

Maternal mental health problems – the impact in numbers

25 May 2018, by Carolyn Chew-Graham



Pregnancy and after can be a turbulent time. Credit: Shutterstock

As many as [one in five](#) women develop a mental health problem during pregnancy or in the first year after the birth of their baby. The distress this causes women and their families, the negative impact on their health and well-being, and the economic costs to individuals, the NHS and the nation are considerable.

Maternal mental [health](#) problems can range from anxiety, low mood and [depression](#) to psychosis. Depression and anxiety are the [most common](#) mental health problems during pregnancy, with around 12% of [women](#) experiencing depression and 13% experiencing anxiety at some point; many women will experience both. Depression and anxiety also affect 15-20% of women in the first year after childbirth.

Between [one and two in 1,000 women](#) who have given birth are affected by [postpartum psychosis](#), a serious mental illness. Symptoms vary and can change rapidly. They can include high mood (mania), depression, confusion, hallucinations and delusions. In some of the most extreme cases,

there is a risk of suicide – it is [estimated that a quarter](#) of all maternal deaths are related to mental health problems.

Some women will have suffered these mental health problems before, but for others, symptoms are new and frightening. Rarer problems include panic disorder, obsessive compulsive disorder and exacerbation of eating disorders. Domestic violence is also now [increasingly recognised](#) as a risk factor for perinatal depression, anxiety and post-traumatic stress disorder (PTSD).

The impact of maternal mental health problems goes further. The symptoms may lead to poor bonding with the baby and difficulties with breastfeeding (which can itself lead to distress, anxiety and low mood). Maternal depression can have far reaching consequences on the development of the baby, with problems extending into childhood and adolescence. Research [has shown](#) potential impacts on cognitive development, including language development, conduct and school performance.

[One in eight partners](#) also report [mental health problems](#) and describe a lack of support. Paternal mental health problems [can also](#) impact [negatively](#) on child development.

Maternal mental health problems [are estimated](#) to cost the UK £8.1 billion each year. A [recent working paper](#) also suggested that postnatal depression can still have a direct effect on maternal employment five years after birth – even when the effects of low mood are no longer present.

Is help readily available? The short answer is no. It has [been suggested](#) that only 7% of women who experienced mental health symptoms were referred to specialist mental health care. Yet when mental health problems are diagnosed early, these effects can be mitigated.

A woman comes into contact with midwives, health [Conversation](#). Read the [original article](#). visitors, general practitioners and obstetricians during the course of her pregnancy. It is vital that all of these health care professionals are alert to the possibility of problems and are aware of how common they are. Health care professionals need to enquire about mood at every contact, and refer the women for [psychological support](#) as early as possible. And women should feel supported by their health care professional to talk openly about their feelings. Support also needs to be available for partners, as part of a wider approach of treating maternal mental health and limiting the impact it has on the whole family.

A look ahead

Fortunately, the situation and awareness of the condition is getting better thanks in part to the many women who are [sharing their stories](#) and ask for help.

Provided by The Conversation

The Royal College of General Practitioners [developed a toolkit](#) that offers resources for GPs to facilitate the identification and management of maternal mental health problems. This toolkit also includes resources that the GP can signpost the mother and her partner to. [A report](#) from the Royal College of Midwives highlighted the stigma around disclosing [mental health problems](#). This stigma must be broken down – and facilitating women to raise mood [problems](#) is a vital part of this.

Following the publication of The Five Year Forward View for Mental Health report, NHS England [committed to £365m](#) in extra funding to increase access to specialised perinatal mental health support, so that by 2020-21 an additional 30,000 women will be able to receive local specialised treatment.

For all health care professionals supporting women who are pregnant, giving birth or in early motherhood, the aim should be that all women who feel unwell or have concerns about their mood can feel confident telling a health care professional how they feel, and know that they will get the support they need.

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