

## **Abstract**

This bachelor's thesis deals with the issue of premature birth and the stress associated with it. Although health care in the field of obstetrics is improving, the incidence of preterm birth remains constant worldwide. Preterm birth is a serious perinatalogical problem and it is therefore important to continue to address this topic. In obstetrics, then, we must not forget the psychological issue, which is an integral part of this branch of medicine and plays an important role in it. Therefore, this thesis also focuses on the psychological part of the issue and discusses in detail the connection between stress and premature birth.

The thesis is conceived as a theoretical-practical one. The theoretical part consists of an obstetric part and a psychological part. The obstetric part deals with the issue of premature birth. It deals with its causes, diagnosis, prevention, treatment and management. The psychological part deals with the problem of stress. It deals with types of stress, stressors, consequences of stress and describes the stages of the adaptation syndrome as well as psychological mechanisms of coping with stress. It then goes on to describe the psychological and obstetric issues, discussing the link between stress and preterm birth and describing the emotions that can be observed in women in relation to preterm birth. Last but not least, it does not forget about communication with the woman who is in such a situation.

The practical part deals with the analysis of a questionnaire survey measuring the level of stress in pregnant women using the Perceived Stress Scale and discusses the issues of communication and education in obstetrics. The main aim of the practical part was to measure the level of stress in pregnant women and to compare this level between women at risk of preterm birth and those not at risk.

The research then showed that women who are at risk of preterm birth were found to have higher levels of stress than the control group of women. From the data obtained, it can then be concluded that there are still gaps in the communication between the health care personnel and the pregnant woman and that there is still a need to work on quality communication.

### **Key words:**

Preterm birth, stress, pregnancy, psychology, maternity, communication