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Repercussions on the health of adolescent women due to early pregnancy: a narrative review

Repercusiones sobre la salud de mujeres adolescentes debido a embarazo temprano: una revisión narrativa

Repercussões na saúde da mulher adolescente devido a gravidez precoce: uma revisão narrativa

ABSTRACT

Objective: To discuss, from a theoretical reflection, the repercussions on the health of adolescent women due to early pregnancy. **Methods:** This is a qualitative, descriptive study of the theoretical-reflective type developed from the narrative review approach with national and international scientific articles available in the LILACS, PUBMED and SciELO databases. **Results:** Among the repercussions resulting from teenage pregnancy that women may be exposed to, it was identified: obstetric complications, unsafe abortion, hypertensive syndromes and depressive conditions. In addition, sociodemographic issues, early onset of sexual life and lack of reproductive planning are among the factors associated with the occurrence of teenage pregnancy. **Conclusion:** The findings in the literature point to a slight fall in teenage pregnancy in Brazil, but the numbers are still high. Despite the understanding of health professionals about the importance of sex education programs for families, there is still a lack of efficient reception for young people.

DESCRIPTORS: Pregnancy in adolescence; Pregnancy complications; Parturition; Birth weight; Sexual maturation.

RESUMEN

Objetivo: Discutir, desde una reflexión teórica, las repercusiones en la salud de la mujer adolescente por el embarazo precoz. **Métodos:** Se trata de un estudio cualitativo, descriptivo de tipo teórico-reflexivo desarrollado a partir del enfoque de revisión narrativa con artículos científicos nacionales e internacionales disponibles en las bases de datos LILACS, PUBMED y SciELO. **Resultados:** Entre las repercusiones derivadas del embarazo adolescente a las que pueden estar expuestas las mujeres, se identificaron: complicaciones obstétricas, aborto inseguro, síndromes hipertensivos y condiciones depresivas. Además, las cuestiones sociodemográficas, el inicio temprano de la vida sexual y la falta de planificación reproductiva se encuentran entre los factores asociados con la ocurrencia del embarazo adolescente. **Conclusión:** Los hallazgos en la literatura apuntan a una leve caída en el embarazo adolescente en Brasil, pero las cifras siguen siendo altas. A pesar de la comprensión de los profesionales de la salud sobre la importancia de los programas de educación sexual para las familias, aún existe una falta de recepción eficiente para los jóvenes.

DESCRIPTORES: Embarazo em adolescência; Complicaciones del embarazo; Parto; Peso al nacer; Maduración sexual.

RESUMO

Objetivo: Discutir, a partir de uma reflexão teórica, as repercussões na saúde da mulher adolescente devido a gravidez precoce. **Métodos:** Trata-se de um estudo qualitativo, descritivo do tipo teórico-reflexivo desenvolvido a partir da abordagem de revisão narrativa com artigos científicos nacionais e internacionais disponíveis nas bases de dados LILACS, PUBMED e SciELO. **Resultados:** Entre as repercussões decorrentes da gravidez na adolescência que a mulher pode estar exposta, identificou-se: complicações obstétricas, aborto inseguro, síndromes hipertensivas e quadros depressivos. Além disso, questões sociodemográficas, início precoce da vida sexual e ausência de planejamento reprodutivo estão entre os fatores associados à ocorrência da gravidez na adolescência. **Conclusão:** Os achados da literatura apontam uma leve queda da gravidez na adolescência no Brasil, mas os números ainda são altos. Apesar do entendimento dos profissionais de saúde sobre a importância de programas de educação sexual para as famílias, ainda falta um acolhimento eficiente para o público jovem.

DESCRIPTORIOS: Gravidez na adolescência; Complicações na gravidez; Parto; Peso ao nascer; Maturidade sexual.

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INTRODUCTION

Adolescence comprises a stage of important physical and psychological changes, corresponding to a period of transformations and changes between the childhood experience in which the teenager is used to and a new phase called adolescence, which does not have the necessary monitoring it can result in lifelong consequences.¹⁻²

In Brazil, this stage comprises the period of age between 12 and 18 years according to the Statute of the Child and Adolescent (ECA) and is characterized as a transition from childhood to adulthood that will have the consequence of changing the individual when developing physical, mental, emotional, sexual, social and identity formation changes. This entire transformation phase is characterized by the puberty process and this process only ends when the individual completes the growth phase, creating their social identity.³

From this perspective, sexual education during adolescence is essential due to the need for the adolescent to acquire the necessary security, to realize that their sexual life is beginning and that they have support - whether from the family, teachers or health professionals - to receive timely information on the subject,⁴ because the teenage pregnancy rate in Brazil is higher than the global one, and between 2010 and 2015, according to data from the World Health Organization (WHO), the global teenage pregnancy rate was 46 per 1.000 girls.⁵

Due to several factors that can influence teenage pregnancy, the subject has become a public health concern due to the complications it can cause for the health of young mothers and their children.⁶ Obstetric complications stand out, but the issue of illegal and unsafe abortion, anemia, malnutrition, overweight, hypertension, among others, is also problematic.⁶⁻⁷

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Precarious socioeconomic conditions, associated with difficult access to services and adequate information contribute to the problem. In order to develop measures to deal with this phenomenon, health professionals are of significant importance, as they occupy strategic places at all levels of health care. In addition, they can be present not only in specific health services, but also in other environments in which adolescents live, especially at school.⁷

However, the absence or inefficiency of strategic approaches and priority actions on this topic in commonly neglected populations are issues that make adolescents even more vulnerable with regard to the right to life and health. Pregnancy eminently affects the trajectories of these lives by pushing girls into motherhood before they are physically, emotionally or financially prepared, sometimes perpetuating intergenerational cycles of poverty.⁸

Thus, it is necessary the participation of an entire multidisciplinary team in assisting adolescents in order to plan sexual education strategies and interventions to prevent early pregnancy in this public.⁶

Therefore, this study aims to discuss, from a theoretical reflection, the repercussions on the health of adolescent women due to early pregnancy. From this perspective, the question that guided this investigative proposal stands out: what are the repercussions on adolescent health due to early pregnancy?

METHODS

This is a qualitative, descriptive, theoretical-reflective study developed from the narrative review approach with national and international scientific articles that address the repercussions on the health of adolescent women as a result of early pregnancy.

Narrative review articles are broad publications suitable for describing and

discussing the development or state of the art of a particular subject, from a theoretical or conceptual point of view. These are texts that constitute the analysis of scientific literature in the interpretation and critical analysis of the author.⁹

To search for productions, the following research question was asked: “What are the repercussions on the adolescent’s health due to early pregnancy?”. Thus, articles that addressed teenage pregnancy and its impact on the health of adolescent women were selected.

The articles were searched from August to October 2020 through the Latin American and Caribbean Literature in Health Sciences (LILACS), PUBMED and Scientific Electronic Library Online (SciELO) databases, refining the search

for the period of 2006 to 2019 and using the following inclusion criteria: articles available online; in Portuguese, English or Spanish; and original research or literature review.

The study was divided into stages: search of articles in databases; reading the titles and abstracts to verify the convergence of the material to the study theme and the inclusion criteria; reading the entire article; search and reading of original studies found through the final references of articles from the search in the databases. After all readings, the materials were compiled, followed by an analysis of the repercussions on the health of adolescent women as a result of early pregnancy for reflection and, finally, the elaboration of the reflective summaries of the study.

With the selected articles, the narrative synthesis was used for data analysis and discussion.

RESULTS

Eleven articles were used in this narrative review (Chart 1), and the results were interpreted and synthesized through a comparison of the data evidenced in the analysis of the articles.

DISCUSSION

Teenage pregnancy is a worldwide occurrence, but it is more prevalent in developing countries. When evaluating the fertility rate in Brazil, from the 2000s onwards, a decline in the rate of preg-

Quadro 1 – Distribuição dos artigos de acordo com o periódico, ano de publicação, autor(es), título, delineamento e resultados. Brasília, Distrito Federal, Brasil, 2020.

	PERIÓDICO E ANO DE PUBLICAÇÃO	AUTOR(ES)	TÍTULO	DELINEAMENTO	RESULTADOS
Artigo 1	Revista da Associação Médica Brasileira, 2019	Monteiro DLM, Martins JAFS, Rodrigues NCP, Miranda FRD, Lacerda IMS, Souza FM et al.	Adolescent pregnancy trends in the last decade	Estudo Epidemiológico	A gravidez na adolescência no Brasil está em lento declínio, principalmente entre as mães de 10 a 14 anos, e está associada ao IDH, exceto no Nordeste.
Artigo 2	Cadernos Saúde Coletiva, 2019	Pinheiro YT, Pereira NH, Freitas GDM	Fatores associados à gravidez em adolescentes de um município do nordeste do Brasil	Transversal	A gravidez na adolescência está associada a condicionalidades sociodemográficas, de comportamento sexual e de planejamento familiar.
Artigo 3	Revista Brasileira de Ginecologia e Obstetrícia, 2009	Santos GHN, Martins MG, Sousa MS, Batalha SJC	Impacto da idade materna sobre os resultados perinatais e via de parto	Quantitativo	A gravidez na adolescência esteve associada a início tardio e menor número de consultas o pré-natal, uso de abortivo no início da gestação, baixa escolaridade, ausência de companheiro, baixo peso ao nascer, prematuridade e menor incidência de desproporção céfalo-pélvica e pré-eclâmpsia.
Artigo 4	Revista Brasileira de Saúde Materno Infantil, 2017	Bacelar EB, Costa COM, Gama SGN, Amaral MTR, Almeida AHV	Fatores associados à Síndrome Hipertensiva Específica da Gestação em puérperas adolescentes e adultas jovens da região Nordeste do Brasil: análise múltipla em modelos hierárquicos	Transversal	Identificou-se associações significativas entre SHEG e puérperas adolescentes e adultas jovens sem companheiro, com baixa escolaridade e antecedentes clínicos de risco.

Artigo 5	Revista Rene, 2010	Silva MP, Santos ZMSA, Nascimento RO, Fonteles JL	Avaliação das condutas de prevenção da Síndrome Hipertensiva Específica da Gravidez entre adolescentes	Quantitativo	As adolescentes informaram precárias condições socioeconômicas, baixa escolaridade, riscos para a ocorrência da SHEG, fragmentação do saber e autocuidado inadequado em relação à prevenção deste agravo.
Artigo 6	Revista Chilena de Obstetrícia y Ginecologia, 2018	Parra EJJ, Herrada CHL, Parra DML	El recién-nascido de madre adolescente	Retrospectivo	A maioria dos recém-nascidos nasceram a termo e por cesariana. Não houve mortes.
Artigo 7	Revista de Psiquiatria Clínica, 2010	Pereira PK, Lovisi GM, Lima LA, Legay LF	Complicações obstétricas, eventos estressantes, violência e depressão durante a gravidez em adolescentes atendidas em unidade básica de saúde	Quantitativo	A prevalência de depressão gestacional foi de 14,2% sendo os principais fatores associados: história anterior de depressão, sangramento anômalo e hospitalização na atual gravidez, história de acidente, incêndio ou catástrofe e maus-tratos durante a vida.
Artigo 8	Psicologia: teoria e pesquisa, 2019	Frizzo GB, Martins LWF, Silva EXL, Piccinini CA, Diehl AMP	Maternidade adolescente: a matriz de apoio e o contexto de depressão pós-parto	Qualitativo	O fato das participantes estarem vivenciando a adolescência concomitantemente à maternidade pode potencializar as ambivalências características dessas etapas desenvolvimentais.
Artigo 9	Revista Brasileira de Saúde Materno Infantil, 2014	Almeida AHV, Costa COM, Gama SGN, Amaral MTR, Vieira GP	Baixo peso ao nascer em adolescentes e adultas jovens na região nordeste do Brasil	Transversal	Alta frequência de baixo peso ao nascer entre mães adolescentes e adultas jovens, tendo como principais fatores associados o número insuficiente de consultas pré-natal, primigestação e prematuridade.
Artigo 10	Revista Brasileira de Saúde Materno infantil, 2006	Carniel EF, Zanolli ML, Almeida CAA, Morcilio AM	Características das mães adolescentes e de seus recém-nascidos e fatores de risco para a gravidez na adolescência em Campinas, SP, Brasil	Transversal	O perfil das mães adolescentes e de seus partos e os fatores de risco para gravidez na adolescência relacionaram-se principalmente com condições socioeconômicas desfavoráveis, sugerindo que as intervenções requerem ações intersetoriais.
Artigo 11	Revista Brasileira de Ginecologia e Obstetrícia, 2009	Silva JLCP, Surita FGC	Idade materna: resultados perinatais e via de parto	Reflexão	Para as mulheres com mais de 35 anos, é estabelecido que estas constituem um grupo de risco bem determinado, o qual demanda cuidados especializados, igualmente multiprofissionais na perspectiva das complicações peculiares associadas à idade, e há uma tendência de incremento em todos os extratos sociais.

Elaboração: Oliveira BS, Aguiar RS, 2020.

nancy in this population began, but the numbers are still high. According to data from SINASC, between 2006 and 2015 there was a decrease in pregnancy rates among adolescents aged 10 to 14 years, but in the Northeast region of the country, there are still no indications of de-

cline, representing only a 4% decrease in this evaluated period.¹⁰

Therefore, the occurrence of teenage pregnancy is often linked to sociodemographic issues, early initiation of sexual life and lack of reproductive planning. Commonly, unplanned pregnancies in

adolescents cause risks of obstetric complications to the mother and child due to the lack of knowledge of the adolescent pregnant woman about pregnancy and her behavior in relation to the consumption of medication, alcohol, tobacco and other drugs in early pregnancy.¹¹

Furthermore, complications arising from teenage pregnancy may also be associated with the late start of prenatal care, as well as the absence of routine appointments and lack of support from the partner.¹²

Premature births and anemia are associated with teenage pregnancy. In addition, when an adolescent becomes pregnant early, she may have a higher risk of presenting Hypertensive Syndrome in Pregnancy (HSP), which is a frequent complication and a risk factor for the life of both mother and child, due to complications associated with pre-eclampsia and eclampsia.¹³ HSP may be more common in pregnant adolescents under the age of 17 due to age-specific issues, such as immaturity of organs and systems.¹⁴

In a research carried out in the Northeast of Brazil, a prevalence of HSP in 4,6% of adolescents was identified. The presence of arterial hypertension was present in the group of pregnant adolescents and was a risk factor for maternal and neonatal life. Of the factors that can interfere with the occurrence of an HSP, it was possible to observe that social and biological situations also had a significant influence, such as the absence of a partner, low education and the presence of clinical history.¹³

When analyzing 644 newborns of adolescent mothers, it was observed that 97,2% of the deliveries had a cephalic presentation, but about 61% of the analyzed cases required cesarean delivery. Furthermore, based on the pediatric diagnosis in the medical record, approximately 10% of the newborns were small for gestational age.¹⁵

In a cross-sectional epidemiological study with interviews carried out in prenatal consultations with adolescents between 15 and 19 years old, it was possible to observe that 16% of the adolescents reported a previous history of depression, which was associated with depression during pregnancy. Furthermore, 33% reported personal conflicts with close people; 31,7% said they were experiencing current financial problems; 29,2% went

through marital conflicts; 45% said they had already suffered some type of emotional or physical violence by their partner or someone close to them; and 7% reported having suffered physical violence during pregnancy.¹⁶

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As for the main figures of support for the teenager during pregnancy, it is identified that the teenagers' mothers are the ones who provide physical and psychological support for them. Even with the presence of the partner, the father of the pregnant woman and other female figures, the mother of the teenager stands out, that is, she ends up being more participative in the lives of her young daughters than the other people in her life.¹⁷

Given this, and considering that the adolescent is in a biopsychosocial growth and development phase, it is necessary that she receives information from health professionals that contribute to her physical and emotional well-being. The health team must guide the adolescent about aspects of pregnancy, nutrition and care for the newborn. It is also necessary to testify to the importance of the mother-father and baby bond, the importance of breastfeeding, child vaccination, prevention of childhood accidents, monitoring of growth and development and others. In addition, it is essential that there is guidance for postpartum adolescents regarding reproductive planning and adherence to contraceptive methods to avoid a new pregnancy in the short term.¹⁸⁻²⁰

Prenatal care is extremely important for the care of pregnant teenagers. Therefore, adolescents under 15 years old need special attention because they present greater maternal-fetal risks.¹⁸

Therefore, special attention is needed during prenatal care, since the occurrence of inadequate care can result in a greater chance of premature and low birth weight children, as well as other maternal and fetal complications.^{18,21-22}

CONCLUSION

The findings in the literature point to a slight drop in teenage pregnancy in Brazil, but the numbers are still high. Despite the understanding of health professionals about the importance of sex education programs for families, there is still a need for a more efficient reception with the young public. Open dialogue

needs to be valued and encouraged.

Therefore, fair and quality access to

education can help young people to get

a different look at the future and priori-

tize the search for a professional career,

valuing their skills. ■

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