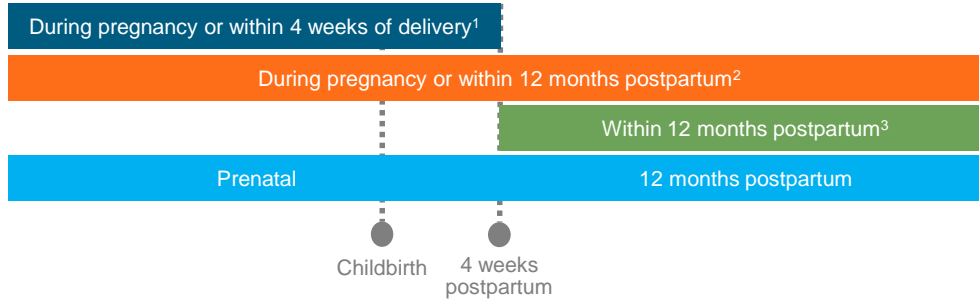


# POSTPARTUM DEPRESSION (PPD)

Expert opinions vary regarding the timing of onset of PPD symptoms.<sup>1-3</sup>

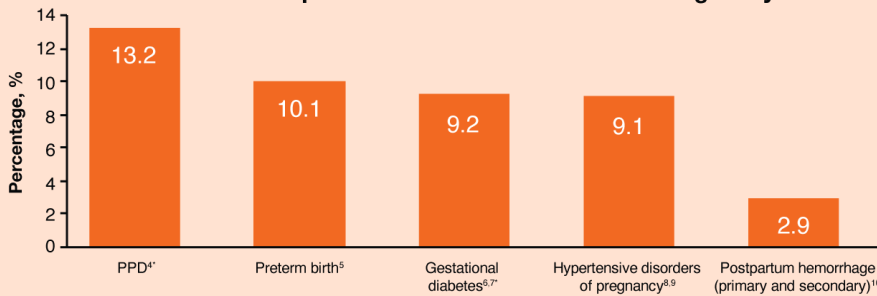
American Psychiatric Association  
The American College of Obstetricians and Gynecologists  
World Health Organization



**PPD is not the same as the "baby blues."** PPD is a serious medical condition that can pose risks to the mother, child, and their family.<sup>3</sup>

PPD symptoms are among the most common complications during and after pregnancy.<sup>4-10</sup>

Medical Complication Prevalence Related to Pregnancy



\*Fully or partly self-reported symptoms

In the **United States**, estimates of mothers with self-reported symptoms of PPD in 2018 varied by state from 9.7% to 23.5%, with an **overall prevalence of 13.2%**.<sup>4</sup>

The risk of PPD in women with a history of depression has been shown to be higher when compared to women without a history of depression.<sup>12</sup>



Anxiety can be a prominent symptom of PPD.<sup>17-20</sup>

and has been associated with more severe disease outcomes.<sup>21</sup> This may manifest as<sup>22</sup>:

- Intrusive and/or obsessive thoughts about the newborn
- Maladaptive anxiety-related behaviors such as:
  - Frequent checking
  - Distraction
  - Self-assurance

PPD = postpartum depression.

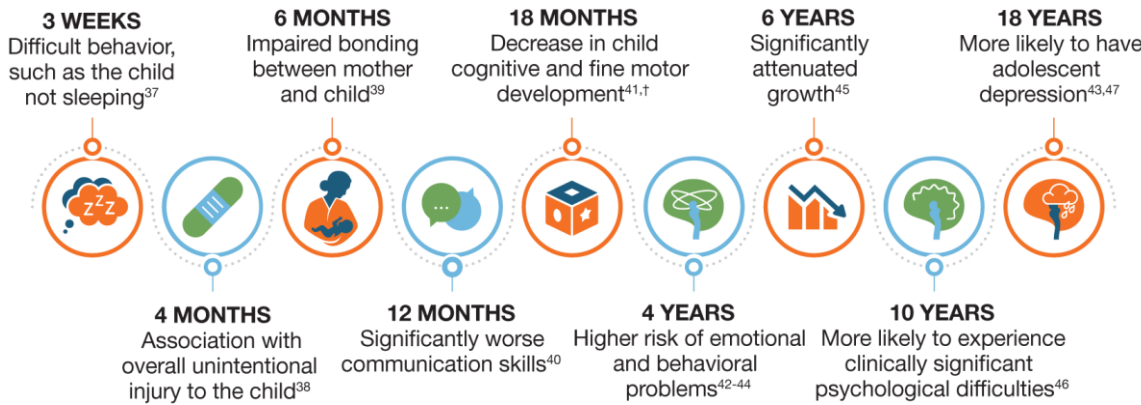
# POSTPARTUM DEPRESSION (PPD)



## PPD can affect maternal outcomes.\*

- Women with PPD may present with **mood, cognitive, social, and somatic symptoms**.<sup>1,23</sup>
- PPD may impair a mother's **overall function**,<sup>24,25</sup> including the ability to:
  - **care for their baby**<sup>26,27</sup> and **assume other responsibilities**.<sup>24,25</sup>
  - **care for their own physical needs**.<sup>25</sup>
  - **perform household chores**.<sup>28</sup>
- Women experiencing depressive symptoms during pregnancy may have an **increased risk of preterm birth**<sup>29,30</sup> and/or **an infant with low birth weight**.<sup>29</sup>
- Suicidality during or after pregnancy **may be related to mental health conditions**.<sup>31-35</sup>

## PPD symptoms have been associated with the following impacts on childcare and developmental outcomes.<sup>36</sup>



Short- and long-term impacts on the physical<sup>37-42</sup> and mental<sup>43-47</sup> development of children of mothers with PPD symptoms may last all the way into adulthood.<sup>47</sup>

## Women may fall out of the perinatal care cascade.‡

- Based on a 2016 review of the PPD literature, only **6.6%** of women with PPD received adequate treatment approaches and **50%-70%** may have gone undiagnosed.<sup>48</sup>
- **Stigma and discrimination** were frequently cited as deterrents to seeking help from a professional source.<sup>49</sup>

Implementing routine screening policies for PPD can lead to improved screening rates,<sup>50-54</sup> increased identification of depression,<sup>51</sup> better connection to care,<sup>53,54</sup> and reduced duration or severity of depressive symptoms.<sup>50, 55-57</sup>

## Mothers with PPD have been shown to have higher healthcare costs, more outpatient visits, and higher prescription painkiller use.§

- Mothers with PPD experienced **higher all-cause healthcare costs paid by the insurer** than mothers without PPD (\$19,611 vs \$15,410; p<0.01).<sup>58</sup>
- Mothers with PPD made on average **11 more outpatient visits and used more prescription painkillers** during their first year postpartum than mothers without PPD.<sup>58,59</sup>
- Households of PPD mothers experienced **22% higher medical costs** postpartum than those of mothers without PPD.<sup>58</sup>

\*No studies included patients with a confirmed clinical diagnosis of PPD. All patients were identified using a screening tool, such as the Edinburgh Postnatal Depression Scale, rather than a diagnostic tool.  
 †Based on data from self-reported measures of maternal depression, trait anxiety, and personality traits in a cohort during pregnancy and 8 weeks postpartum. Neurodevelopment at 18 months was assessed using the Bayley Scales of Infant and Toddler Development (3rd ed).  
 ‡Based on data from the comprehensive postpartum care visits from >20 million women in the annual National Ambulatory Medical Care Surveys from Dec 2008 to Dec 2016 in the United States.<sup>49</sup>  
 §A retrospective, observational cohort study based on US administrative claims data collected by Optum Health Care Solutions, Inc., between 1 Jan 2009 and 1 Mar 2016, found the following about mothers with PPD (n=7769).<sup>59</sup>  
 PPD = postpartum depression.  
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