

## PERFECTIONISM, INSOMNIA AND DEPRESSIVE SYMPTOMS IN THE POST-PARTUM

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**Introduction:** It has been shown that perfectionism constitutes a risk factor both for insomnia and postpartum depression.

**Objective:** To analyse the relationship between perfectionism, depressive symptoms and insomnia in the postpartum.

**Methods:** 201 3-months postpartum women ( $M=12.27\pm.91$  weeks postpartum) completed the Portuguese versions of Postpartum Depression Screening Scale (PDSS) and Multidimensional Perfectionism Scale (MPS). Three MPS dimensions derived by factorial analysis with data from this sample were used: Self-Oriented Perfectionism/SOP, Social Prescribed Perfectionism-Conditional Acceptance/SPP-CA and SPP-Others Highs Standards/OHS. Women also answered 5 questions about sleep, considering the previous month, based on which three insomnia groups were formed: Good Sleepers/GS (women without insomnia symptoms or daytime impairment); Insomnia Symptoms Group (women with at least one insomnia symptom but no daytime impairment); Insomnia Syndrome Group/ISG (women with at least one insomnia symptom and sleep related daytime impairment).

**Results:** Insomnia and PDSS were correlated ( $r=.39$ ,  $p<.01$ ). SOP was not correlated with insomnia neither with PDSS total score. SPP-CA was significantly correlated with insomnia and with PDSS ( $r>.25$ ,  $p<.01$ ). SPP-OHS was only significantly correlated with insomnia ( $r=.14$ ,  $p<.05$ ). SPP-CA mean scores were significantly higher in ISG than in GS ( $23.45\pm3.032$  vs.  $18.98\pm8.81$ ,  $p=.002$ ). Considering insomnia as a quantitative variable, linear regression showed that SPP-CA ( $\beta=.20$ ,  $p=.005$ ) and PDSS ( $\beta=.17$ ,  $p=.021$ ) were both significant predictors of insomnia, explaining 8.7% of variance ( $p<.001$ ). The mediation analysis revealed that SPP-CA partially mediated the relationship between PDSS and insomnia (IC 95% .008-.005).

**Conclusion:** SPP-C is a relevant correlate of postpartum insomnia.