

Key Clinical Considerations

When Assessing the Mental Health of Pregnant and Postpartum Women

| Assessing Thoughts of Harming Baby | |
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| Thoughts of Harming Baby that Occur Secondary to Obsessions/Anxiety | Thoughts of Harming Baby that Occur Secondary to Postpartum Psychosis |
| <ul style="list-style-type: none"> • Good insight • No psychotic symptoms • Thoughts are intrusive, scary, and cause mother anxiety • Ego-dystonic <p style="text-align: center;">Suggests <u>NOT</u> a risk of harming baby</p> | <ul style="list-style-type: none"> • Poor insight • Symptoms of psychosis (eg. auditory and/or visual hallucinations) • Delusional beliefs with distortion of reality present • Ego-syntonic <p style="text-align: center;">Suggests <u>AT RISK</u> of harming baby</p> |

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

| Risk Factors for Postpartum Depression |
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| <ul style="list-style-type: none"> • Personal history of anxiety disorder, major depression and/or postpartum depression • Family history of mood or anxiety disorder • Difficulty breastfeeding • Fetal/Newborn loss • Lack of personal or community resources • Financial challenges • 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; lack of social support • Substance use/addiction |

| Other Considerations During Clinical Assessment |
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| <ul style="list-style-type: none"> • Past history of psychiatric diagnosis • Previous experience with counseling or psychotherapy • Previous psychiatric medication • History of other psychiatric treatments such as support groups • History of substance use or substance use treatment • Excessive anxiety and worry • Trauma history • Domestic Violence |

| How to Talk about Perinatal Depression and Anxiety with Moms |
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| <ul style="list-style-type: none"> • <i>How are you feeling about being pregnant/being 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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