

# Pregnancy-Related Depressive Symptoms Guidance

For anyone who works with women of childbearing age or their children

## Facts:

- Depression is the most common complication of pregnancy
- Maternal & paternal mental health affect child health & development



= See additional  
supplemental information

## Goals to reduce depression:

- Decrease risk factors
- Early identification
- Improve treatment

## Background

### Protective Factors

- Balanced nutrition, physical activity and healthy sleep
- Family planning for an intended pregnancy
- Perceived & intact social and material support
- Parenting confidence
- Recognition of traditional postpartum cultural practices
- Positive parenting role models
- Support of breastfeeding decision
- Healthy co-parent involvement

### Risk Factors

- **Personal history of major or postpartum depression**
- Family history of postpartum depression
- Teen pregnancy
- History of substance use or interpersonal violence
- Unplanned/unwanted pregnancy
- Complications of pregnancy, labor/delivery, or infant's health
- Fetal/Newborn loss
- Infant relinquishment
- Difficulty breastfeeding
- Sleep deprivation
- Major life stressors

## Pregnancy-related depressive symptoms can occur during pregnancy through one year postpartum

- Anxiety symptoms commonly co-occur
- May include intrusive/irrational thoughts
- Mom may appear detached/hypervigilant
- Suicidal ideation may be present

### Baby Blues: ~80% of women may experience

- Birth to 2 weeks postpartum
- Resolves in approx. 14 days
- Fluctuating emotions
- No suicidal ideation

## Starting the Conversation

### 1. Address Stigma

- "Many women feel anxious or depressed during pregnancy or postpartum."
- "A woman deserves to feel well."
- "Many effective treatment options are available."

### 2. Explore Expectations

- Pregnancy and postpartum experiences and expectations vary.
- "How are you feeling about being pregnant/a new mother?"
  - "What has surprised you about being pregnant/a new mom?"
  - "What has it been like for you to take care of your baby?"
  - "What beliefs or practices related to pregnancy or soon after the baby is born are especially important to you?"

### 3. Explore Social Support

- "Who can you talk to that you trust?"
- "How have your relationships been going since becoming pregnant/a new mom?"
- "Who can you turn to for help?"

## Screening

### When implementing screening, consider other services & resources that may be needed:

- Medical providers to prescribe medication
- Mental health and psychiatry services
- A protocol to address suicide risk
- Community support programs
- Self-care and educational resources



### When to Screen

- Preconception & interconception
- Each trimester throughout pregnancy
- At postpartum visits
- Well child visits up to 1 year postpartum

### Who Could Screen

- Medical providers
- Mental health providers
- Community-based providers
- Early childhood practitioners

## What Brief Screening Tool to Start With

### Edinburgh-3 Brief Screen

In the past 7 days:

1. I have blamed myself unnecessarily when things went wrong:  
Yes, most of the time (3) Yes, some of the time (2) Not very often (1) No, never (0)
2. I have been anxious or worried for no good reason:  
No, not at all (0) Hardly ever (1) Yes, sometimes (2) Yes, very often (3)
3. I have felt scared or panicky for no good reason:  
Yes, quite a lot (3) Yes, sometimes (2) No, not much (1) No, not at all (0)

Total score x 10/3 = screen score

Score ≥ 10 should receive further screening and assessment

Source: Cox, J.L., Holden, J.M., and Sagovsky, R. 1987. Detection of postnatal depression: Development of the 10-item Edinburgh Postnatal Depression Scale. British Journal of Psychiatry 150:782-786

**Refer women with depressive symptoms to a medical or mental health provider for further assessment.**

Well child visits are an ideal time to screen for pregnancy-related depression.

Other tools validated for pregnancy and postpartum



### Consider medical causes, especially:

- Anemia
- Thyroid disorders

### Assess for other psychiatric symptoms and conditions:

- Suicidal ideation
- Bipolar disorder
- Generalized anxiety disorder
- Obsessive Compulsive Disorder
- Psychotic symptoms
- Thoughts of harming the baby

- There is an increased risk of new onset or recurrence of bipolar disorder during pregnancy/postpartum

### Postpartum Psychosis

- A medical emergency: ensure safety of mother and infant immediately
- Infrequent (1-2/1,000)
- May include hallucinations, mania, delusions, disconnection from baby

### Consider contributing factors:

- Tobacco, alcohol and other drugs
- Interpersonal violence
- History of trauma or abuse

### Treatment Recommendations Based On Depression Severity

#### Mild

- Lifestyle
- Social support

#### Moderate

- Lifestyle
- Social Support
- Mental health services

#### Moderate-Severe to Severe

- Lifestyle
- Social Support
- Mental health services
- Consider medication

### Shared Decision-making: Talking Points

- "What things could be contributing to how you're feeling?"
- "Untreated depression may be harmful to mom and baby."
- "Treatment and recovery times vary."
- "All medications have benefit and risk considerations."
- "What challenges may make it difficult to follow this treatment plan?"

### Medication Treatment Considerations

#### Pregnancy:

- Untreated depression is associated w/ greater risk for pre-term delivery, preeclampsia and intra-uterine growth restriction
  - SSRIs may be associated with these same risks
- It is currently unknown whether treatment changes the risks associated with untreated depression
- Most SSRIs are not associated w/ increased risk of congenital malformations; however, paroxetine carries warnings for use during pregnancy
- Discontinuation of antidepressants during pregnancy may result in relapse

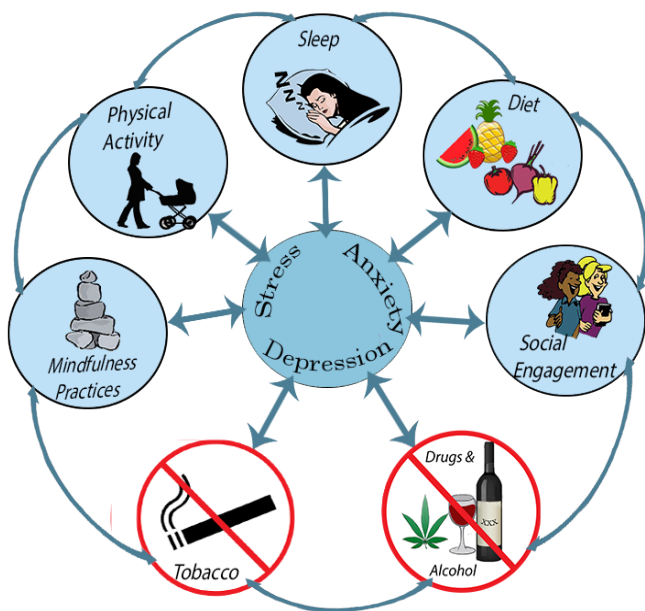
#### Postpartum:

- Treated depression improves health of mother and child
- SSRIs may be used during lactation; sertraline recommended

#### Helpful Lactation & Drug Exposure Resources:

- LactMed: <http://toxnet.nlm.nih.gov/cgi-bin/sis/htmlgen?LACT>
- Motherisk.org
- Infanrisk.org

### Always address lifestyle for prevention and treatment.



#### Other Related HealthTeamWorks Guidelines:

- Adult Depression
- SBIRT
- Contraception
- Preconception/ Interconception
- Prevention
- Motivational Interviewing Resources

