

Oral

 2025年9月28日(日) 16:30 ~ 18:00
  Session Room 8 (Meeting Room 1)

Oral 19

[O-19-01]

Sensitive Perinatal Mental Health-Systematized Review: What factors help mentally ill birth mothers navigate Child Welfare Services during the perinatal period?

*Hewa Liyana Arachchi Chamali Rangika Wanigasekera^{1,2}, Anne Buist^{1,2} (1. Austin Health, Melbourne, Australia (Australia), 2. University of Melbourne, Victoria, Australia (Australia))

[O-19-02]

Trajectories of Changes in Mental Health Symptoms During COVID-19: Evidence from a Systematic Review and Meta-analysis of 284 Studies

*Yin Wu^{1,2}, Ying Sun^{2,3}, Marc Parsons⁴, Nadia P González-Domínguez², Suiqiong Fan², Letong Li², Xiaowen Jiang², Amina Tasleem², Kexin Li², Yutong Wang², Tiffany Dal Santo^{2,5}, Jill T Boruff⁶, Palak Desai², Monica D'Onofrio², Ankur Krishnan², Claire Adams, Chen He², Andrea Benedetti^{4,8,9}, Brett D Thombs^{2,4,5,7,8} (1. Shanghai Jiao Tong University (China), 2. Lady Davis Institute for Medical Research, Jewish General Hospital (Canada), 3. Johns Hopkins Bloomberg School of Public Health, Baltimore, Maryland (United States of America), 4. Department of Epidemiology, Biostatistics and Occupational Health, McGill University (Canada), 5. Department of Psychiatry, McGill University (Canada), 6. Schulich Library of Physical Sciences, Life Sciences, and Engineering, McGill University (Canada), 7. Department of Psychology, McGill University (Canada), 8. Department of Medicine, McGill University (Canada), 9. Respiratory Epidemiology and Clinical Research Unit, McGill University Health Centre (Canada))

[O-19-03]

Impact of the Film 'Ray of Hope' on Enhancing Knowledge of Reproductive Health Risks from Smoking and Alcohol Use among College Students in the Indian Cultural Context

*Meena Kolar Sridara Murthy¹ (1. National Institute of Mental Health and Neurosciences (India))

[O-19-05]

Global Quality of Life as a Dynamic Predictor of Survival in Lung Cancer Patients Across Systemic Therapies

*Yin Wu¹, Leixin Xia¹, Xiaoshui Huang¹, Yaping He¹, Hui Wang¹, Zhonglin Chen² (1. Shanghai Jiao Tong University (China), 2. Shanghai Chest Hospital (China))

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*Hewa Liyana Arachchi Chamali Rangika Wanigasekera^{1,2}, Anne Buist^{1,2} (1. Austin Health, Melbourne, Australia (Australia), 2. University of Melbourne, Victoria, Australia (Australia))

キーワード : Perinatal Psychiatry、 Women and Infants、 Identification of risk factors、 prevention and early intervention、 Child Welfare Services

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Background: Mental Illness is common in the perinatal period. Given the dependency of infants, additional factors such as lack of support, family violence and comorbid drug use may place the infant at significant physical and psychological harm. Anecdotal information suggests that many of these women do not receive adequate support during the perinatal period. However, the factors that predict and protect families, enabling them to stay together and function in a “good enough “manner, remain unclear. Aims: To review the current literature examining protective service involvement in women who present with mental illness in the perinatal period.

Methods: A systematized review of the literature was conducted through a comprehensive search of databases for psychosocial and medical research (MEDLINE, PsycINFO, Embase, Emcare, Cochrane Library) and a targeted search of the grey literature to select the relevant studies that meet the inclusion criteria. Original papers were included if they were written in English and published before September 1, 2022. Sixteen studies were selected for inclusion.

Results: Protective and predictive factors that help mentally ill mothers to continue as primary caregivers will be presented. The factors that determine risks for child protective involvement and child removal in mothers with mental illness are also discussed.

Conclusions: The results of this research will provide recommendations on how to deliver sensitive perinatal mental health care for mothers already involved with the Child Welfare Services, aiming to minimize child removal.

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[O-19-02] Trajectories of Changes in Mental Health Symptoms During COVID-19: Evidence from a Systematic Review and Meta-analysis of 284 Studies

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キーワード : mental health、 pandemic、 Psychiatric Epidemiology

Background: Few systematic reviews could provide a comprehensive synthesis of the impact of the COVID-19 pandemic on mental health outcomes during the pandemic.

Objectives: To synthesize the trajectories of changes in general mental health, anxiety, and depression symptoms of diverse populations throughout the COVID-19 pandemic.

Methods: We conducted a living systematic review and searched among 9 databases. We conducted meta-regression with linear mixed models. Risk of bias (ROB) was assessed using an adapted Joanna Briggs Institute Checklist for Prevalence Studies.

Results: As of April 03, 2023, we reviewed 149,026 unique citations and included 284 eligible studies from 275 cohorts that had multiple data points of COVID-19 mental health outcomes during the pandemic. Most publications (275, 97%) reported all time points between January 1, 2020 and December 31, 2021, and were from high-income (226, 80%) or upper-middle income (54, 19%) countries. The main analysis results suggest no consistent pattern of temporal effects on changes of mental health outcomes. Each quarter of a year since COVID-19 onset was associated with a minimal improvement in general mental health (0.02 standardized mean difference (SMD), 95%CI -0.02 to -0.02) and in depression symptoms (0.03 SMD, 95%CI -0.03 to -0.03), while with minimally worsened anxiety symptoms (0.02 SMD, 95%CI 0.02 to 0.02). Estimates of all covariates' effects were close to zero or inconsistent, except the country stringency index which was associated with all three outcomes minimally (0.02 - 0.05 SMD; 95%CI 0.02 to 0.03 - 0.05 to 0.05). Results among 18 subgroups including general population suggested no consistent pattern of changing with time across all outcomes. Substantial heterogeneity and ROB were present across analyses.

Conclusions: Generally high ROB and the extreme heterogeneity makes it essential to interpret findings cautiously. However, there is no clear trend of change across mental outcomes throughout the COVID-19 pandemic.

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[O-19-03] Impact of the Film 'Ray of Hope' on Enhancing Knowledge of Reproductive Health Risks from Smoking and Alcohol Use among College Students in the Indian Cultural Context

*Meena Kolar Sridara Murthy¹ (1. National Institute of Mental Health and Neurosciences (India))

キーワード : Early aging、reproductive health、reproductive health risks、Indian context、cultural relevance

Objectives: This study quantitatively assesses the effectiveness of the film 'Ray of Hope' in enhancing college students' knowledge of reproductive health risks induced by cigarette smoking and alcohol abuse. It specifically addresses the critical gap in awareness of these risks within the Indian population, where cultural norms and limited open discourse often hinder comprehensive health education. We investigated how a culturally relevant media intervention can bridge this knowledge deficit.

Materials and Methods: A pre- and posttest survey was conducted with 44 college students to evaluate their knowledge of these risks. The questionnaire was aligned with the 20-minute film 'Ray of Hope' which covered the impact of smoking and alcohol on reproductive health, fertility, and early aging, tailored to resonate with an Indian audience. The posttest was administered 14 days after the intervention to assess knowledge retention.

Results: Results showed a significant increase in students' knowledge of reproductive risks from substance abuse, with the mean pretest score of 6.32 rising to 13.02 in the posttest ($P < 0.001$). Participants demonstrated a notably improved awareness of the harmful effects on fertility and early aging.

Conclusions: These findings suggest that targeted educational media can play a vital role in health promotion and prevention strategies among young adults. This study provides quantitative evidence for the film's effectiveness in the Indian cultural context, highlighting its potential utility in addressing specific public health needs.

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*Yin Wu¹, Leixin Xia¹, Xiaoshui Huang¹, Yaping He¹, Hui Wang¹, Zhonglin Chen² (1. Shanghai Jiao Tong University (China), 2. Shanghai Chest Hospital (China))

キーワード : global quality of life、 cancer patient、 predictor of survival

This study evaluated the prognostic significance of global quality of life (QoL) in lung cancer patients undergoing systemic therapies, including targeted therapy (N=205), immunotherapy (N=318), and combination therapy (combine chemotherapy, targeted or immunotherapy) (N=339). Using both baseline and time-varying Cox proportional hazards models, we examined how patient-reported QoL, assessed via the EORTC QLQ-C30, relates to overall survival (OS) in each treatment subgroup. At baseline, higher self-reported QoL was significantly associated with longer survival across all treatment modalities. In the targeted therapy group, each 1-point increase in baseline global QoL was associated with a 21% reduction in the hazard of death. In the immunotherapy and combination groups, baseline QoL was similarly predictive, with hazard reductions of 16% (HR = 0.84, $p = 0.0019$) and 14% (HR = 0.860, $p = 0.0076$), respectively. Time-varying Cox models further confirmed that QoL measured at multiple time points dynamically predicted survival outcomes. For patients on targeted therapy, each 1-point increase in QoL was associated with a 7.5% reduced hazard of death (HR = 0.925, $p = 0.021$). In immunotherapy and combination groups, these reductions were 8.5% (HR = 0.915, $p = 0.00035$) and 9.4% (HR = 0.906, $p < 0.001$), respectively. These associations remained statistically significant and clinically meaningful across all groups. In conclusion, global QoL is a consistent and dynamic predictor of survival in lung cancer patients, regardless of treatment modality. These findings support the routine integration of QoL assessments in both clinical trials and real-world settings to inform prognosis and guide supportive care strategies.