

Perinatal/Postpartum Mental Health



- Perinatal and postpartum mental health conditions are underdiagnosed, underreported, and undertreated.
- Suicidal ideations and ruminations about harming the baby can occur and should prompt immediate evaluation.
- Suicide is a leading cause of maternal mortalities.

Common Causes of Perinatal/Postpartum Mental Health Conditions	<ul style="list-style-type: none"> • Physical demands of pregnancy • Traumatic childbirth event • Hormonal changes • Personal or family history of mental health conditions • Challenges of parenthood and caring for a baby • Alcohol or other substance use • Environmental, economic, or social factors
Management	<p>Unstable: stabilize or transfer to a venue capable of intervention.</p> <p>Stable: evaluation can proceed.</p> <p>Signs of Anxiety:</p> <ul style="list-style-type: none"> • Obsessively worrying about your baby or yourself • Nervousness • Irritability • Angry without reason • Unwanted or disturbing thoughts • Panic attack <p>Signs of Depression:</p> <ul style="list-style-type: none"> • Feeling sad or hopeless most of the time • Having little or no interest in things you used to enjoy • Not caring for yourself • Trouble focusing • Thoughts of hurting yourself or your baby • Sleeping too much • Eating too much or too little • Feelings of excessive guilt <p>Evaluation:</p> <ul style="list-style-type: none"> • Use the Edinburgh Depression Scale to assess depression • Complete screening for anxiety/panic disorder • Determine suicide and infanticide risk and consider inpatient psychiatric hospitalization <p>Treatment:</p> <ul style="list-style-type: none"> • For less severe symptoms, start on an antidepressant and refer to mental health services. • For severe symptoms, obtain psychiatric consultation and consider inpatient management. • For patients presenting with severe anxiety, consider: <ul style="list-style-type: none"> ○ Xray to rule out respiratory abnormalities ○ Toxicology screening
Consult	<p>If Perinatal or Postpartum Mental Health Conditions are suspected, consider consulting Psychiatry and an OB/GYN, or call the MIST Consultation Line at 800-UAB-MIST (800-822-6478)</p>

For more information or resources, please visit ALPQC.ORG.

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