

Prior eating disorders linked to long-term depression risk for mothers

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A history of eating disorders and body image concerns before or during pregnancy are associated with future depressive symptoms among mothers, finds a new UCL-led study published in the *British Journal of Psychiatry*.

"We found that women who have had an <u>eating</u> <u>disorder</u> at any point before childbirth, even if it was years earlier in adolescence, were more likely to experience <u>depressive symptoms</u> during pregnancy and up to 18 years after the birth of their child," said the study's lead author Dr. Francesca Solmi (UCL Psychiatry).

"This finding suggests that many people with eating <u>disorders</u> might not fully recover since we know that eating disorders and depression often happen at the same time."

The researchers used data from the 'Children of the 90s' cohort study, including 9,276 women.

Previous studies had suggested that depressive symptoms among mothers with eating disorders might improve after the perinatal period, but those studies didn't have such a long follow-up time to confirm that the increased risk of depressive symptoms does in fact persist for women who have had an eating disorder.

The research team found that women who had ever had anorexia nervosa or bulimia nervosa experienced more depressive symptoms over an 18-year follow-up than those who had never had an eating disorder.

"Depressive symptoms in mothers have been shown to be associated with a number of negative outcomes for their children, such as emotional and behavioural problems. It is therefore important, to identify and treat eating disorders early, as these could be one potential cause of the depressive symptoms," said Dr. Solmi.

"We should also identify pregnant women with an eating disorder, so that they can be provided with mental health support. This could benefit both mother and child in the long run."

Dr. Abigail Easter, one of the authors of the paper who has developed <u>training materials</u> to help identify eating disorders in pregnancy, added: "There is a need for more training for practitioners and midwives on how to recognise eating disorders in pregnancy, which could help to reduce the long-term impact of mental ill-health."

Current guidelines from the National Institute for Health and Care Excellence (NICE) recommend that health care professionals use a questionnaire to identify depressive symptoms in pregnant women. The current study supports the value of this, as well as for identifying eating disorders.

"There's a lot of stigma around both depression and eating disorders, so many people might not feel comfortable talking about it or seeking help.

Assessment of mental illness in pregnancy, as standard practice, could help health professionals



pick up on signs of depression and/or eating disorders at this crucial stage of life," said first author Yu Wei Chua, who began the study at UCL before moving over to the University of Strathclyde.

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