

Perinatal Mood & Anxiety Disorders

Lynne McIntyre, MSW

Overview

1. What are PMADs?
2. What is their impact on mothers & children?
3. How are they treated?
4. How do I screen?
5. Where & how do I refer?

The Problem

- US = 4,000,000 births/year
 - DC = ~9,000 births
- 15-20 % of new mothers
 - 33-50% of immigrant and low SES mothers
- 50% of cases go unrecognized and untreated
- Most common complication of pregnancy and childbirth
- Suicidality

Terms & Definitions

- Baby Blues
- Maternal Depression
- Postpartum Depression
- Perinatal Depression
- Postpartum Psychosis
- PMADs = Perinatal Mood and Anxiety Disorders

PMADs

- Heterogeneous
- Occur in 1st year postpartum
- **Most common:**
 - Major Depressive Disorder
 - Bipolar Disorder
 - Anxiety Disorders:
 - Generalized Anxiety Disorder
 - Panic Disorder
 - Posttraumatic Stress Disorder (PTSD)
 - Obsessive Compulsive Disorder

Risk Factors

- Personal History
- Family History
- Financial Difficulties
- Relationship Difficulties
- NICU / Special Needs Baby
- Recent big life changes:
 - Marriage
 - Move
 - New Job
- Unintended Pregnancy
- Young Age
- Lack of Social Support
- Previous Trauma
- Fussy Baby
- Problems breastfeeding
- Type A / Perfectionist
- Sudden d/c of medication

How do depressed new mothers *FEEL?*

- Depressed, sad, mournful
- Anxious, panic
- Feelings of unreality, “Numb”
- Resentful, Irritable or Angry
- Regretful, “What have I done?”
- Hopeless
- Lonely
- Excessive feelings of loss
- Anhedonia

How do depressed new mothers *THINK?*

- Unrealistic expectations
 - new motherhood
 - baby
- Preoccupation with baby's safety & vulnerability
- Negative thinking/thought distortions
- Suicidal ideation
- Egodystonic thoughts of harming baby

What do depressed new mothers *DO?*

- Avoidance of sex and/or physical affection
- Crying
- Conflict or strain with spouse
- Diminished or absent bond with baby
- Near frantic efforts to gain control
- Sleep problems
- Breastfeeding difficulties

Red Flags in the Postpartum

Birth – 6 Months

- Overanxious or depressed
- Aloof or self-absorbed
- Difficulty adjusting to parenting demands
- Frequent non-illness pediatric calls
- Inappropriate parental expectations
- Apathetic baby
- Feeding problems
- Nonorganic failure to thrive

6-18 Months

- Inattentive or apathetic parent
- Inappropriate parental expectations
- Frequent non-illness pediatric visits
- Excessive prohibitions, inappropriate discipline
- Extreme sleep problems (baby)
- Excessive fearfulness/clinginess in non-stressful situations, temper tantrums
- Developmental delay
- Child Abuse



Impact: Pregnancy

Mother

- Non-compliance with prenatal care
- Self-medication with drugs, alcohol, tobacco
 - 10-12% smoke tobacco
 - 14-15% use alcohol
 - 3% use illicit drugs
- Poor bonding with baby
- Impact on family
- Self harm/suicide
- Antepartum depression

Fetus

- Pre-term labor
- Premature birth (<37 wks)
- Low birth weight
- Small for G.A., head circumference
- Increased cortisol
- Low APGAR scores
- Neonatal complications
- NICU admissions
- Fetal demise

Impact: Postpartum

Mother

- Breastfeeding problems, cessation
- Maternal responsiveness, sensitivity
- Emotional availability
- Negative mood, modeling
- Inconsistency
- Inability to assist with emotional regulation

Child

- Increased withdrawal, avoidance in toddlers
- Significantly worse school outcomes
 - Lower cognitive functioning
 - Significantly poorer reading achievement
 - Significantly worse grades
 - Significantly more behavior problems
- ~50% of adolescents have a psychiatric disorder
- ~2x the rate of physical problems

The Good News

These disorders are treatable

The Path to Wellness

- Changes at home:
 - Sleep
 - Nutrition
 - Help & Support
 - Time Alone
- Home Visiting
- Social Support / Psycho-Education Groups
- Psychotherapy
- Medication

Easier,
Cheaper



More involved,
More expensive

Screening

Clinical judgment or “gut instinct”

Best Practice

- Baseline during 1st trimester
- Between 35-40 weeks
- 2 month well-child
- 6 month well-child
- 12 month well-child


New WIC Diet & Health Assessment Form

Two Mood Questions

1. In the past month, how often have you been bothered by little interest or pleasure in doing things?
2. In the past month, have you often been feeling down, depressed, or hopeless?

PHQ-2

- Responses:
 - 0 = Not at all
 - 1 = Several Days
 - 2 = More than half the days
 - 3 = Nearly every day


WOMAN'S Diet and Health Assessment Form
District of Columbia WIC Program




Name: _____ Date of Birth: _____ Date: _____

Please **Circle** your answers or **Write in box** or **fill in the blank**. Thank you.

This form helps us get to know you and your family so we can better assist you in making healthier choices.

Do you have any nutrition concern(s) you would like to discuss today? **YES** **NO**

If any, please describe:

<p>1. In the past month, how often have you been bothered by little interest or pleasure in doing things? 361</p> <p>2. In the past month, have you often been feeling down, depressed, or hopeless? 361</p> <p style="text-align: center;"><small>Babies are meant to be breastfed. Your WIC staff is here to support you with breastfeeding.</small></p> <div style="text-align: center; border: 1px solid black; padding: 2px; margin: 5px 0;">  IF PREGNANT </div> <p>1. Approximately how much did you weigh before you became pregnant? _____ 101, 111, 114</p> <p>2. How much weight do you think you should gain with this pregnancy? _____ pounds _____ no idea 358</p> <p>3. Is your current pregnancy: (Circle one) 335</p> <p style="text-align: center;">ONE BABY MORE THAN ONE BABY</p> <div style="text-align: center; border: 1px solid black; padding: 2px; margin: 5px 0;">  IF PREGNANT or BREASTFEEDING  </div> <p>1. How long do you plan to breastfeed? _____ 338</p> <p>2. How can we help you to fully breastfeed your baby?</p> <div style="border: 1px solid black; height: 20px; width: 100%; margin-bottom: 5px;"></div> <p>3. What have you heard about breastfeeding?</p> <div style="border: 1px solid black; height: 20px; width: 100%; margin-bottom: 5px;"></div> <p>4. How is breastfeeding going? 601, 602, 702</p> <div style="border: 1px solid black; height: 20px; width: 100%; margin-bottom: 5px;"></div>	<p style="text-align: center;">*****ALL WOMEN ANSWER THE FOLLOWING*****</p> <p>1. Check all of the following conditions that you have now or have had in the past:</p> <p><input type="checkbox"/> Anorexia/bulimia * 358</p> <p><input type="checkbox"/> Closely spaced pregnancies * 332, 333</p> <p style="text-align: center;"><small>(less than 16 months between pregnancies)</small></p> <p><input type="checkbox"/> Miscarriage *(after 20 weeks), Still birth * 321, 332</p> <p><input type="checkbox"/> Fetal growth restriction * 336</p> <p><input type="checkbox"/> Gestational Diabetes * 302, 303</p> <p><input type="checkbox"/> Pre-Diabetes* 363</p> <p><input type="checkbox"/> Preeclampsia * 304</p> <p>2. Any complications with previous pregnancies:</p> <p><input type="checkbox"/> Baby weighed 5 pounds 8 oz. or less* 312, 141</p> <p><input type="checkbox"/> Baby weighed 9 pounds or more at birth* 337</p> <p><input type="checkbox"/> Baby born with a neural tube defect, cleft lip or cleft palate** 339, 349</p> <p><input type="checkbox"/> Baby premature (37 or less completed weeks)* 311</p> <p>3. Are you on any of these diets?</p> <table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <tr> <td>Diabetic 3 43, 363</td> <td>Low calorie / Weight loss 356</td> <td>Vegan / Vegetarian 4WB</td> </tr> <tr> <td>Low salt 345</td> <td>Low fat 4WB</td> <td>Low carbohydrate, high protein 4WB</td> </tr> <tr> <td>Macrobiotic diet 4WB</td> <td>Food allergy* 353</td> <td>Other: _____</td> </tr> </table> <p>4. What type of exercise are you doing?</p> <div style="border: 1px solid black; height: 20px; width: 100%; margin-bottom: 5px;"></div> <p>5. Do you drink more than 1-2 alcoholic drinks a day?</p> <p style="text-align: center;">YES NO 382, 703, 4WA</p> <p>Staff Notes (SOAP Note):</p> <div style="border: 1px solid black; height: 20px; width: 100%; margin-bottom: 5px;"></div> <div style="border: 1px solid black; height: 20px; width: 100%; margin-bottom: 5px;"></div>	Diabetic 3 43, 363	Low calorie / Weight loss 356	Vegan / Vegetarian 4WB	Low salt 345	Low fat 4WB	Low carbohydrate, high protein 4WB	Macrobiotic diet 4WB	Food allergy* 353	Other: _____
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New WIC Diet & Health Assessment Form

When to make a Referral

- Score of 3+ if using Likert scale
- "Yes" to either Q if using Yes/No
- If your gut tells you to

How to make a referral?


WOMAN'S Diet and Health Assessment Form
District of Columbia WIC Program

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Resources

DC Collaborative For Mental Health in Pediatric Primary Care

Child & Adolescent Mental Health Resource Guide

<http://dchealthcheck.net/documents/Mental-Health-Resource-Guide.pdf>

- Perinatal Mental Health section
- Home Visiting section
- Also includes link to DMV-PMH Resource Guide
 - Referrals in this guide are vetted for training & experience in PMH

<http://www.dmvpmhresourceguide.com/>

Resources

Postpartum Support International

“one-stop shopping”

Washington, DC

- Postpartum Support DC: 202-643-7290, www.postpartumdc.org

Maryland

- Postpartum Support Maryland: 240-432-4497, www.postpartummd.org

Virginia

- Postpartum Support Virginia: 703-829-7152, www.postpartumva.org

Continuing the Conversation

How are you feeling about being a new mother?

How are you coping with the additional stress of a new baby?

Are you able to sleep when the baby is sleeping?

How is your appetite?

Do you have enough energy to do the things you need to do?

Have you been feeling sad or depressed?

Have you been feeling anxious, worried or afraid?

Do you find yourself crying for no reason?

Have you had any thoughts that have scared you?

Thank You!

Lynne McIntyre, MSW

Mary's Center for Maternal & Child Care

Postpartum Support International