

# Effectiveness of psychoeducation interventions on women with gestational diabetes- An integrative review

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### Introduction

Gestational Diabetes Mellitus (GDM): is a type of diabetes that happens during pregnancy.

The main aim of current interventions is controlling glycaemic level through:

- lifestyle modifications: diet & exercise.
- pharmacological treatment.

However, managing GDM can be difficult. Pregnant women who are newly diagnosed with GDM may experience high level of distress and be less able to self-manage their GDM condition.

## Aim

This integrative review aimed to synthesize and critique published literature of studies investigating the effects of psychoeducational interventions on women's self-efficacy, knowledge of GDM, self-care behaviour, depression, anxiety, and birthing outcomes; infant birth weight, type of birth, preterm birth, and admission to Neonatal Intensive Care Unit (NICU).

## **Method**

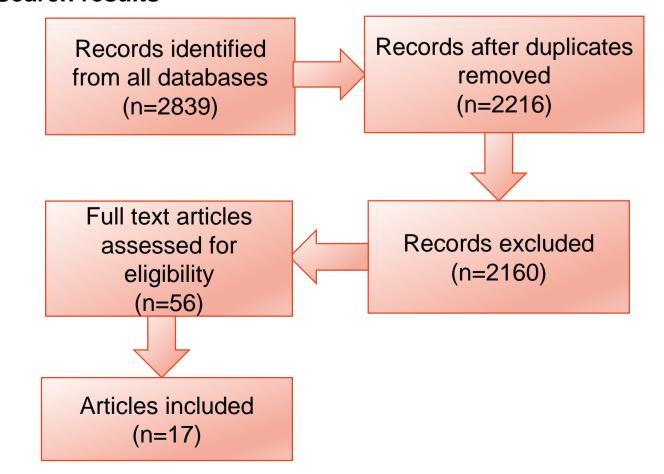
## **Electronic databases**

- MEDLINE
- CINAHL
- Cochrane Library
- PsycINFO
- Maternity and Infant Care
- Database (MIDIRS)
- Saudi Digital Library (SDL)

## Inclusion criteria

- Written in English or Arabic language
- Primary published research
- Only pregnant women diagnosed with GDM
- Studies examined single or multi-component educational interventions
- Studies published from 2009 to now

## **Search results**



#### **Results**

Mixed results were found which could be due to variations in type, duration, frequency, and delivery methods of the interventions.

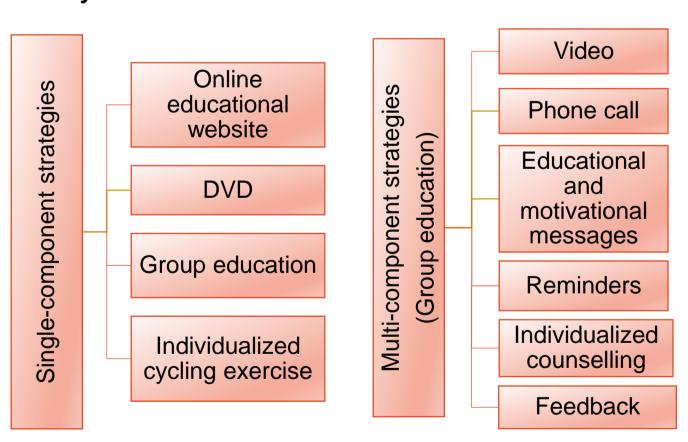
## Types of the Interventions

- Most of studies used educational interventions.
- · One study used cycling exercise.
- One study Used deep breathing exercise.
- One study used individualized counselling.
- One study used cognitive behavioural therapy.

# **Duration and Frequency of the interventions**

- Not all the included studies reported the duration of the intervention sessions.
- Two-hour sessions were the most common in studies which reported the duration.
- The total duration of the interventions varied from 15-30 minutes to six months, with four weeks duration the most frequently used.
- The number of sessions varied from one to six sessions, with two sessions were the most common.

## **Delivery methods of the interventions**



## **Discussion**

- The effects of the interventions on the review's outcomes were inconsistent.
- Multi-component interventions showed better outcomes than single-component interventions on the review's outcomes.
- We could not find psychoeducational interventions, however, studies that involved breathing exercise and cognitive behavioural therapy had positive effects on depression and anxiety levels.
- The evidence is inconclusive and very few studies included psychological outcomes. Thus, more rigorous trials are needed.