents (96.1%) did not have complications during last pregnancy; least of the respondents (3.9%) had complications during last pregnancy.

Table 4: Level of anxiety symptoms of all the respondents   N=337

S.N	Variables	Not at all	Sometimes	Often	Almost Always	Mean SD
1	Worry about the baby Pregnancy	102 30.3%	188 55.8%	45 13.4%	2 0.6%	0.84 0.661
2	Fear that harm will come to the baby	105 31.2%	196 58.2%	35 10.4%	1 0.3%	0.80 0.623
3	A sense of dread that something bad is going to happen	89 26.4%	185 54.9%	58 17.2%	5 1.5%	0.94 0.702
4	Worry about many things	99 29.4%	186 55.2%	46 13.6%	6 1.8%	0.88 0.699
5	Worry about the future	129 38.3%	151 44.8%	44 13.1%	6 1.8%	0.80 0.741
6	Feeling overwhelmed	136 40.4%	151 44.8%	44 13.1%	6 1.8%	0.76 0.742
7	Really strong fears about things, e.g.: needles, blood, birth, pain, etc.	123 36.5%	150 44.5%	54 16.0%	10 3.0%	0.85 0.790
8	Sudden rushes of extreme fear or discomfort	122 36.2%	162 48.1%	44 13.1%	8 2.4%	0.82 0.755
9	Repetitive thoughts that are difficult to stop or control	127 37.7%	155 46%	47 13.9%	8 2.4%	0.81 0.760
10	Difficulty sleeping even when I have the chance to sleep	100 29.7%	167 49.6%	61 18.1%	9 2.7%	0.94 0.763
11	Having to do things in a certain way or order	118 35.0%	161 47.8%	54 16%	4 1.2%	0.83 0.729
12	Wanting things to be perfect	98 29.1%	181 53.7%	48 14.2%	10 3%	0.91 0.739
13	Needing to be in control of things	115 34.1%	167 49.6%	44 13.1%	11 3.3%	0.85 0.764
14	Difficulty stopping checking or doing things	102 30.3%	185 54.9%	43 12.8%	7 2.1%	0.87 0.705
15	Feeling jumpy or easily startled	111 32.9%	178 52.8%	43 12.8%	5 1.5%	0.83 0.699
16	Concerns about repeated Thoughts	99 29.4%	188 55.8%	40 11.9%	10 3%	0.88 0.721
17	Being 'on guard' or needing to watch out for things	101 30%	182 54%	46 13.6%	8 2.4%	0.88 0.721
18	Upset about repeated memories, dreams or nightmares Always	90 26.7%	193 57.3%	48 14.2%	6 1.8%	0.91 0.689

	Table 4 to be continued…					
19	Worry that I will embarrass myself in front of others	98 29.1%	183 54.3%	51 15.1%	5 1.5%	0.89 0.701
20	Fear that others will judge me negatively	92 27.3%	195 57.9%	41 12.2%	9 2.7%	0.90 0.702
21	Feeling really uneasy in crowds	99 29.4%	184 54.6%	46 13.6%	8 2.4%	0.89 0.717
22	Avoiding social activities because I might be nervous	97 28.8%	186 55.2%	46 13.6%	8 2.4%	0.90 0.714
23	Avoiding things which concern me	103 30.6%	182 54%	46 13.6%	6 1.8%	0.87 0.705
24	Feeling detached like you're watching yourself in a movie	92 27.3%	189 56.1%	43 12.8%	13 3.9%	0.93 0.743
25	Losing track of time and can't remember what Happened	82 24.3%	192 57%	54 16%	9 2.7%	0.97 0.715
26	Difficulty adjusting to recent changes	91 27%	176 52.2%	67 19.9%	3 0.9%	0.95 0.709
27	Anxiety getting in the way of being able to do things	96 28.5%	219 65%	22 6.5%	0	0.78 0.550
28	Racing thoughts making it hard to concentrate	83 24.6%	179 53.1%	67 19.9%	8 2.4%	1.0 0.736
29	Fear of losing control	69 20.5%	203 60.2%	64 19%	1 0.3%	0.99 0.638
30	Feeling panicky	72 21.4%	190 56.4%	66 19.6%	9 2.7%	1.04 0.719
31	Feeling agitated	53 15.7%	183 54.3%	91 27%	10 3%	1.17 0.720

Data in the above Likert scale PASS (Perinatal Anxiety Screening Scale) shows that among the 31 response on anxiety symptoms of all the respondents, the first item "Worry about the baby pregnancy" has received mean score value 0.84± 0.661 in which (102) 30.3% of the respondent had this symptom not at all, (188) 55.8% had sometimes, (45) 13.4% had often and (2) 0.6% had almost always. Then, "Fear that harm will come to the baby" received mean score value 0.80 ± 0.623 in which (105) 31.2% of the respondent had this symptom not at all, (196) 58.2% had sometimes, (35) 10.4% has often and (1) 0.3% had almost always. Similarly, "A sense of dread that something bad is going to happen" had mean score value 0.94 ± 0.702 in which (89) 26.4% of the respondent had this symptom not at all, (185) 54.9% had sometimes, (58) 17.2% has often and (5) 1.5% had almost always. "Worry about many things" received mean score value 0.88 ± 0.699 in which (99) 29.4% of the respondent had this symptom not at all, (186) 55.2% had sometimes, (46) 13.6% has often and (6) 1.8% had almost always. Similarly, "Worry about the future" received mean score value 0.80 ± 0.741 in which (129) 38.3% of the respondent had this symptom not at all, (151) 44.8% had sometimes, (44) 13.1% has

often and (6) 1.8% had almost always. "Feeling overwhelmed" received mean score value 0.76 ± 0.742 in which (136) 40.4% of the respondent had this symptom not at all, (151) 44.8% had sometimes, (44) 13.1% has often and (6) 1.8% had almost always.

Similarly, "Really strong fears about things, e.g.: needles, blood, birth, pain, etc." received mean score value 0.85 ± 0.790 in which (123) 36.5% of the respondent had this symptom not at all, (150) 44.5% had sometimes, (54) 16.0% has often and (10) 3.0% had almost always. "Sudden rushes of extreme fear or discomfort" received mean score value 0.82 ± 0.755 in which (122) 36.2% of the respondent had this symptom not at all, (162) 48.1% had sometimes, (44) 13.1% has often and (8) 2.4% had almost always. Similarly, "Repetitive thoughts that are difficult to stop or control" received mean score value 0.81 ± 0.760 in which (127) 36.2% of the respondent had this symptom not at all, (155) 46.0% had sometimes, (47) 13.9% has often and (8) 2.4% had almost always. "Difficulty sleeping even when I have the chance to sleep" received mean score value 0.94 ± 0.463 in which (100) 29.7% of the respondent had this symptom not at all, (167) 49.6% had sometimes, (61) 18.1% has

often and (9) 2.7% had almost always. Similarly, "Having to do things in a certain way or order" received mean score value 0.83 ± 0.729 in which (118) 35.0% of the respondent had this symptom not at all, (161) 47.8% had sometimes, (54) 16.0% has often and (4) 1.2% had almost always. "Wanting things to be perfect" received mean score value 0.91 ± 0.739 in which (98) 29.1% of the respondent had this symptom not at all, (181) 53.7% had sometimes, (48) 14.2% has often and (10) 3% had almost always. Similarly, "Needing to be in control of things" received mean score value 0.85 ± 0.764 in which (115) 34.1% of the respondent had this symptom not at all, (167) 49.6% had sometimes, (44) 13.1% has often and (11) 3.3% had almost always. "Difficult stopping checking or doing things" received mean score value 0.87 ± 0.705 in which (102) 30.3% of the respondent had this symptom not at all, (185) 54.9% had sometimes, (43) 12.8% has often and (7) 2.1% had almost always.

Similarly, "Feeling jumpy or easily startled" received mean score value 0.83 ± 0.699 in which (111) 32.9% of the respondent had this symptom not at all, (178) 52.8% had sometimes, (43) 12.8% has often and (5) 1.5% had almost always. "Concerns about repeated thoughts" received mean score value 0.88 ± 0.721 in which (99) 29.4% of the respondent had this symptom not at all, (188) 55.8% had sometimes, (40) 11.9% has often and (10) 3% had almost always. Similarly, "Being 'on guard' or needing to watch out for things" received mean score value 0.88 ± 0.721 in which (101) 30.0% of the respondent had this symptom not at all, (182) 54.0% had sometimes, (46) 13.6% has often and (8) 2.4% had almost always. "Upset about repeated memories, dreams or nightmares always" received mean score value 0.91 ± 0.689 in which (90) 26.7% of the respondent had this symptom not at all, (193) 57.3% had sometimes, (48) 14.2% has often and (6) 1.8% had almost always. Similarly, "Worry that I will embarrass myself in front of others" received mean

score value 0.89 ± 0.701 in which (98) 29.1% of the respondent had this symptom not at all, (183) 54.3% had sometimes, (51) 15.1% has often and (5) 1.5% had almost always. "Fear that others will judge me negatively" received mean score value 0.90 ± 0.702 in which (92) 27.3% of the respondent had this symptom not at all, (195) 57.9% had sometimes, (41) 12.2% has often and (9) 2.7% had almost always.

Similarly, "Feeling really uneasy in crowds" received mean score value 0.89 ± 0.717 in which (99) 29.4% of the respondent had this symptom not at all, (184) 54.6% had sometimes, (46) 13.6% has often and (8) 2.4% had almost always. "Avoiding social activities because I might be nervous" received mean score value 0.90 ± 0.714 in which (97) 28.8% of the respondent had this symptom not at all, (186) 55.2% had sometimes, (46) 13.6% has often and (8) 2.4% had almost always. Similarly, "Avoiding things which concern me" received mean score value 0.87 ± 0.705 in which (103) 30.6% of the respondent had this symptom not at all, (182) 54.0% had sometimes, (46) 13.6% has often and (6) 1.8% had almost always. "Feeling detached like you're watching yourself in a movie" received mean score value 0.93 ± 0.743 in which (92) 27.3% of the respondent had this symptom not at all, (189) 56.1% had sometimes, (43) 12.8% has often and (13) 3.9% had almost always. Similarly, "Losing track of time and can't remember what happened" received mean score value 0.97 ± 0.715 in which (82) 24.3% of the respondent had this symptom not at all, (192) 57.0% had sometimes, (54) 16.0% has often and (9) 2.7% had almost always. "Difficulty adjusting to recent changes" received mean score value 0.95 ± 0.709 in which (91) 27.0% of the respondent had this symptom not at all, (176) 52.2% had sometimes, (67) 19.9% has often and (3) 0.9% had almost always.

Similarly, "Anxiety getting in the way of being able to do things" received mean score value 0.78 ±0.550 in which (96) 28.5% of the respondent had this symptom

not at all, (219) 65.0% had sometimes, (22) 6.5% has often and (0) 0.0% had almost always. "Racing thoughts making it hard to concentrate" received mean score value 1.0 ± 0.736 in which (83) 24.6% of the respondent had this symptom not at all, (179) 53.1% had sometimes, (67) 19.9%0 has often and (8) 2.4% had almost always. Similarly, "Fear of losing control" received mean score value 0.99 ± 0.638 in which (69) 20.5% of the respondent had this symptom not at all, (203) 60.2% had sometimes, (64) 19.0% has often and (1) 0.3% had almost always. "Feeling panicky" received mean score value

1.04 ±0.719 in which (72) 21.4% of the respondent had this symptom not at all, (190) 56.4% had sometimes, (66) 19.6% has often and (9) 2.7% had almost always.

Similarly, "Feeling agitated" received mean score value 1.17 ± 0.720 in which (53) 15.7% of the respondent had this symptom not at all, (183) 54.3% had sometimes, (91) 27.0% has often and (10) 3.0% had almost always.

Table 5: Level of Anxiety among the Respondents N=337

Variables	Frequency (n)		Percentage (%)
	Minimal	138	40.9
Anxiety level	Mild-moderate	142	42.2
	Severe	57	16.9
Total		337	100

The data in the above table shows that out of 337 respondents, less than fifty (40.9%) of respondents had minimal anxiety. Less than fifty (42.1%) had mild to moderate level anxiety and least of the respondents (16.9%) had severe anxiety.

Table 6: Association between prenatal anxiety among pregnant woman and selected socio demographic variables N=337

Variables	Level of anxiety				
	Minimal anxiety No (%)	Mild- moderate anxiety No (%)	Severe anxiety No (%)	χ2	p-value
Age in years					
<21 years	0 (0.0)	40 (59.7)	27 (40.3)	70.779	<0.001
22-28	113 (48.9)	90 (39.0)	28 (12.8)		
>29	25 (64.1)	12 (30.8)	2 (5.1)		
Ethnicity					
Brahmin	47 (39.8)	51 (43.2)	20 (16.9)	10.966	0.089
Chhetri	65 (45.8)	53 (37.3)	24 (16.9)		
Newar	25 (41.7)	27 (45.0)	8 (13.3)		
Others	1 (5.9)	11 (64.7)	5 (29.4)		

Table 6 shows that there was significant association between prenatal anxiety among pregnant woman and age (p= <0.001).

Table 7: Association between prenatal anxiety among pregnant woman and selected Obstetrics variables   N=337

Variables	Level of anxiety			χ2	p-value
	Minimal anxiety No. (%)	Mild- moderate anxiety No (%)	Severe anxiety No (%)		
Gravida					
Primigravida	2 (1.5)	80 (60.2)	51 (38.3)	163.514	<0.001
Second	73 (62.4)	42 (35.9)	2 (1.7)		
Third	63 (72.4)	20 (23.0)	4 (4.6)		
Complications during previous pregnancies					
Yes	5 (38.5)	7 (53.8)	1 (7.7)	1.140	0.565
No	133 (41.0)	135 (41.7)	56 (17.3)		

Table 7 shows that there was significant association between prenatal anxiety among pregnant woman and gravida (p= <0.001).

DISCUSSION

Present study showed that 68.5 % of pregnant women were 22-28 years of age & mean age was 24.68 years; it is supported by the findings of the study conducted by Pantha et al where 76% were 20-29 years of age and the mean age was 25.96 years. [16] Majority (80.4 %) of pregnant women were Hindu & 94.1 was literate, it is supported by the findings of the study conducted by Shrestha & Awasti where 88 % were Hindu & 95 % were literate. [18] 39.5% were primi

gravida, it is supported by the findings of the study conducted by Silwal et al [6] where 38 % were primi gravida.

Present study showed that prevalence of anxiety among pregnant women was less than fifty (40.9%) of respondents had minimal anxiety. Less than fifty (42.1%) had mild to moderate level anxiety and least of the respondents (16.9%) had severe level of anxiety. It is supported by the findings of study conducted by Pantha et al [16] where the prevalence of stress during pregnancy was 35% in the first trimester and 34.2% in the third trimester.

Present study showed that there is association between gravida of the respondents and the level of anxiety which is similar to the study conducted by Shakya et al has shown that the anxiety and depression level was high among the primi gravida than the multi-gravida. [18]

CONCLUSION

Prenatal anxiety can affect a person's feelings, thoughts, behavior, and physical well-being. Based on the findings present study revealed that less than fifty percentages of respondents had minimal and mild to moderate level of anxiety and least of the respondent had severe level of anxiety. There was significant association between level of anxiety and gravida of the pregnant women. Furthermore, it is concluded that prenatal anxiety has relation with the gravid of pregnant women.

Conflicts of Interest

The authors declared that there are no conflicts of interest.

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