

### Risk Factors and Prevention for Perinatal Depression and Anxiety

Valerie Sharpe, MD Baystate Medical Center MCPAP for Moms Consulting Psychiatrist



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### Today we will discuss

- Risk factors for developing perinatal anxiety and depression
- Risks associated with perinatal anxiety and depression
- Strategies to prevent perinatal depression and anxiety

# Perinatal depression is the most common complication of pregnancy

# Perinatal depression affects as many as one in seven women.



http://www.acog.org/Womens-Health/Depression-and-Postpartum-Depression

### Postpartum depression affects about 1 in 3 low income mothers



https://www.publichealth.msu.edu/flint-research/the-rose-sustainment-study

Over 40% of women experiencing a postpartum depressive episode may experience a recurrent episode in subsequent pregnancies



http://aboutislam.net

Miller et al. Psychiatr Clin N Am 2011

# Perinatal depression is associated with significant risks

Poor health care

Substance abuse

Preeclampsia





#### Non-suicidal self-harm

#### Suicide



#### **Preterm Labor**

#### Low birth weight

Sockol et al. Clin Psychol Rev 2013. USPSTF. JAMA 2019

# Perinatal depression is associated with more negative maternal behaviors, less positive maternal behaviors

Less likely to comply with safety practices

Lower rates of preventive healthcare and vaccination

More problems with breastfeeding

Impaired mother-infant bonding

Increased risk for long-term cognitive impairment, emotional difficulties and behavior problems

Sockol et al. Clin Psychol Rev 2013. USPSTF. JAMA 2019



# Perinatal depression can present in different ways



### **Baby blues**

Mood lability, tearfulness, anxiety, irritability

No functional impairment

<2 weeks

No SI

No specific treatment



http://mindbodypregnancy.com/how-to-recognize-postpartum-depression

### **Major Depressive Episode**

Depressed mood or for at least 2 weeks and/or significantly decreased interest or pleasure

- Significant change in appetite
- Significant change in sleep
- Loss of energy
- Feelings of worthlessness/guilt
- **Impaired concentration**
- Slowed down thinking and motor activity or restlessness/agitation



#### **Recurrent thoughts of death or SI**

American Psychiatric Association. Diagnostic and statistical manual of mental disorders (5th ed.) 2013

# There is significant overlap between depressive symptoms and normal perinatal symptoms.



#### Edinburgh Postnatal Depression Scale<sup>1</sup> (EPDS)

Baby's Date of Birth:       Phone:         As you are pregnant or have recently had a baby, we would like to know how you are feeling. Please check the answer that comes closest to how you have felt IN THE PAST 7 DAYS, not just how you feel today.         Here is an example, already completed.         I have felt happy:         Yes, most of the time         No, not very often         Please complete the other questions in the same way.         No, not at all         In the past 7 days:         1. I have been able to laugh and see the funny side of things         *6. Things have been getting on top of me         As much now         Definitely not so much now         No, not at all         Rather less than used to         As most of the time   have coped quite well         No hout at all         No, not at all         No, not at all         No, not at all         Yes, some of the time         Yes, some of the time         Yes, some of the time         Yes, some of ne time         Yes, some of ne time         No, not at all         State ress than used to         Yes, some of the time         Yes, some of the time         Yes, some of the time         Yes, word of the time         Yes	Name:				Address:		
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3. I have blamed myself unnecessarily when things       Not very often         '3. I have blamed myself unnecessarily when things       No, not at all         went wrong       Yes, some of the time       No, not at all         Yes, some of the time       Yes, somst of the time       Yes, south of the time         Not very often       Yes, quite often       Yes, quite often         No, not at all       Yes, sometimes       No, not at all         Hardly ever       No, not at all       '9 I have been so unhappy that I have been crying         Yes, sometimes       Yes, quite often       Only occasionally         Yes, quite a lot       No, not at all       '9 I have been so unhappy that I have been crying         '15 I have felt scared or panicky for no very good reason       Yes, quite often       Only occasionally         Yes, sometimes       Only occasionally       No, not at all         No, not at all       Sometimes       No, not at all         No, not at all       Date       Yes, quite often         No, not at all       Date       Never         Administered/Reviewed by       Date       Never         'source: Cox, JL., Holden, JM., and Sagovsky, R. 1987. Detection of postnatal depression: Development of the 10-item       Source: Cox, JL., Holden, JM., and Sagovsky, R. 1987. Detection of Psychiatry 150:782-786 <td< td=""><td></td><td></td><td></td><td></td><td>Yes, most of the time</td></td<>						Yes, most of the time	
3. I have blamed myself unnecessarily when things went wrong       No, not at all         Yes, most of the time       *8         Yes, most of the time       *8         No, not at all       Yes, most of the time         No, never       *1         I have been anxious or worried for no good reason       No, not at all         No, not at all       *9         Hardly ever       Yes, most of the time         Yes, sometimes       Yes, most of the time         Yes, sometimes       Yes, most of the time         Yes, very often       Only occasionally         I have felt scared or panicky for no very good reason       No, not at all         Yes, quite a lot       *10         Yes, sometimes       Yes, quite often         No, not at all       Sometimes         No, not at all       *10         The thought of harming myself has occurred to me       Yes, quite often         Yes, sometimes       Sometimes         No, not at all       Date         Source: Cox, JL., Holden, JM., and Sagovsky, R. 1987. Detection of postnatal depression: Development of the 10-item         Source: Cox, JL., Holden, JM., and Sagovsky, R. 1987. Detection of postnatal depression: Development of the 10-item         Source: Cx, JL., Holden, JM., and Sagovsky, R. 1987. Detection of postnatal depression: Development of the			Hardly at all				
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https://www.fresno.ucsf.edu/pediatrics/downloads/edinburghscale.pdf

### Although PPD is common and can have devastating consequences, providers focus on identifying and treating it rather than preventing it.

#### February 2019

U.S. Preventive Services Task Force (USPSTF) issued recommendation on interventions to prevent perinatal depression

Pregnant or postpartum person less than 1 year postpartum without current diagnosis of depression but at increased risk of developing depression

# Risk for postpartum depression and anxiety is multifactorial



USPSTF. JAMA 2019. Miller et al. Psychiatr Clin N Am

### **USPSTF recommendations**

Provide or refer persons at increased risk of perinatal depression to counseling interventions with one or more of the following risk factors:

**History of depression** 

**Current subclinical depression** 

Significant anxiety

SES risk factors low income adolescent or single parenthood recent intimate partner violence significant life events



https://www.healthline.com

### **MCPAP for Moms can help**



### **Cognitive behavioral therapy (CBT)**



https://www.inspiremalibu.com/blog/non-12-step/whats-the-difference-between-cbt-and-dbt/

### "Mothers and Babies" Program





USPTF. JAMA 2019 http://www.mothersandbabiesprogram.org/

### Interpersonal therapy (IPT)

### Aims to improve quality of interpersonal relationships and social functioning to reduce distress



# Reach Out, Stand Strong, Essentials for New Mothers (ROSE) program

Psychoeducation on baby blues and postpartum depression

**Stress management** 

Development of a social support system

Discuss role transitions and interpersonal conflicts around childbirth



#### **Role-playing**

UPSTF. JAMA 2019

### **Other potentially beneficial interventions**

- Exercise
- Perinatal education
- Peer counseling
- Integrated behavioral health

- Medications
- Supplements
- Infant sleep education
- Acupuncture

Occurrence of Depression During 17 Weeks of Postpartum Sertraline or Placebo Treatment Among Women With Past Episodes of Postpartum Depression (Wisner et al. Am J Psychiatry 2004)



We must weigh the risks of relapse against the potential risks of medication exposure during pregnancy.



While direct evidence is lacking in regards to protection against PPD, evidence that adequate levels of omega 3, folate and iron protect against depression in general is relatively strong.



Anxiety disorders are comorbid in up to 2/3 of woman with PPD

- **Excessive worries**
- **Intrusive thoughts**
- **Compulsive behaviors**
- **Panic attacks**
- Sleep disturbance
- Muscle tension, HAs, GI sx Impaired concentration Irritability







# Perinatal anxiety is associated with negative outcomes

**Preterm labor** 

Low birthweight infants

Preeclampsia

#### May affect infant's response to stress and vulnerability to mood and anxiety disorders



http://www.drjoetatta.com/how-your-brain-changes-with-pain/

https://womensmentalhealth.org/posts/anxiety-during-pregnancy-how-does-it-affect-the-developing-fetal-brain/

**Evidence based prevention strategies for perinatal anxiety are lacking** 

### But all women benefit from

- Information
- Exercise
- Rest
- Nutrition
- Support



Rose-White. https://physicians.utah.edu/echo/pdfs/pregnancy-care-didactics/2017-06-30-perinatal-mood-anxiety-disorders-impact-prevention-treatment.pdf

# Non-pharmacological options that could reduce risk of perinatal anxiety

Mindfulness

**Progressive muscle relaxation** 

Yoga

**Guided meditation** 

Massage

Acupuncture Psychotherapy





Higher levels of physical activity during pregnancy may reduce risk of postpartum depression and anxiety

# ACOG recommends >/= 30 minutes of moderate exercise on most days



www.cosmopolitan.com/uk/body/fitness

Miller et al. Psychiatr Clin N Am 2011

# Assess for medical risk factors for depression and anxiety

TSH CBC B12 Folate Vitamin D



# Sleep disturbance is a significant predictor of PPD

### Awake >2 hours between 12 am and 6 am

<1 hr daytime sleep

## More subjective daytime sleepiness



https://ihelpmoms.com/how-i-finally-overcame-insomnia/

Miller et al. Psychiatr Clin N Am 2011

### **General sleep hygiene**

- Optimize sleep environment
- Reserve the bed for sleep and sex
- Limit screen time before bed
- Do not try to fall asleep
- Don't Watch the Clock

- Set a regular sleep schedule
- Sleep only as much as you need to feel refreshed during the following day
- Limit naps to no more than 30 minutes/day

• Minimize caffeine, nicotine, alcohol

Sleep tips specific to postpartum period

**Daytime naps** 

# Elicit support with infant feedings to increase sleep opportunity

Miller et al. Psychiatr Clin N Am 2011

# Breastfeeding can be relaxing or stressful or both





### Provide lactation support for women who want to breastfeed.

#### Support a woman's decision not to breastfeed.

Miller et al. Psychiatr Clin N Am 2011

# Unplanned pregnancy increases the risk of perinatal depression and anxiety

~1/2 of pregnancies are unplanned.



### Women with depression and anxiety are less likely to use contraception consistently or at all.

(Hall et el. Am J Obstet Gynecol 2015)

### Family planning



http://ourmomentoftruth.com

# Provide proactive and non-coercive family planning counseling

### Consider potential psychiatric side effects and other potential barriers to using contraception

Miller et al. Psychiatr Clin N Am 2011

### Conclusion

Perinatal depression and anxiety are common and can be associated with significant risks to mom and baby.

More research is needed to identify effective strategies to prevent perinatal depression and anxiety.

**Current evidence supports IPT and CBT as effective prevention strategies for perinatal depression.** 

### Conclusion

Preventive efforts such as strengthening social support; improving diet, exercise, and sleep hygiene; and stress reduction can enhance resiliency and have minimal risk.

Certain medications and supplements may also play a role in prevention of perinatal depression and anxiety but more research is needed.

#### Acknowledgements

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#### Leadership

#### **MCPAP for Moms Consulting Psychiatrists**

#### Nancy Byatt, DO, MS, MBA, FACLP

Medical Director, MCPAP for Moms UMass Memorial Medical Center / UMass Medical School

#### Leena Mittal, MD, FACLP

Assoc. Medical Director, MCPAP for Moms Brigham and Women's Hospital / Harvard Medical School

#### Margo Nathan, MD

Brigham and Women's Hospital / Harvard Medical School

#### Wendy Marsh, MD, MSc

UMass Memorial Medical Center / UMass Medical School

#### Valerie Sharpe, MD

Baystate Medical Center/ Umass Medical School

### Call 1-855-Mom-MCPAP www.mcpapformoms.org



### Thank you!

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