

Postpartum Depression Diagnosis and Treatment in the Black Community

Topaz Sampson-Mills, MD

June 2, 2022, 12:00 PM





MHTTC

Mental Health Technology Transfer Center Network

Funded by Substance Abuse and Mental Health Services Administration

The purpose of the MHTTC Network is technology transfer - disseminating and implementing evidence-based practices for mental disorders into the field.

Funded by the Substance Abuse and Mental Health Services Administration (SAMHSA), the MHTTC Network includes 10 Regional Centers, a National American Indian and Alaska Native Center, a National Hispanic and Latino Center, and a Network Coordinating Office.

Our collaborative network supports resource development and dissemination, training and technical assistance, and workforce development for the mental health field. We work with systems, organizations, and treatment practitioners involved in the delivery of mental health services to strengthen their capacity to deliver effective evidence-based practices to individuals. Our services cover the full continuum spanning mental illness prevention, treatment, and recovery support.

MHTTC Network

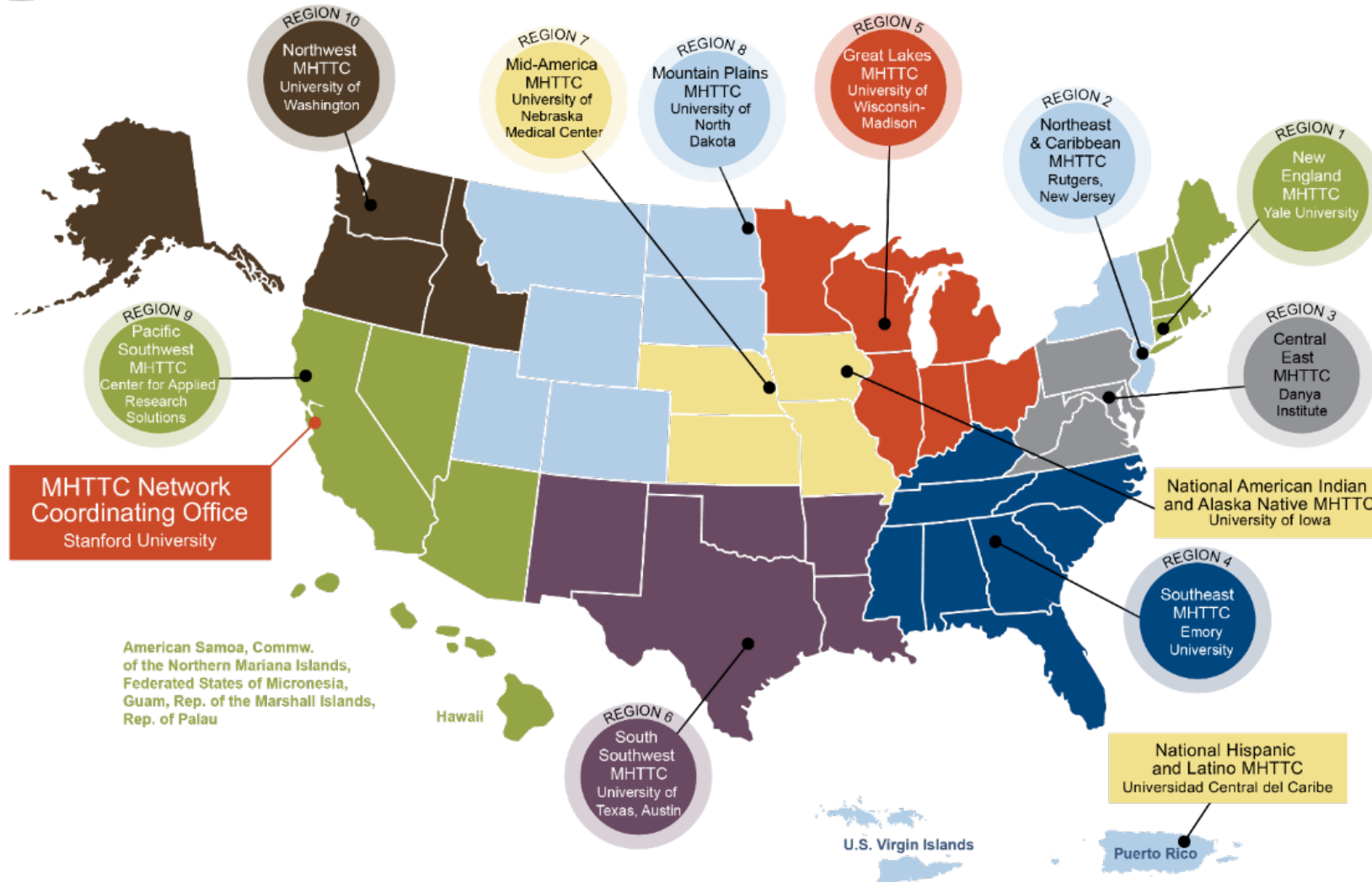


MHTTC

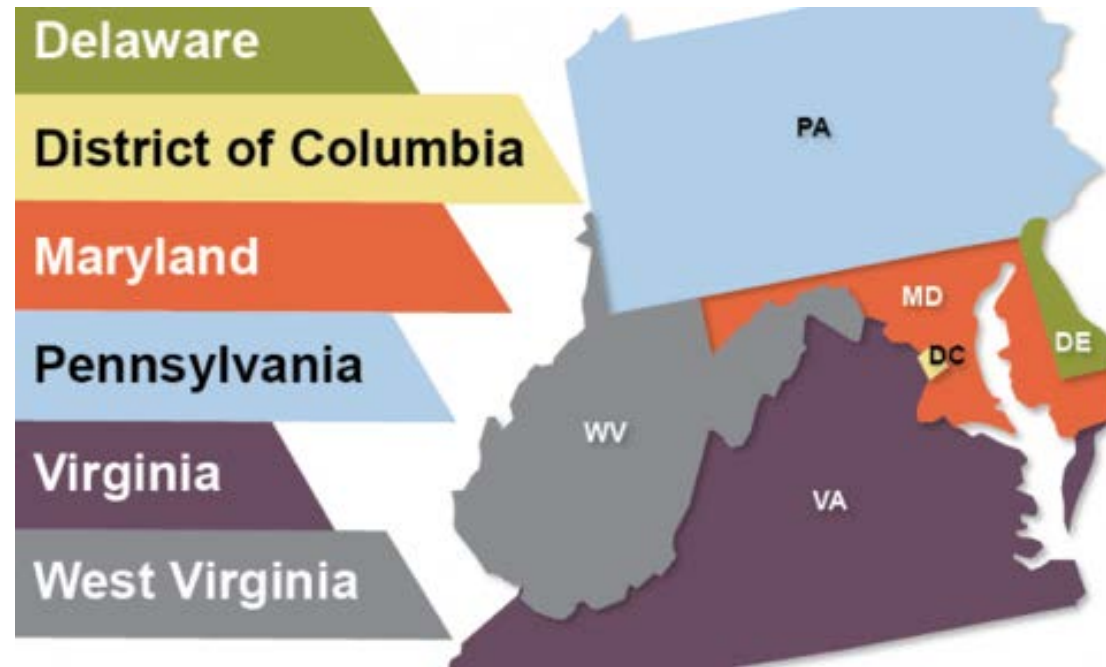
Mental Health Technology Transfer Center Network

Funded by Substance Abuse and Mental Health Services Administration

MHTTC Network



Central East Region 3



Central East (HHS Region 3)

MHTTC

Mental Health Technology Transfer Center Network

Funded by Substance Abuse and Mental Health Services Administration

The MHTTC Network uses affirming, respectful and recovery-oriented language in all activities. That language is:

STRENGTHS-BASED
AND HOPEFUL

INCLUSIVE AND
ACCEPTING OF
DIVERSE CULTURES,
GENDERS,
PERSPECTIVES,
AND EXPERIENCES

HEALING-CENTERED AND
TRAUMA-RESPONSIVE

INVITING TO INDIVIDUALS
PARTICIPATING IN THEIR
OWN JOURNEYS

PERSON-FIRST AND
FREE OF LABELS

NON-JUDGMENTAL AND
AVOIDING ASSUMPTIONS

RESPECTFUL, CLEAR
AND UNDERSTANDABLE

CONSISTENT WITH
OUR ACTIONS,
POLICIES, AND PRODUCTS

Acknowledgment

This webinar was prepared for the Central East Mental Health Technology Transfer Center (MHTTC) Network under a cooperative agreement from the Substance Abuse and Mental Health Services Administration (SAMHSA). All material appearing in this publication, except that taken directly from copyrighted sources, is in the public domain and may be reproduced or copied without permission from SAMHSA or the authors. Citation of the source is appreciated. Do not reproduce or distribute this publication for a fee without specific, written authorization from the Central East MHTTC network. For more information on obtaining copies of this publication, call (240) 645 - 1145.

At the time of this publication, Miriam E. Delphin-Rittmon, Ph.D, served as Assistant Secretary for Mental Health and Substance Use in the U.S. Department of Health and Human Services and the Administrator of the Substance Abuse and Mental Health Services Administration.

The opinions expressed herein are the view of TTC Network and do not reflect the official position of the Department of Health and Human Services (DHHS), SAMHSA. No official support or endorsement of DHHS, SAMHSA, for the opinions described in this document is intended or should be inferred.

This work is supported by grant SM081785 from the Department of Health and Human Services, Substance Abuse and Mental Health Services Administration.

Presented 2022

Postpartum Depression Diagnosis and Treatment in the Black Community

Thursday, June 2, 2022

Presenter: Topaz Sampson-Mills, MD

Moderator: Annelle Primm, MD, MPH

Council of Elders, Black Psychiatrists of America

COVID-19: An Unprecedented Disaster

- Over 1M deaths since 2020
- Disparate levels of death, illness, disability and economic fallout in Black and other racially marginalized communities
- Increase in depression including among 1/3 of new mothers who delivered babies during the pandemic had postpartum depression, higher than pre-pandemic levels of 1 out of 8

Today's Program

- Special thanks to the CE-MHTTC for its support of this session of the Black Psychiatrists of America Health Equity Webinar Series
- Focus is regional on DE, MD, PA, VA, DC, and WV, yet information has national relevance
- Topaz Sampson-Mills, MD, Executive Board member, Black Psychiatrists of America, is our featured guest

Let's Get To Know Our Audience



Credit: Undrey/iStock by Getty Images

Please answer the following polls...

What type of mental health professional are you?

- A. Physician
- B. Nurse
- C. Social Worker
- D. Psychologist
- E. Occupational Therapy
- F. Other

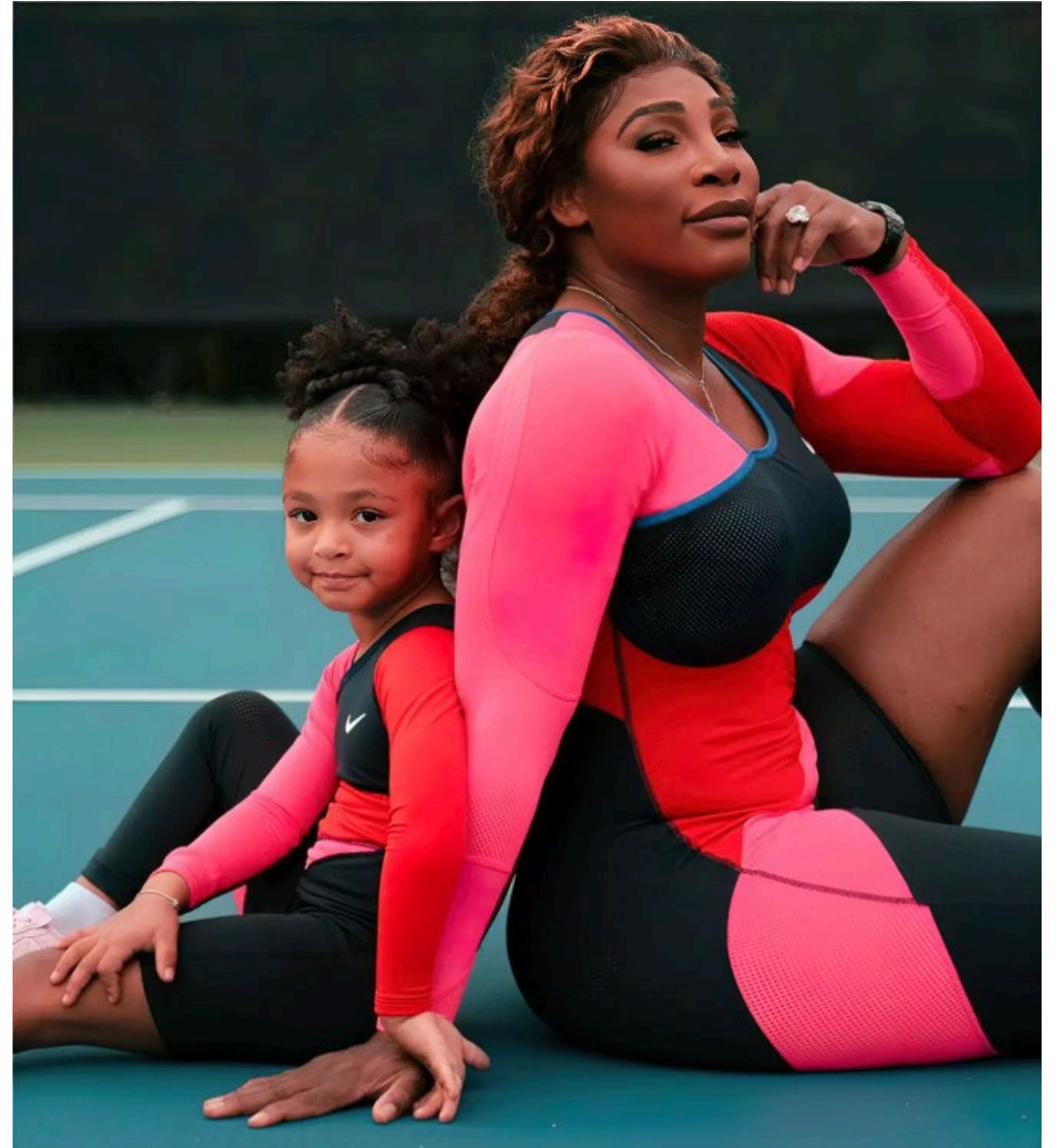
How many years of experience do you have?

- A. Less than 5 years
- B. 5-10 years
- C. 10-15 years
- D. 15-20 years
- E. 20+ years

What region are you located in?

- A. New England
- B. East Coast
- C. West Coast
- D. South
- E. Midwest

Chrissy Teigen
Cardi B
Porsha Williams
Serena Williams



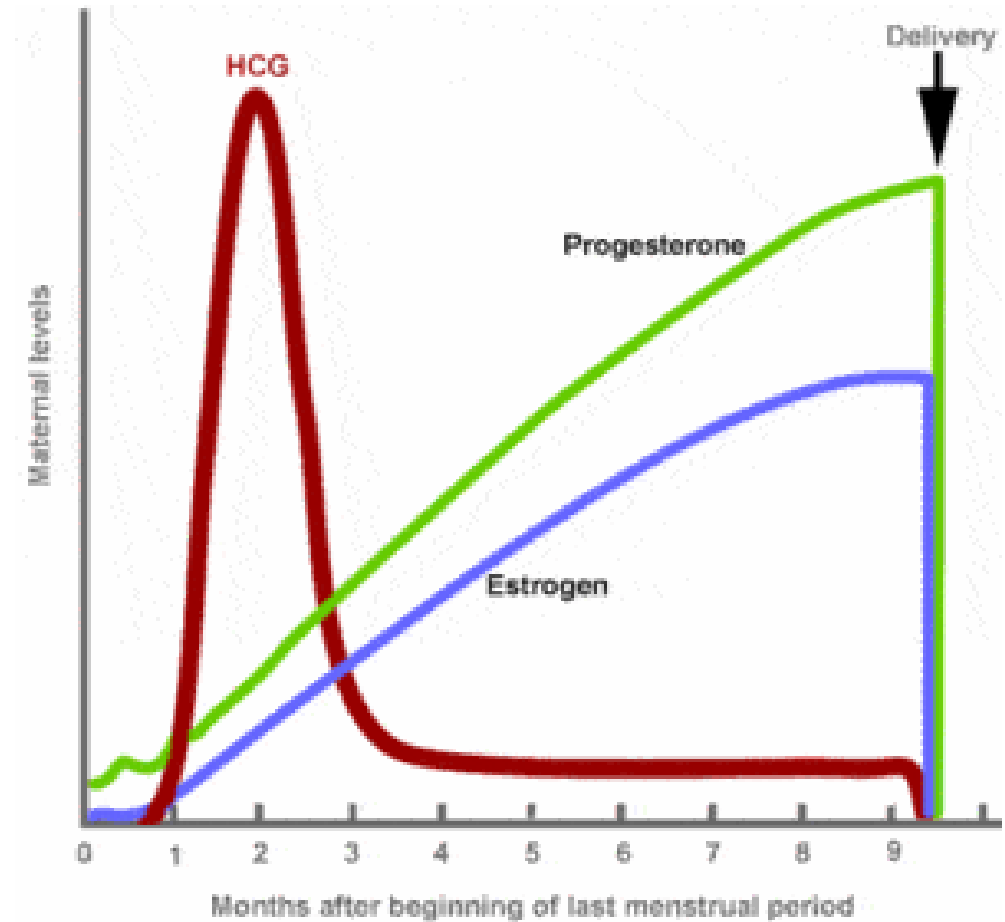
Credit: Serena Williams/Instagram

"I just didn't think [postpartum depression] could happen to me. I have a great life. I have all the help I could need: John, my mother (who lives with us), a nanny. But postpartum does not discriminate."

CHRISSY TEIGEN



Hormonal Changes At Birth



Credit: Dorisking.net

What is Postpartum...Blues, Depression, OCD & Psychosis?



Credit: CDC Division of Reproductive Health/ Twitter

85% of women experience some type of mood disturbance

10-15% develop more significant symptoms

Continuum of illness: **Psychosis > Depression and other mood disorders > Blues**

- Other mood disorders include **Anxiety, Obsessive Compulsive Disorder (OCD)**



Postpartum Blues



Credit: BetterHelp.com

Lasts about first 2 weeks after delivery

50-85% of women experience postpartum blues, **normal experience after childbirth**

Symptoms include:

- Mood lability
- Tearfulness
- Anxiety or Irritability
- *Peak 4-5th day post delivery, last few hour of the day*
- *Goes away spontaneously*

No specific treatment required!

If symptoms lasts more than 2 weeks, mom should be evaluated to rule out a more serious mood disorder

Postpartum Depression (PPD)

PPD is clinically the same as depression occurring at other times during a woman's life

Usually symptoms emerge within the first 2 months but can occur at any time after delivery

Symptoms of PPD include:

- Depressed or sad mood
- **Feeling disconnected from their baby**
- Tearfulness
- Loss of interest in usual activities
- Fatigue
- Sleep disturbance
- Change in appetite
- Poor concentration
- Feelings of worthlessness or incompetence
- Feelings of guilt
- Suicidal thoughts



[Click Me to Watch](#)

Credit: Parentsthive.org

Postpartum Anxiety & Obsessive-Compulsive Disorder

Generalized anxiety is common

Some develop panic attacks or hypochondriasis

OCD= disturbing and intrusive thoughts of harming infant or other intrusive thoughts

- The **Edinburgh Postnatal Depression Scale** is a 10-item questionnaire that may be used to identify women who have PPD.
 - A score of 12 or suicidal thoughts raise concern and indicate a need for more thorough evaluation.



Credit: postpartumstress.com

Symptoms of Postpartum Psychosis



Hallucinations



Delusions



Confusion



Suicidal thoughts



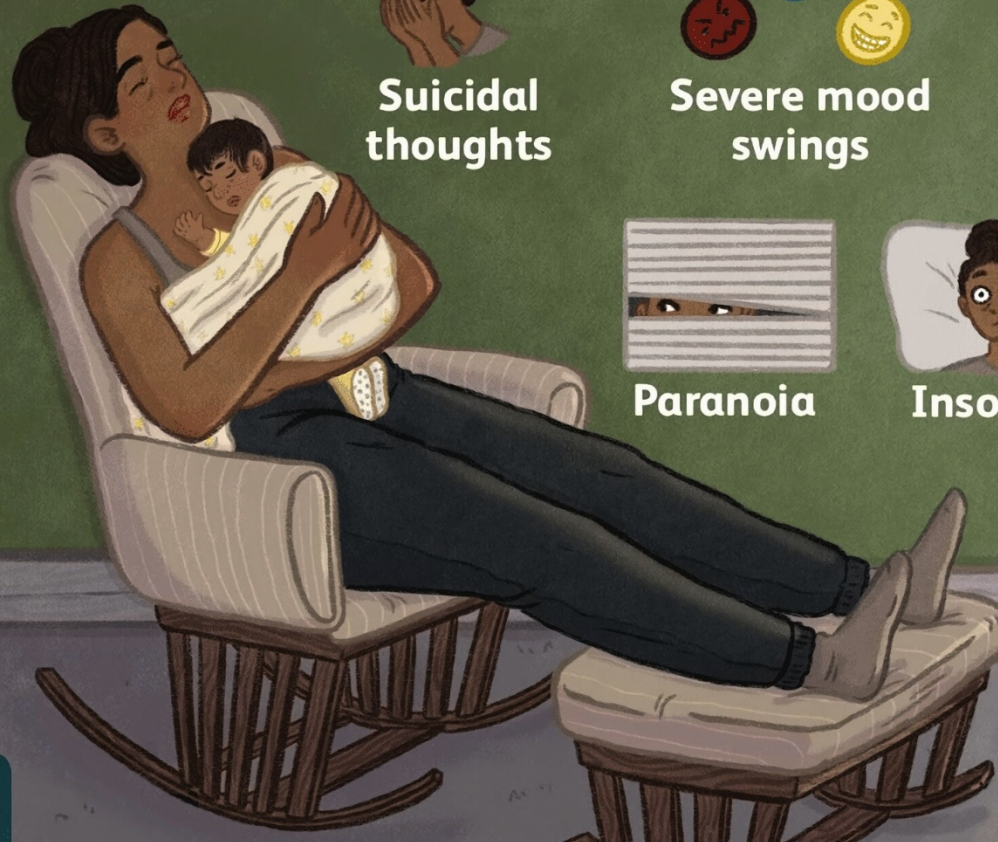
Severe mood swings



Paranoia



Insomnia



Postpartum Psychosis

Most severe of postpartum
psychiatric illnesses

Rare event, occurring 1-2/1000

Symptoms as early as 48-72
hours

In most cases, postpartum
psychosis represents an
episode of bipolar illness

Delusional beliefs are common
and often center on the infant

Auditory hallucinations may
instruct mother to harm herself
and infant



Source: Pool- Getty Images

Postpartum Depression in the Black Community

Risk Factors



Credit: LAYLABIRD VIA GETTY IMAGES

PPD 1 out of 8 mothers

Risk higher for Black women, less likely to receive treatment

Black women 3x more likely to have maternal death than white women in US

- Awareness of this risk can heighten anxiety and stress during pregnancy
- Other factors:
 - Low income or education
 - High stress living environments
 - Exposure to trauma
 - Food insecurity
 - Lack of access to quality care or health coverage

Postpartum Depression in the Black Community

Obstacles to Treatment & Solutions

- Stigma and perceptions of mental illness in the Black community
- Experience with inaccurate diagnoses
- Lack of representation or diversity in health care
- Loss of trust in health care system
- Perceived racial discrimination

- Diagnosis should focus on somatic symptoms

- Less likely to use terms like “depression” but rather “not feeling like myself”

- Screening Tools are not one-size-fits all
- Lower threshold to treatment



[Psychiatr Serv](#). Author manuscript; available in PMC 2013 Aug 5.

PMCID: PMC3733216

Published in final edited form as:

NIHMSID: NIHMS493602

[Psychiatr Serv](#). 2011 Jun; 62(6): 619–625.

PMID: [21632730](#)

doi: [10.1176/appi.ps.62.6.619](#)

Racial and Ethnic Disparities in Postpartum Depression Care Among Low-Income Women

[Katy Backes Kozhimannil](#), Ph.D., M.P.A., [Connie Mah Trinacty](#), Ph.D., [Alisa B. Busch](#), M.D., M.S., [Haiden A. Huskamp](#), Ph.D., and [Alyce S. Adams](#), Ph.D.

Postpartum Depression Treatment

Therapy & Support Groups



Therapy has been shown to be effective in treating depression and reducing depression symptoms in women with PPD i.e. Cognitive Behavioral Therapy (CBT), Interpersonal Therapy (IPT)

- [*Therapy for Black Girls website*](#)
- [*Black Therapists Rock website*](#)
- [*Melanin & Mental Health website*](#)
- [*BlackDoctor website*](#)

Connection with local support groups and lactation consultants could be beneficial in curbing rates of PPD.

Support groups are great ways to gain insight, link with other mothers and connect with community resources.

- [*The Shades of Blue Project website*](#)
- [*National Association of Professional and Peer Lactation Supporters of Color website*](#)
- The Women, Infants and Children (WIC) program via [online](#) or by [phone](#)

Postpartum Depression Treatment

Medications & Procedures

Risks vs Benefits!

SSRIs first line agents for PPD i.e. Zoloft, Prozac

For breastfeeding moms, Zoloft 2% or less in breastmilk

Inpatient treatment is typically required for post partum psychosis

- Use of antipsychotics (typical or atypical)
- Electroconvulsive Therapy (ECT)= rapidly effective, well tolerated

Medications to avoid:

- Lithium- cardiac malformation
- Carbamazepine- Neural tube defect
- Depakote- Neural tube defect



Credit: Getty Images

References

- [Addressing-the-Increased-Risk-of-Postpartum-Depression-for-Black-Women, NAMI](#)
- [Kozhimannil, Katy Backes, et al. "Racial and Ethnic Disparities in Postpartum Depression Care among Low-Income Women." Psychiatric Services \(Washington, D.C.\), U.S. National Library of Medicine, June 2011/](#)
- [Osinubi, Adeiyewunmi \(Ade\). "For Black Parents with Postpartum Depression, Help Can Be Difficult to Find." The Washington Post, WP Company, 26 Feb. 2022/](#)
- [Pattani, Nina Feldman and Aneri. "Black Mothers Get Less Treatment for Their Postpartum Depression." NPR, NPR, 29 Nov. 2019.](#)
- ["Postpartum Psychiatric Disorders." MGH Center for Women's Mental Health, 20 June 2019](#)



Credit: Black Women's Health Imperative

Questions



Appreciation



Contact Us



Central East (HHS Region 3)

MHTTC

Mental Health Technology Transfer Center Network
Funded by Substance Abuse and Mental Health Services Administration

a program managed by



[Central East MHTTC website](#)

[Oscar Morgan](#), Project Director

[Danya Institute website](#)

[Email](#)

240-645-1145

Let's connect:

