Postpartum Depression

Part I
Alcohol Use and Misuse

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Part I Postpartum Depression: Alcohol Use and Misuse



Learner Outcome

Title of Presentation: Postpartum Depression: Alcohol Use and Misuse

Part I:

The purpose/goal(s) of this activity is for participants to be able to understand the reasons alcohol is used during postpartum

(1) learning objective: Providers to open conversation with pregnant women during prenatal visits

0.5 Contact Hours

This activity has been approved by Northeast Multistate Division (NEMSD) for 0.5 contact hours. NEMSD is accredited as an approver of nursing continuing professional development by the American Nurses Credentialing Center's Commission on Accreditation



Disclosures and Successful Completion

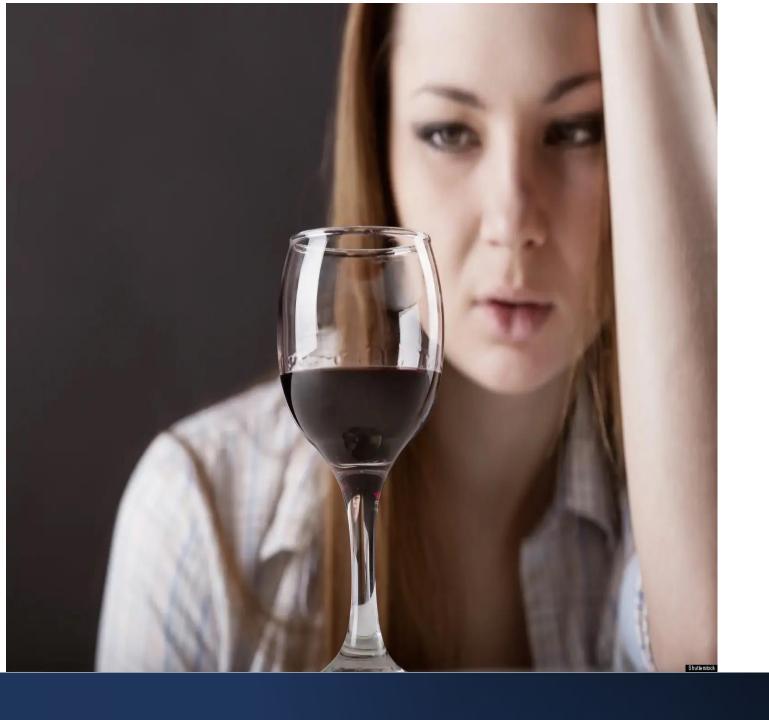
Disclosures:

- No relevant financial relationships were identified for any other individuals with the ability to control the content of the activity.
- There will be no discussion of off-label usage of any products

Successful Completion:

 To successfully complete this activity and receive 0.5 Contact Hour(s), you must attend the entirety of the program and complete the post-test and evaluation at the end of the session





Conversation & Discussion

Part I:

Postpartum Depression: Alcohol Use and Misuse

Part I: Reasons for consuming alcohol

Part II:

Postpartum Depression: Alcohol Use and Misuse (Identifying Concerns)

Part II: Screening Tools to Identify Alcohol Use Concerns

Postpartum Depression

- Postpartum depression (PPD) is a type of depression that happens after someone gives birth
- Affects 1 in 7 mothers
- Previous diagnosis increases your chance for a current diagnosis by 30%
- experience alternating highs and lows, frequent crying, irritability and fatigue, as well as feelings of guilt, anxiety and inability to care for the infant or self





Postpartum Depression

Symptoms can begin after birth up to one year

Postpartum can last up to 2 years

Medication can be a treatment recommendation

Psychotherapy is effective



Postpartum

The first 120 days are critical

National Survey on Drug Use and Health (NSDUH) cross-sectional survey data found that from third trimester of pregnancy to the first 3 months postpartum, women with any reported alcohol use in the past month went from 6.2 to 31.9% and by 11 months postpartum 52% were drinking (Laborde & Mair, 2012).

Surveys have shown that at 3-5 months (90-150 days postpartum) mothers were self-reporting binge drinking



Types of Postpartum Depression

Postpartum Psychosis: is an extremely severe form of postpartum depression and requires emergency medical attention. Symptoms include severe agitation, confusion, feelings of hopelessness and shame, insomnia, paranoia, delusions or hallucinations, hyperactivity, rapid speech or mania.

An increased risk of suicide and risk of harm to the baby.

Treatment will usually include hospitalization, psychotherapy and medication.



"Baby Blues" vs. Postpartum Depression

Baby Blues:

- Last approximately 10 days after birth
- Crying
- Loss of appetite
- Trouble sleeping
- Quick Mood changes

Postpartum Depression

- Symptoms are more intense
- Thoughts of harming the baby
- Extreme loss of motivation and extreme fatigue
- Feeling anxious
- Thoughts of suicide



Edinburgh Postnatal Depression Scale

- Administered by during postpartum visit or pediatrician visit
- 10 questions based on 7days
- Maximum score: 30
- Possible Depression: 10 or greater
- Always look at item 10 (suicidal thoughts)
 - 10. The thought of harming myself has occurred to me
 - Yes, quite often
 - Sometimes
 - Hardly ever
 - Never



Edinburgh Postnatal Depression Scale¹ (EPDS)

Name:		Address: _	
Your Date of Birth:			
Baby's Date of Birth:		_ Phone:	
As you are pregnant or have recently had a baby, we would like to know how you are feeling. Please check the answer that comes closest to how you have felt IN THE PAST 7 DAYS , not just how you feel today. Here is an example, already completed.			
I have felt happy: ☐ Yes, all the time ☐ Yes, most of the time ☐ No, not very often ☐ No, not at all	This would mean: "I l Please complete the		of the time" during the past week. e same way.
In the past 7 days:			

Literature

 Hayaki, J., Holzhauer, C.G., Epstein, E. E., Cook, S. Gb, A., and Lorenzo, A.C. (2020)

• Laborde, N.D. and Mair, C. (2012)

Metcalf, C. and Dimidijian, S. (2020)



Hayaki, J., Holzhauer, C.G., Epstein, E. E., Cook, S. Gb, A., and Lorenzo, A.C. (2020)

Menstrual Cycle Phase, Alcohol Consumption, Alcohol Cravings, and Mood Among Women in Outpatient Treatment for Alcohol Use Disorder

- Study examined 59 women's drinking and craving intensity across the menstrual cycle.
- There was moderating effect of baseline depression and emotional distress during the mid-late luteal phase and/or menses, among women receiving AUD treatment.
- Mid-late luteal phase and/or menses represent high-risk times during the menstrual cycle for the experience of alcohol cravings as well as for drinking frequency and intensity occurs between 15-28 days before the end of the cycle
- Women with higher baseline depression also reported higher alcohol craving intensity across the cycle (luteal phase).



Hayaki, et. al.

The authors also suggest that depressed mood and the self reported experience of emotional distress during the mid-late luteal phase and/or menses is associated with the menstrual cycle phase and drinking behavior.

For women with AUD, this constant state of negative affect may manifest as sustained alcohol craving intensity.

Laborde, N.D. and Mair, C. (2012) Alcohol Use Patterns Among Postpartum Women

- According to the authors the postpartum period is a sensitive time for the risk of alcohol use / misuse due to increased stress and isolation in the first few weeks after birth along with new responsibilities
- There is a connection between stress and excessive alcohol use.
- There is also a connection between increased responsibilities and social norms that at times protect a woman from using alcohol excessively or using at all



Laborde con't

- New mothers who may be at a greater risk for harmful drinking behaviors because of added stress and inadequate supports.
- New mothers who smoke are at a greater risk for drinking any alcohol or drinking more frequently than new mothers who don't smoke
- According to the SAMHSA 15.5% of new mothers as well as between 3- and 5-months postpartum reporting binge drinking



Metcalf, C. and Dimidijian, S. (2020)

In a Mother's Voice: Observing Social–Emotional Aspects of Postpartum Daily Life

- A study that used naturalistic observational recordings of the daily environments and social interactions of 50 postpartum women using the electronically activated recorder (EAR).
- The authors measured the feasibility, acceptability, and compliance of collecting naturalistic ambient sounds with postpartum women (i.e. laughter, crying, singing and sighing)
- The authors evaluated the frequency of social—emotional characteristics and noticed that social supports were few since the mother did not have a stressful environment



Metcalf, C. and Dimidijian, S. (2020) con't

- The postpartum period for this sample was observed to be emotionally nuanced, containing predominantly positive experiences along with negative expressions and potentially difficult experiences.
- Of note, anger and scorn occurred in about 1% of valid audio files and were among the top six most frequently coded expressions.
- The participants were in a low stress environment and had adequate supports.



Postpartum

Vocational and Career reengagement

Familial responsibilities

Excess support is at a minimum

Guilt /
Attachment
concerns



Vocational and Career engagement

Postpartum is from birth up to 2 years

Women are returning to work and careers between 8-12 weeks into postpartum

Women are seeking safe spaces to breastfeed and / or pump

Increased stress and demands in the workplace because of changes and downsizing positions

Family Responsibilities

- Increased responsibilities for taking care of an infant
- Increase for incurring expenses such as daycare
- Taking care of an infant at their most fragile time and understanding the wants and needs and demands of the infant
- Increased pressure of social media to be a perfect parent and to adjust without flaws



Excess support is at a minimum

- Lack of social supports or family supports
- Lack of experience with learning to understand when to request help from the support system
- Feeling overwhelmed because the increase of investment time for the infant but lack of self-care time
- Support is lacking because of travel distance between the home, daycare and the work environment



Guilt and Attachment Concerns

- The mother has guilt feelings for returning to work
- Feeling that the child is being abandoned and / or will possibly get injured out of the mother's site
- Developing the attachment style and with the parenting side



Why Women Use / Misuse Alcohol?

Top Three Reasons:

- Regulate sleep
- Regulate emotion
- Coping strategy to manage stress



Next Steps

Scoring high on the Edinburgh Postnatal Depression Scale

Questioning the strategies used to cope with stress

Asking if Alcohol is one of the coping strategies

Begin to screen for alcohol use (socially and privately)

Overview of Part I

 There is a difference between Baby Blues and Postpartum depression

 Administer the Edinburgh Postnatal Depression Scale to determine if there is a concern with Postpartum Depression Important to have proper supports when retuning to work and changing roles in the family

 Identify if the woman is using alcohol as a coping strategy



References

- Hayaki, J., Holzhauer, C.G., Epstein, E.E., Cook, S., Gaba, A., and Lorenzo, A.C. (2020), Menstrual cycle phase, alcohol consumption alcohol cravings and mood among women in outpatient treatment for alcohol use disorder. Psychology of Addictive Behaviors, Vol. 34 (6), p. 680-689.
- Laborde, N.D., Mair, C. (2012). Alcohol use patterns among postpartum women. Maternal Child Health. December 16(9), p. 1810-1819. http://doi:10.1007/s 10995-011-09255-3.
- Metcalf, C. and Dimidijian, S. 92020). In a mother's voice: Observing social-emotional aspects of Postpartum dally life. Journal of Family Psychology, Vol. 34 (3), p. 269-278.



Questions?

Thank you for your interest and engagement

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