

산과 의사가 인지한 10대 임신의 현황, 예방, 정신과 자문*

OBSTETRICIAN'S VIEW OF TEENAGE PREGNANCY :
PRESENT STATUS, PREVENTION AND
PSYCHIATRIC CONSULTATION

이영식**† · 김은영** · 김봉년*** · 홍강의***

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Boong-Nyun Kim, M.D.,*** Kang-E Hong, M.D.***

목 적 :	10	,	10
방 법 :	10	,	2800
결 과 :	(1) 10	가	, 10
	가	, (2)	가
	가	. (3)	가
			. (4) 10
			가 . (5) 10
결 론 :	. (6) 10	가	, 10
	10		가 10
중심 단어 :	10		
서 론	10		
	가		

* 2001

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연구 결과

연구대상 및 방법

1. 연구대상
 연구대상은 2010년 1월 1일부터 2010년 12월 31일까지 서울, 수도권, 지방의 10개 병원을 방문한 산부인과 환자를 대상으로 하였다. 연구대상자의 총 인구는 2,800명이며, 최종적으로 347명(12.4%)의 연구대상자가 선정되었다. 연구대상자의 평균 연령은 34.7세(표준편차 3.5)로, 20-29세 12명(3.4%), 30-39세 121명(34.7%), 40-49세 124명(35.5%), 50-59세 59명(16.9%), 60세 이상 31명(8.9%)이었다. 종교는 개신교 105명(30.1%), 천주교 51명(14.6%), 불교 55명(15.8%), 무종교 130명(37.2%), 기타 6명(1.7%)이었다.

2. 연구방법
 본 연구는 횡단연구로, 연구대상자에게 설문지를 배포하여 자료를 수집하였다. 설문지는 연구목적에 맞게 설계되었으며, 연구대상자에게는 익명성을 보장하였다. 수집된 자료는 PC-SPSSWIN을 이용하여 통계처리하였다. 통계처리는 chi-square test, Fisher's exact test, McNemar test, Kendall's W test 등을 사용하였다.

3. 통계처리
 본 연구는 PC-SPSSWIN을 이용하여 통계처리하였다. 통계처리는 chi-square test, Fisher's exact test, McNemar test, Kendall's W test 등을 사용하였다.

1. 연구대상자의 인구학적 특성

2,800명 중 376명(13.4%)의 연구대상자가 선정되었다. 연구대상자의 총 인구는 2,800명이며, 최종적으로 347명(12.4%)의 연구대상자가 선정되었다. 연구대상자의 평균 연령은 34.7세(표준편차 3.5)로, 20-29세 12명(3.4%), 30-39세 121명(34.7%), 40-49세 124명(35.5%), 50-59세 59명(16.9%), 60세 이상 31명(8.9%)이었다. 종교는 개신교 105명(30.1%), 천주교 51명(14.6%), 불교 55명(15.8%), 무종교 130명(37.2%), 기타 6명(1.7%)이었다.

Table 1. Demographic data of survey response obstetricians

	Number	Percentage(V.P)
Age		
20 - 29 years	12	3.4(3.5)
30 - 39 years	121	34.7(34.9)
40 - 49 years	124	35.5(35.5)
50 - 59 years	59	16.9(17.0)
Above 60 years	31	8.9(8.9)
Total	347	99.4(100)
Religion		
Protestants	105	30.1(30.3)
Catholics	51	14.6(14.7)
Buddhists	55	15.8(15.9)
None	130	37.2(37.5)
Others	6	1.7(1.7)
Total	347	99.4(100)
Sex		
Male	214	61.3(61.7)
Female	133	38.1(38.3)
Total	347	99.4(100)
Location of hospital		
Seoul	59	16.9(28.4)
Large cities	76	21.4(36.5)
Others	73	20.9(35.1)
Total	208	59.6(100)

* : V.P(valid percentage)

Table 2. Frequency of responses to questionnaire items

		Frequency	Percentage(V.P)
Trend of teenage pregnancy	Markedly increased	82	23.5(23.7)
	Mildly increased	192	55.0(55.5)
	Nearly same	61	17.5(17.6)
	Decreased	11	3.2(3.2)
	Total	346	99.1(100)
Percentage of abortion	Below 70%	8	2.3(2.3)
	70 - 85%	24	6.9(6.9)
	85 - 95%	91	26.1(26.1)
	Above 95%	224	64.2(64.6)
	Total	347	99.4(100)
Rate of psychiatric consultation pregnancy	More than other ages	9	2.6(2.7)
	Nearly same	58	16.8(17.2)
	Less than other ages	271	77.7(80.2)
	Total	338	96.8(100)
Existence of counselling staff	Absence	181	51.9(52.3)
	Presence	165	47.3(47.7)
	Total	346	99.1(100)
Depth of counselling	Information gathering only	8	2.3(4.8)
	Supportive intervention	14	4.0(8.4)
	Active intervention	35	10.0(21.1)
	Referred to welfare center	109	31.2(65.7)
	Total	166	47.6(100)
Reason for low psychiatric consultation rate	Refuse consultation	223	63.9(73.4)
	Absence of available facility	71	20.3(23.4)
	Economic problem	10	2.9(3.3)
	Total	304	87.1(100)

* : V.P(valid percentage)

가 208 , 9
 59 28.4%, 339 294 ,
 가 76 36.5%, 가 73 15.2 ± 1.3 17.2 ± 1.6 . 【10
 35.1% (Table 1). 가 3
 2. 구조화된 설문 내용 분석
 1) 10대임신의 전반적 추세
 【 10 가?】 0.0(<0.05)
 1 , (Table 3).
 가' 가 346 192 (55.5%, valid
 percentage) 가 (Table 2). 【 3 2) 10대 임신의 원인
 【10 4 Ken-
 318 0%~36%
 8.4 ± 7.6% . 【

4) 10대 임신의 산과적, 소아과적 문제점

【 가 10 가?】
 10
 < > ‘ , 27.1%
 가 , ‘ (15.1%), ‘ ,
 (14.2%), ‘ (12.5%) ,
 (9.2%) . <
 > ‘ , 47.3% 가 , ‘ ,
 33%, ‘ 가 13.8% . <
 > ‘ 가 48.2%, ‘ ,
 가 40.3%, ‘ 가 8.4% (Table 4).

5) 10대 임신모의 정신심리학적 특성

【 가 11 가
 < > ‘ 가
 46.6% 가 , < >
 ‘ 가 49.3% 가 ,
 < > ‘ 가 (46.4%), ‘
 (40.6%) , < > 가
 ‘ 가 (46.2%) ‘
 (30.4%) ‘ , < , >
 ‘ 가 (47.1%), ‘ (32.9%)
 (Table 5). 가
 10

6) 10대 임신모에 대한 상담인력

【 가?】 12 ‘
 가 346 181 (52.3%) , ‘ ,
 가 165 (47.7%) . 【 ?】
 166 (47.6%) 가 14
 (4.0%) ‘ , , 35
 (10.0%) ‘ ,
 , 109
 (31.2%) ‘ 가
 , (Table 2).
 【 가 가?】 96 가
 ‘ , 가 67 가
 , 가 23 , 가 4 ,
 가, 가, , , 2). 【 가 가 ?】 14

Table 5. Obstetrician's experience of pregnant girl having psychiatric problems

	Frequency	Percentage(V.P)
Mentally retarded girl		
Frequently experienced	14	4.0(4.1)
Occasionally experienced	89	25.6(25.9)
Rarely experienced	160	46.1(46.6)
Not experienced	80	23.1(23.3)
Total	343	98.8(100)
Not sexually educated girl		
Frequently experienced	170	49.0(49.3)
Occasionally experienced	130	37.5(37.7)
Rarely experienced	37	10.7(10.7)
Not experienced	8	2.3(2.3)
Total	345	99.4(100)
Sexually abused girl		
Frequently experienced	28	8.1(8.1)
Occasionally experienced	160	46.1(46.4)
Rarely experienced	140	40.3(40.6)
Not experienced	17	4.9(4.9)
Total	345	99.4(100)
Emotionally unstable girl		
Frequently experienced	38	11.1(11.1)
Occasionally experienced	158	45.5(46.2)
Rarely experienced	104	30.0(30.4)
Not experienced	42	12.1(12.3)
Total	342	98.6(100)
Delinquent girl		
Frequently experienced	114	32.9(32.9)
Occasionally experienced	163	47.0(47.1)
Rarely experienced	58	16.7(16.8)
Not experienced	11	3.2(3.2)
Total	346	99.7(100)

* : V.P(valid percentage)

7) 정신과로의 자문의뢰

【 가 13 가
 , 338 271 (80.2%)
 , 58 (17.2%) ‘ 20
 가 ‘ 9 (2.7%) ‘ 20
 , (Table 2). 【 가 가 ?】 14

304 (73.4%) , ' 95% ' , ' 71 (23.4%) ' 가 (p=0.025, Table 6) (3.3%) (Table 2). (2)

8) 연구대상의 인구학적 특성에 따른 차이

(4, 5, 6, 7, 11, 12 - 【 】 2, 13, 14) , ' 가 (, ,) , ' 가 chi - square test . (p=0.009, Table 7). 【 (1) 가 【 】 , ' , ' 【 %】

Table 6. Difference of abortion frequency by the location of hospital

	Frequency of abortion				Total	Pearson ²	df	p
	<70%	70 - 85%	85 - 95%	95%<				
Large cities	1(0.7%)	7(5.2%)	31(23.0%)	96(71.1%)	135(100%)	9.363	3	0.025
Others	2(2.7%)	8(11.0%)	26(35.6%)	37(50.7%)	73(100%)			

Table 7. Obstetricians' view about the psychiatric consultation in teenage pregnancy by their characteristics

Subjects	More common than other age	The same as other ages	Less common than other age	Total	Pearson ²	df	p
Sex							
Male	5(2.4%)	26(12.4%)	179(85.2%)	210(100%)	9.317	2	0.009*
Female	4(3.1%)	32(25.0%)	92(71.9%)	128(100%)			
Location of hospital							
Large cities	2(1.6%)	102(80.3%)	23(18.1%)	127(100%)	1.758	2	0.415
Others	3(2.7%)	60(82.2%)	10(13.7%)	73(100%)			

* : p<0.05

Table 8. Obstetricians' view about the reason for low psychiatric consultation rate by their characteristics(I).

Subjects	Rejection	Absence of facility	Economic problem	Total	Pearson ²	df	p
Sex							
Male	144(74.6%)	45(23.3%)	4(2.1%)	193(100%)	2.494	2	0.287
Female	79(71.2%)	26(23.4%)	6(5.4%)	111(100%)			
Location of hospital							
Large cities	92(80.7%)	18(15.8%)	4(3.5%)	114(100%)	8.568	2	0.014*
Others	43(64.2%)	23(34.3%)	1(1.5%)	67(100%)			
Age of subjects							
20s	3(33.3%)	6(66.7%)	0(0.0%)	9(100%)	22.02	8	0.005*
30s	69(65.1%)	33(31.1%)	4(3.8%)	106(100%)			
40s	80(76.9%)	22(21.2%)	2(1.9%)	104(100%)			
50s	46(82.1%)	8(14.3%)	2(3.6%)	56(100%)			
60s	25(86.2%)	2(6.9%)	2(6.9%)	29(100%)			

* : p<0.05

Table 9. Obstetricians' view about the reason of low psychiatric consultation rate by their characteristics(II).

		reject from the patient & family	deficit of association with psychiatric dept.	economic problem	Total
20s	Count	3	6	0	9
	Expected count	6.6	2.1	0.3	9.0
	Adjusted Residual	-2.8	3.1	-0.6	
30s	Count	69	33	4	106
	Expected count	77.8	24.8	3.5	106.0
	Adjusted Residual	-2.4	2.3	0.3	
40s	Count	80	22	2	104
	Expected count	76.3	24.3	1.8	104.0
	Adjusted Residual	1.0	-0.7	0.1	
50s	Count	46	8	2	56
	Expected count	41.1	13.1	1.8	56.0
	Adjusted Residual	1.6	-1.8	0.1	
60s	Count	25	2	2	29
	Expected count	21.3	6.8	1.0	29.0
	Adjusted Residual	1.6	-2.2	1.1	
Total	Count	223	71	10	304
	Expected count	223.0	71.0	10.0	304.0

* : Pearson Chi-Square=22.022, df=8, p value=0.005

(p=0.014, Table 8). 14, ' 66
 (adjusted re-
 sidual), 20 30 가 29, ' 10, ' 18, '
 , 40 50, ' 13, ' (,
 , 60, ' 13, '
 (p=0.005, Table 9) 가 13, ' 10
 (3) 가 ' 8 .

고 찰

【 20 ' , 10
 , 30 ' ; 40
 ' ; 50 60 ' 1991 250 (24%)
 가 , 1999 462 (63%) . 1998 15
 (p=0.018). 41 (2.9%) .
 가 , 10 55% ,
 9) 산부인과 전문의가 느끼는 10대 임신의 예방대책 10 18~19 가 15~16
 【10 가 ,
 】 15 , 331 20 가
 , ' (61% 15).
) 가 275 가 10 ' 가'

가 3 , 19), 가 , 19),
10 , 0%~36% , 가 ,
8.3% , 10 가 1),
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References

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**OBSTETRICIAN'S VIEW OF TEENAGE PREGNANCY :
PRESENT STATUS, PREVENTION AND
PSYCHIATRIC CONSULTATION**

**Young-Sik Lee, M.D., Eun-Young Kim, M.D.,
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Objectives : For the purpose of obtaining the more vivid present status and prevention program of teenage pregnancy, this survey was done by Obstetricians, as study subject, who manage the pregnant teenager in real clinical situation.

Methods : Structured survey form about teenage pregnancy was sent to 2,800 obstetricians. That form contained frequency, characteristics, decision making processes, and psychiatric aspects of the teenage pregnancy. 349 obstetricians replied that survey form and we analysed these datas.

Results : (1) The trend of teenage pregnancy was mildly increased. (2) The most common cases were unwanted pregnancy by continuing sexual relationship with boyfriends rather than by forced, accidental sexual relationship with multiple partners. (3) The most common reason of labor was loss the time of artificial abotion. (4) Problems of pregnant girls' were conduct behaviors and poor informations about contraception rather than sexual abuse or mental retardation. (5) Most obstetricians perceived the necessity of psychiatric consultation, however psychiatric consultation was rare due to parents refusal and absense of available psychiatric facility. (6) For the prevention of teenage pregnancy, the most important thing was practical education about contraception.

Conclusions : Based on the result of this study, further study using structured interview schedule with pregnant girl is needed for the detecting risk factor of teenage pregnancy and effective systematic approach to pregnant girl.

KEY WORDS : Teenage pregnancy · Present status · Prevention · Psychiatric consultation.