

## Research Evaluates Risk Factors for Postpartum Depression in Mothers of Preterm Infants

*Research team from Women & Infants Hospital publishes in The Journal of Pediatrics*

PROVIDENCE – Postpartum depression is the most common complication of pregnancy and childbirth, affecting up to 15 percent of all women within the first three months following delivery. Research has shown that mothers of infants born prematurely have almost double the rates of postpartum depression, particularly during their time in the neonatal intensive care unit (NICU).

Research led by **BETTY R. VOHR, MD**, director of Women & Infants' Neonatal Follow-Up Program and professor of pediatrics at The Warren Alpert Medical School of Brown University, found that there are certain social and emotional factors that further increase the risk of postpartum depression in mothers of preterm infants. The research, entitled "Social Emotional Factors Increase Risk of Postpartum Depression in Mothers of Preterm Infants," has been published in *The Journal of Pediatrics*. Lead author is **KATHELEEN HAWES, PhD, RN**, of the Center for Children and Families at Women & Infants Hospital of Rhode Island and assistant professor (adjunct) in the

Department of Pediatrics at the Alpert Medical School.

"We found mothers with a previous mental health disorder and experiencing negative perceptions of herself and her infant at NICU discharge were at increased risk for depression one month post discharge, regardless of the infant's gestational age at birth," explained Hawes.

The study included 724 mothers of preterm infants who were cared for more than five days in the NICU and participated in a Transition Home Program. Families in the program received enhanced support and education about their infants from former NICU parents trained as family resource specialists. Participants completed an evaluation prior to discharge to determine their perceptions of NICU staff support, infant well-being, maternal well-being (emotional readiness/competency), and maternal comfort (worry about her infant). Mental health history and social risk factors were also obtained by the researchers. At one month post discharge, the Edinburgh Postnatal Depression Scale was administered.

Hawes said, "Mothers of early, moderate and late preterm infants reported similar rates of possible depression – 20%, 22% and 18% respectively – one month after NICU discharge. A history of mental health disorder, decreased perception of maternal well-being, decreased maternal comfort regarding her infant, and decreased perception of family cohesion were also associated with possible depression at one month post discharge."

Hawes and her colleagues concluded that comprehensive mental health assessment prior to discharge is essential to identify women at risk and provide appropriate referrals. She said, "Comprehensive transition home assessment and interventions to reduce anxiety and bolster maternal mental health, confidence and readiness, along with post discharge assessment, are needed to identify, treat and support mothers of preterm infants."

The research team also included Women & Infants/Brown University colleagues **ELISABETH MCGOWAN, MD**; **MELISSA O'DONNELL, MSW**; and **RICHARD TUCKER, BA**. ♦

## Women & Infants Participating in National Pelvic Floor Disorders Network

PROVIDENCE – Women & Infants Hospital has been selected by the National Institutes of Health's (NIH) to participate in the Pelvic Floor Disorders Network (PFDN) for a second consecutive five-year cycle. Women & Infants is one of just seven medical centers from across the US, and the only one in the Northeast, to work collaboratively to develop and perform research studies related to women with pelvic floor disorders.

Principal investigator at Women & Infants is **VIVIAN SUNG, MD, MPH, FACOG** of Women & Infants' Division of Urogynecology and Reconstructive Pelvic Surgery and associate professor at The Warren Alpert Medical School of Brown University.

"Pelvic floor disorders are an issue of growing importance, from both an individual and public health point of view," said Dr. Sung. "Participating in such high-level, national research will offer us the opportunity to test and refine the most appropriate treatment protocols for women for



generations to come. From a patient perspective, being part of this network also brings new and cutting edge treatment options to women in our region."

The five-year grant from the NIH's *Eunice Kennedy Shriver* National Institute of Child Health and Human Development will enable members of the Network to design and conduct large-scale, high quality studies to significantly advance the care of women with pelvic floor disorders. Studies include treatments and prevention of urinary incontinence, fecal incontinence, pelvic organ prolapse, and other sensory and emptying abnormalities of the lower urinary and gastrointestinal tracts.

Studies currently enrolling include a randomized trial studying the most effective procedures for prolapse of the vagina, a randomized trial studying different treatment options for controlling bowel leakage, and a randomized trial evaluating the best treatments for mixed urinary incontinence. ♦