



# MATERNAL DEPRESSION FACT SHEET

Pregnancy can be a joyful time in a woman's life, but it can also be stressful one

**WHY SCREEN FOR DEPRESSION?**

- Maternal depression affects approximately 12% of pregnant women and up to 24% of low-income women
- Depression is one of the most common complications both during and after pregnancy
- Women suffering from maternal depression may not recognize that they have an illness; therefore they may not seek medical assistance and go undiagnosed
- Women who experience a depressive episode have a 25-50% chance of the depression recurring
- Depression has profound consequences on maternal and child health, including:
  - Maternal non-compliance with medical treatment
  - Maternal self-neglect
  - High risk for preterm delivery and low birth weight baby
  - Inability to bond and care for infant
  - Negative emotional, cognitive, and behavioral impact on infants that can lead to emotional and learning disabilities in children

**WHAT ARE THE RISK FACTORS?**

- History of maternal depression
- Family or personal history of depression or bipolar illness
- History of physical, emotional, or sexual abuse
- Substance abuse
- Complications during pregnancy and childbirth
- Lack of social support, single mothers, teens
- Stressful life events such as: loss of loved one, loss of job, miscarriage, and domestic violence

**SYMPTOMS OF DEPRESSION:**

**Any of these symptoms during and after pregnancy that last longer than 2 weeks:**

<ul style="list-style-type: none"> <li>• Feeling restless or irritable</li> <li>• Feeling sad, hopeless and overwhelmed</li> <li>• Excessive crying</li> <li>• Having no energy or motivation</li> <li>• Eating too little or too much</li> <li>• Sleeping too little or too much</li> <li>• Trouble focusing, making decisions</li> </ul>	<ul style="list-style-type: none"> <li>• Feeling worthless and guilty</li> <li>• Little interest or pleasure in activities</li> <li>• Withdrawal from friends and family</li> <li>• After pregnancy, signs of depression may also include being afraid of hurting the baby or self, and not having any interest in caring for the child</li> </ul>
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**"BABY BLUES"**

begins days after childbirth and normally goes away within two weeks.

**PERINATAL OR MATERNAL DEPRESSION**


can occur anytime during pregnancy and up to one year after childbirth.

This type of depression needs to be evaluated and treated by a licensed mental health professional.

Counseling, medication, and support groups can help.

**WHAT CAN YOU DO AS A CPSP PROVIDER?**

- Screen all pregnant women for depression at the first visit, at least once each trimester, and postpartum\*
- Use a validated screening tool such as the PHQ-9
- Refer to a licensed mental health professional in the patient's community immediately after a score of moderate/severe to severe
- Call your CPSP Psychosocial Consultant, Laura Wilson, LCSW, at (213) 639-6423 for questions and training on maternal depression and use of the PHQ-9.



\* Depression Screening is Reimbursable Through CPSP

**Depression Can Be Treated!**