

## Mental health in pregnancy

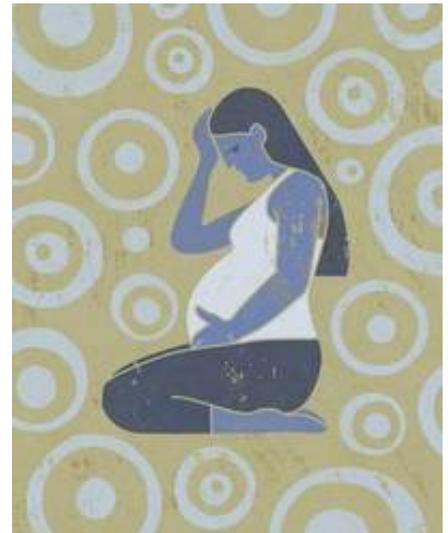
### About this leaflet

This leaflet is written for:

- women with mental health problems during pregnancy
- pregnant women who have had mental health problems in the past
- their partners, family or friends.

The leaflet will help you learn about:

- mental health problems in pregnancy
- how to stay well during pregnancy and after the birth of your baby
- how to decide whether or not to take medication in pregnancy
- what help and support there is for pregnant women with mental health problems.



### How can my mental health be affected by pregnancy?

Many women have good mental health during pregnancy. Some women may already have a mental illness when they get pregnant. Others worry about mental health problems they have had in the past. They fear getting ill again during pregnancy or after childbirth. Some women have mental health problems for the first time in pregnancy. Unfortunately, pregnancy does not stop people from having mental health problems. Women who stop medication when they get pregnant have a high risk of getting ill again (e.g. 7 out of every 10 women who stop **antidepressants** in early pregnancy become unwell again).

**Depression** and **anxiety** are the most common mental health problems in pregnancy. These affect about 10 to 15 out of every 100 pregnant women. Women also experience many other mental health problems during pregnancy, just like at other times.

How your mental health is affected during pregnancy depends on many things. These include:

- the type of mental illness you have experienced
- whether you are on treatment
- recent stressful events in your life (such as a death in the family or a relationship ending)

- how you feel about your pregnancy. You may or may not be happy about being pregnant. You may have upsetting memories about difficulties in your own childhood.

Symptoms of mental illness in pregnancy are similar to symptoms you have at other times. Some symptoms might focus on the pregnancy. For instance, you may have anxious or negative thoughts about your pregnancy or your baby. You may find changes in your weight and shape difficult, particularly if you have had an **eating disorder**.

Sometimes pregnancy-related-symptoms can be confused with symptoms of mental illness. For example, broken sleep and lack of energy are common in both pregnancy and depression.

Some people find it more difficult than others to cope with the changes and uncertainties which pregnancy brings. For some women, it can be a very happy and exciting time. Others may have mixed, or negative, feelings about being pregnant.

Many women worry about how they will cope with having a baby. Worries about some of the following are common when you are pregnant:

- changes in your role (becoming a mother, stopping work)
- changes in your relationships
- whether you will be a good parent
- fear that there will be problems with the pregnancy or the baby
- fear of childbirth
- lack of support and being alone.

### **What if I have had mental health problems in the past, but am well now?**

You should be referred to a mental health service if you are pregnant and have ever had:

- a serious mental illness, such as **schizophrenia**, **bipolar disorder**, schizoaffective disorder or severe depression
- treatment from mental health services
- postpartum psychosis or severe **postnatal depression**
- a severe anxiety disorder such as **Obsessive Compulsive Disorder**
- an eating disorder, such as anorexia or bulimia.

It is important to get specialist advice even if you are well during this pregnancy. Women who have had these illnesses have a high risk of becoming unwell after childbirth. Mental health professionals will discuss care and treatment choices with you. They will help you make a plan for your care, with your midwife, obstetrician, health visitor and GP.

Talk to your GP if you have had any other mental health problems. Often your GP will be able to advise about care and treatment. This will depend on the illness you have had and how severe it has been.

### **What treatment is available for mental health problems during pregnancy?**

The best treatment for you will depend on the type and severity of illness you have experienced. Both medication and psychological therapies (talking treatments) can help.

## Medication

It is important to discuss medication with your GP or psychiatrist. They will give you the information you need to help you decide what is best for you and your baby. You may decide to continue, change or stop your medication.

If possible, you should talk to your doctor before you become pregnant. However, many pregnancies are unplanned. In that case, you should see your doctor as soon as you know you are pregnant. It is very important that you don't stop your medication suddenly, unless your doctor tells you to. Stopping treatment suddenly can cause people to relapse more quickly. It can also cause side-effects. It may be best for you to continue medication during pregnancy.

Some medications have been used in pregnancy for many years. A few medications are known to cause problems in some babies if taken in pregnancy. In many cases, we simply do not have enough information to be absolutely sure that a treatment is safe.

Your doctor can help you to think carefully about the advantages and disadvantages of choosing a particular medication. In order to make this decision, you will need to think about:

- How unwell you have been in the past
- How quickly you become unwell when you stop medication
- Medications you have taken:
  - which treatments have helped you most?
  - have some medicines caused side-effects?
- Up-to-date information about the safety of certain medications in pregnancy.
- What might happen if you are unwell during pregnancy. This includes:
  - you may not take good care of yourself.
  - you might not attend appointments with your midwife. This means you may not get the care you need.
  - people who use drugs and alcohol may use more when unwell. This can be harmful for your unborn baby.
  - you may need a higher dose of medication if you become ill. Sometimes you may need two or more medications to treat a relapse. This might be more risky for your unborn baby than if you take a standard dose of medication throughout pregnancy.
  - you may need in-patient treatment.
  - you may still be unwell when your baby is born. You may then find it more difficult to care for your baby. It may also affect your relationship with your baby.
  - if your illness is not treated, this may be more harmful for your baby than the effect of medication. Untreated mental illness may cause a number of problems. For example, some research studies have found babies are more likely to have low birthweight if their mother has depression in pregnancy. Untreated mental illness can also affect a baby's development later on.

## Psychological therapies

A talking treatment may be helpful for your mental health problem. For some women this can be used instead of medication. Others may need a talking treatment as well as medication.

Some psychological therapies services will see you more quickly if you are pregnant. Your doctor can advise you about referral in your local area.

## **Which professionals and services will I need to see during my pregnancy and how can they help me?**

A number of services and professionals offer help and support during pregnancy.

### **Maternity services**

Your midwife will ask questions about your physical and mental health. You should tell your midwife if you have had mental health problems. She can ensure you get the care and support you need.

It is important that you attend your antenatal appointments during pregnancy. In some areas midwives can visit you at home.

### **Your GP**

You should talk to your GP if you are worried about mental health problems in pregnancy. Your GP can provide information, advice and treatment. He/she can refer you to a mental health or psychological therapies service if needed

### **Community Mental Health Teams (CMHTs) and Specialist Perinatal Mental Health Services**

If you are already under the care of a **CMHT**, you should tell your care co-ordinator that you are pregnant. She/he can tell you about treatment and support available for pregnant women, and new mothers, in your area.

If you are not under the care of a CMHT, but have been in the past, you should talk to your GP. You may need the support of the CMHT during pregnancy and for a few months after birth. This will depend on the type of illness you have had.

In some areas, there are specialist mental health services for pregnant and postnatal women. These are called Perinatal Mental Health Services. Often these teams work jointly with CMHTs. Your GP and midwife can tell you whether this type of service is available in your area.

### **Children and Families Social Services**

In some cases your doctor, midwife or another professional may want to refer you to Children and Families Social Services.

Social workers from Children and Families Social Services focus on children's wellbeing. They provide a range of care and support for children and families. This depends on the needs of the child and other family members. The professional who wants to refer you will discuss the reasons for this with you.

### **Your health visitor**

Health visitors see all women with new babies. They offer advice and help about the baby's health, feeding, sleep and other issues. In some areas health visitors may see you even before your baby is born.

### **Working together and pre-birth planning meetings**

There are usually several professionals involved in your care during pregnancy. They need to work together with you and your family to make sure you have the care and support you need.

If you have had a severe mental illness, it is helpful to have a meeting to plan your care during pregnancy. This meeting will include you, your partner and all the professionals involved in your care. You may also want to bring other close family members or friends.

The meeting helps everyone agree a plan for your care during pregnancy, delivery, and for the first few months after birth. This plan will be written down and you should have a copy.

### **Will anyone else be able to help or support me during pregnancy?**

Some people have more support than others. Your main support may be your partner, family or friends. It is helpful if the people closest to you know about your mental health problems. If you are at risk of becoming unwell, they should know what symptoms to look out for. They also need to know who to contact for help if they are worried about you. Your partner, family and friends can also help in practical ways - with cooking and cleaning for instance.

Many other sources of help and support are available for pregnant women and new mothers. This will vary depending on where you live. Your midwife and health visitor should be able to tell you what is available in your area. There is a list of helpful organizations at the end of this leaflet.

## What else can I do to maintain my mental wellbeing during pregnancy?

- Eat a healthy, balanced diet.
- Reduce your alcohol intake. You should stop drinking if possible. Otherwise you should not drink more than 1-2 units, once or twice a week.
- Stop smoking (ask your midwife or GP about 'stop smoking' services).
- Find some time each week to do something which you enjoy, improves your mood or helps you to relax.
- Let family and friends help you with housework, shopping etc.
- Exercise (ask your midwife about exercise in pregnancy and local exercise classes).
- Discuss any worries you may have with your family, your midwife or GP.
- Get regular sleep.

## Where can I get further information and help?

### National Childbirth Trust

Helpline: 0300 330 0772. Advice, support and counselling on all aspects of childbirth and early parenthood.

### Netmums

A website offering support and information on pregnancy and parenting. There is a specific section of the website offering support. There is also information on local resources and support groups.

### The Association for Postnatal Illness (APNI) Tel: 020 7386 0868

Telephone helpline and information leaflets for women with postnatal mental illness. Also a network of volunteers (telephone and postal), who have themselves experienced postnatal mental illness.

### Family Action Tel: 020 7254 6251

Support and practical help for families affected by mental illness. Includes 'Newpin' services - offering support to parents of children under 5 whose mental health is affecting their ability to provide safe parenting.

**Drinkaware:** Check the facts about alcohol and pregnancy.

### Sure Start Children's Centres

Ask your midwife for details of your local Children's Centre. Sure Start Children's Centres support children under the age of five and their families. They provide advice and support for parents. There are often parenting classes, drop-in sessions, outreach services, early education and childcare, and links to training and employment opportunities.

## Samaritans

Helpline: 08457 90 90 90; (Ireland): 1850 60 90 90; e-mail: [jo@samaritans.org](mailto:jo@samaritans.org). National organisation offering support to those in distress who feel suicidal or despairing and need someone to talk to. The telephone number of your local branch can be found in the telephone directory.

## Further reading

Curham, S. Antenatal & Postnatal Depression. Practical advice and support for all sufferers. Vermilion, 2000.

## References

*Antenatal and postnatal mental health: clinical management and service guidance. NICE Clinical Guideline 45. (2007) National Institute for Clinical Excellence: London*

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*Please note that we are unable to offer advice on individual cases. Please see our [FAQ](#) for advice on getting help.*