

Key Clinical Considerations When Assessing the Mental Health of Pregnant and Postpartum Women

Assessing Thoughts of Harming Baby

Thoughts of Harming Baby Secondary to Obsessions/Anxiety/Depression	Thoughts of Harming Baby Secondary to Postpartum Psychosis/Suspected Postpartum Psychosis
<ul style="list-style-type: none"> • Good insight • Thoughts are intrusive and scary • No psychotic symptoms • Thoughts cause anxiety ↓ <p>Suggests not at risk of harming baby</p>	<ul style="list-style-type: none"> • Poor insight • Psychotic symptoms • Delusional beliefs with distortion of reality present ↓ <p>Suggests at risk of harming baby</p>

Assessing Suicidal Ideation

Suggests Lower Risk	Suggests Higher Risk
<ul style="list-style-type: none"> • No prior attempts • No plan • No intent • No substance use • Protective factors (can ask patient: <i>what prevents you from acting on suicidal thoughts?</i>) 	<ul style="list-style-type: none"> • History of suicide attempt • High lethality of prior attempts • Current plan • Current intent • Substance use • Lack of protective factors (including social support)

Considerations for Prescribing Medication

Suggests Medication May Not be Indicated	Suggests Medication Treatment Should be Strongly Considered
<ul style="list-style-type: none"> • Mild depression based on clinical assessment • No suicidal ideation • Engaged in psychotherapy or other non-medication treatment • Depression has improved with psychotherapy in the past • Able to care for self/baby • Strong preference and access to psychotherapy 	<ul style="list-style-type: none"> • Moderate/severe depression based on clinical assessment • Suicidal ideation • Difficulty functioning caring for self/baby • Psychotic symptoms present • History of severe depression and/or suicide ideation/attempts • Comorbid anxiety diagnosis/symptoms

Risk Factors for Postpartum Depression¹

<ul style="list-style-type: none"> • Personal history of major or postpartum depression • Family history of postpartum depression • Gestational diabetes • Difficulty breastfeeding • Fetal/newborn loss • Lack of personal or community resources • Financial challenges • Substance use/addiction 	<ul style="list-style-type: none"> • Complications of pregnancy, labor/delivery, or infant's health • Teen pregnancy • Unplanned pregnancy • Major life stressors • Violent or abusive relationship • Isolation from family or friends
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How to Talk about Perinatal Depression with Moms¹

<ul style="list-style-type: none"> • <i>How are you feeling about being pregnant/a mother?</i> • <i>What things are you most happy about?</i> • <i>What things are you most concerned about?</i> • <i>Do you have anyone you can talk to that you trust?</i> • <i>How is your partner doing?</i> • <i>Are you able to enjoy your baby?</i>
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¹These materials have been adapted from those made available by HealthTeamWorks and the Colorado Department of Public Health and Environment (CDPHE)
<http://www.healthteamworks.org/guidelines/depression.html>.