

Education on postpartum mood disorders needed

Information vital for society as a whole

Expectant mothers receive a lot of information over the course of their pregnancy and are sometimes inundated with things to remember. Yet one important message that needs to be stressed is that some may experience postpartum mood disorders that can adversely affect their mental health.

"It is helpful to keep the basic message pretty concise and then if a woman is having difficulty elaborate more at that point," says **Laurel R. Spence, MS, PA-C**, maternal and child health director for Baylor College of Medicine School of Allied Health Sciences physician assistant program in Houston.

What is the basic message? According to Spence, there are a couple of key points. First, postpartum disorders can happen to anyone, although there are some patients that are considered higher risk. Also, it is important to know that these disorders are medical illnesses, which respond well to treatment.

"There is such a stigma surrounding postpartum depression, we need to demystify it," explains Spence.

In addition, women should be prepared for some baby blues after they deliver. According to Mental Health America, based in Alexandria, VA, 80% of women experience them.

Baby blues are mood swings that are a result of high hormonal fluctuations and cause women to cry easily and experience a wide range of emotions, from sadness and frustration to happiness. The mood swings last about two weeks, but if a woman has more dramatic symptoms or they linger beyond two weeks, she may be dealing with a postpartum mood disorder, says Spence.

Postpartum disorders include depression, and in rare cases, psychosis. Postpartum depression has symptoms similar to clinical depression that may include fears, such as excessive preoccupation with the health of the baby, or intrusive thoughts of harming the baby. One main symptom of postpartum depression is an inability to sleep when the baby sleeps, whether day or night. Also the new mother may experience irritability and feel easily overwhelmed.

A woman who develops postpartum psychosis

loses touch with reality, experiencing delusions and hallucinations.

While baby blues are common, less than 30% of women experience postpartum depression and about 1% of women are diagnosed with psychosis.

"The reason it is very important for women to recognize the symptoms of postpartum disorders is because the symptoms don't just affect them — they affect the baby and the bonding with the baby, they affect the immediate family and extended family. When members of our society are not functioning well, which is the case with postpartum mood disorders, then that affects everyone in our society in some way," says Spence, who experienced postpartum depression with the birth of her three children.

Good education dispels myths

Education about postpartum mood disorders should be included in classes for expectant parents, says Spence. Also, health care practitioners should discuss them with their patients and make sure resources are given that can be referred to later to help people identify symptoms and seek treatment. Women who experience a postpartum mood disorder, such as depression, need medical intervention, therapeutic intervention, and social support, says Spence.

Identifying and treating disorders is important because women who have had one occurrence of postpartum depression that is not treated are 50-70% more likely to have a second occurrence says Spence. With two or more occurrences of postpartum depression, chances of a reoccurrence are elevated to as high as 90%. "It is pretty much guaranteed it will happen again," says Spence.

The Texas legislature passed a bill in 2003 mandating that resources and references be given to women who deliver in a hospital or birthing center of a certain size. The legislation was a result of the Andrea Yates case. Yates, a Houston resident, drowned her five children following the birth of her daughter. She battled with depression and had episodes of psychosis.

Spence says women such as Yates who are at high risk for postpartum disorders can be identified. A family history of mood or psychiatric disorders or prior personal history are indicators of risk.

"If a woman has had depression in the past or if there is a history of bipolar disorder or something more pervasive and chronic, then hormonal

changes may induce a more severe state in that woman," says Spence.

In addition, stressful situations such as relationship problems, marital discourse, death in the family, or a job loss can all act as triggers.

Spence says that having a baby is stressful physically and emotionally, even under the best circumstances. If a woman is at high risk for disorders, it is wise to have a postpartum plan in place with support people identified in advance, along with their duties, all of which have been agreed upon. With a plan, a woman in the middle of a crisis doesn't have to find family and friends who are willing to help.

According to Mental Health America, screening women to determine their risk for postpartum disorders and setting into place a social support system to include physicians, partners, friends, and coworkers can help prevent a crisis.

Spence says providing written materials, such as books, to women who have had problems with previous pregnancies or have a history of disorders helps them know they are not alone. Also, it gives them confidence that they can get through an episode with proper help and treatment.

A major barrier to education about postpartum disorders is the belief that new mothers should be in good spirits in all circumstances. The media reinforces the image of the happy mom and baby with smiling women giving their newborn a bottle or changing a diaper.

"In some ways, having a baby can be the best time of a woman's life, but also it can be the hardest time. Imagine a woman with a mood disorder who wants to enjoy her baby. That special time can be stolen away, especially if she does not get treatment," says Spence.

Several factors contribute to postpartum depression, according to Mental Health America.

Intense hormone fluctuation after giving birth is one factor. Also, a major event that coincides with childbirth can make a woman more susceptible, as well as life stresses such as increased demands at work.

Screening should be part of a woman's postpartum visit to her physician. Answers to simple questions, such as, "Do you sleep when the baby sleeps?" provide cues.

A society that is well educated is important as well so there is compassion and understanding. And it isn't always family members who notice a problem as they often are too close to be objective. It may be friends who notice when a new mom doesn't want them to come over to see the baby because she is too overwhelmed. That is not characteristic behavior of a new mom, explains Spence.

"One of the initiatives of the Mental Health Association in Houston is to educate both the public and health care professionals regarding postpartum mood disorders," says Spence.

(Editor's Note: Mental Health America also recommends that couples having a baby be given information on the Postpartum Support International web site. This site provides details on disorders and has an on-line list of support groups as well as chat and discussion boards. Web site: www.postpartum.net). ■

Delivering the Medicare Important Message

Education, documentation will help

If your hospital is having difficulty complying with the new Medicare rule for notifying patients of their right to appeal their discharge, you're not alone.

"It's difficult to deliver the message and everybody is struggling with the new components," says **Cassandra Barnes**, RN, MS, CCM, senior consultant for case management at Pershing Yoakley and Associates' Atlanta office.

The new rule, which went into effect July 2, updates a previous regulation establishing how hospitals must notify Medicare beneficiaries of their right to appeal their discharge, their financial responsibility, and how to appeal a hospital discharge.

The rule applies to traditional Medicare beneficiaries, beneficiaries enrolled in Medicare

SOURCE

For more information regarding educating women about postpartum mood disorders, contact:

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