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Resource to address pandemic-related anxiety and depression for pregnant patients in Vermont

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MARCH 2021



Resource to address
pandemic-related
anxiety and depression
for pregnant patients
in Vermont

Problem Identification

- ▶ The 2019 novel coronavirus (COVID-19) has led to patient deaths, strained health care systems, and economic uncertainty
- ▶ In addition, comparable devastating psychological and social consequences have been observed due to physical isolation from loved ones, community, and school programs
- ▶ Perinatal mood and anxiety disorders (PMAD) affect 1 in 7 pregnant and postpartum individuals
- ▶ Distress during pregnancy can lead to adverse outcomes for both parent and baby
- ▶ Stress of navigating the volume of information related to COVID-19 that is constantly being updated
- ▶ Uncertainty over guidelines for receiving the COVID-19 vaccine during the perinatal period

Public Health Costs

Estimated national economic cost of perinatal anxiety and depression is \$14.2 billion for births in 2017

- ▶ Average of \$32,000 per mother/child pair affected but untreated
- ▶ Half of the cost in the first year (conception through birth)
- ▶ 60% related to maternal outcomes, 40% related to child outcomes
- ▶ Most costly component is productivity loss -\$4.7 billion
 - ▶ Mistakes at work, absenteeism, and unemployment
- ▶ Preterm births -\$3.3 billion
- ▶ Maternal health expenditures -\$2.9 billion

Statistics on the cost of perinatal mental health during the COVID-19 pandemic is still pending, however it is conceivable to anticipate an increase in economic cost

Community Perspective

“For a lot of pregnant women, being pregnant is exciting and joyous. It can also be a time of increased anxiety, as you worry about your health and the health of your growing baby. The fear of contracting COVID-19 while pregnant, has likely increased anxiety in pregnant mothers. Most of the pregnant women we have taken care of during this time have been especially careful to keep distanced from other people which has led to less support and more isolation. Along with the hormonal changes of pregnancy, this isolation has increased the risk for developing mood disorders in our pregnant population.”

– Dr. Melisa Gibson, MD, Milton Family Practice

“I would say that the pandemic has had very different impacts for different people. For some it is positive, they may be enjoying increased family time and fewer demands out of the house. The important thing is to consider all the potential negative impacts: financial strain, increased anxiety of exposure, school-aged kids at home, strained care systems (limited access to therapy), but most of all: the isolation. Social support is one of the key mitigators of perinatal mood and anxiety disorders, both through the direct benefit and its indirect role to facilitate self-care when friends and family can help out. With limited social support I believe many women are more vulnerable to mental health problems.”

– Dr. Sarah Guth, MD, Vermont Center for Children, Youths & Families

Intervention and Methodology

- ▶ Consulted with Milton Family Practice's Dr. Melisa Gibson to determine the most useful resources to address anxiety and depression for pregnant and postpartum patients in the COVID era
- ▶ Reviewed the literature for current medical recommendations and guidelines for COVID-19 regarding pregnancy
- ▶ Created a **patient-friendly handout** designed to be given with an after-visit summary
 - ▶ Provides information about perinatal anxiety and depression as well as offering reassurance
 - ▶ COVID-19 information and current recommendations on vaccination
 - ▶ Incorporates PHQ-2 and GAD-2 questions, with recommendations of discussing with obstetric provider at next visit if screen (+) on any question
 - ▶ Includes List of free mindfulness phone apps & websites

Pregnant in the COVID Era

First and foremost, congratulations on your pregnancy!

This time in your life can be both exciting and nerve wracking under normal circumstances. However, since the discovery and spread of the novel coronavirus (COVID-19), it is understandable that you may be worried, anxious, or even dismayed, especially if directly impacted from pandemic.

We are here for you as your obstetric providers and are honored for the opportunity to navigate this challenging time with you.

- The unfortunate (pre-pandemic) reality, 1 in 7 women experience depression and/or anxiety symptoms during pregnancy and after delivery
- Pandemic-related isolation from loved ones and support systems has been reported to increase these symptoms in pregnant women¹
- Perinatal depression and anxiety are the number one complication of pregnancy and can have harmful, long-term complications to the health of both mom and baby.

There may be a solution! A recent study² that pooled nearly two thousand pregnant women from 28 different studies has looked at the benefit of mind-body interventions in reducing the stress of expecting mothers.

- 4-8 weeks of mind-body exercises were shown to be beneficial!
- Results showed that all types of interventions were beneficial including:
 - Mindfulness exercises
 - Cognitive behavioral therapy
 - Relaxation techniques
 - Yoga
- Exercises can be done individually or in groups (it makes no difference!)

The biggest takeaway is that a benefit is seen when completing a preferred exercise consistently for at least 4 weeks, leading to significant reduction of mild anxiety and depression symptoms during pregnancy. This activity could be beneficial for everyone involved in the care of your future bundle of joy!

Getting a COVID-19 vaccine: For most adults, prioritizing the COVID-19 vaccine is the best option, but like most new therapies, these vaccines have not been tested in pregnant and breastfeeding individuals. Therefore, there are no clear recommendations for pregnant people. The Society of Maternal-Fetal Medicine strongly recommends pregnant individuals have access to vaccines and discussing with their doctor or midwife. The American College of Obstetricians and Gynecologists (ACOG) recommends **not** excluding pregnant patients from accessing the vaccine.

As your obstetric provider, we are happy to discuss with you the most up-to-date information in terms of risks and benefits of receiving a COVID-19 vaccine and help navigate this decision with you.

Questions to consider...

Over the last 2 weeks , how often have you been bothered by the following problems?				
1. Little interest or pleasure in doing things	Not at all	Several days	More than ½ the days	Nearly every day
2. Feeling down, depressed, or hopeless	Not at all	Several days	More than ½ the days	Nearly every day
Over the last 2 weeks , how often have you been bothered by the following problems?				
3. Feeling nervous, anxious or on edge	Not at all	Several days	More than ½ the days	Nearly every day
4. Not being able to stop or control worrying	Not at all	Several days	More than ½ the days	Nearly every day

If at any point during your pregnancy you feel your answers changing from “Not at all” for any of these four questions, consider reaching out to your obstetric provider with concerns or mention this change at your next prenatal visit.

If you are having any suicidal thoughts or are experiencing life threatening mental health emergency, call 911 or go the nearest emergency room. Other mental health crisis resources include:

- National Suicide Prevention LifeLine: (800) 273-TALK (8255) / TTY (800) 799-4889
- Vermont Crisis Text Line (24/7): Text VT to 741741

Additional Resources

- **Five free mindfulness phone apps:** Insight Timer, Smiling Mind, MyLife Meditation, UCLA Mindful, and Healthy Minds Program
- CDC library of COVID-19 research: <https://www.cdc.gov/library/researchguides/2019novelcoronavirus/websites.html>

Sources:

1. Lebel, C., MacKinnon, A., Bagshawe, M., Tomfohr-Madsen, L., & Giesbrecht, G. (2020). Elevated depression and anxiety symptoms among pregnant individuals during the COVID-19 pandemic. *Journal of affective disorders*, 277, 5–13.
2. Guo, Pingping, Zhang, Xuehui, Liu, Na, Wang, Jie, Chen, Dandan, Sun, Weijia, . . . Zhang, Wei. (2021). Mind-body interventions on stress management in pregnant women: A systematic review and meta-analysis of randomized controlled trials. *Journal of Advanced Nursing*, 77(1), 125-146.

Results: After-Visit Handout

Evaluation and Limitations

- ▶ Effectiveness of the resource could be evaluated via a patient survey on its usefulness, and the outcomes of utilizing mind-body interventions
- ▶ Providers can be surveyed to see if any patients mentioned mood concerns in response to the included PHQ-2 and GAD-2 questionnaire
- ▶ The handout could be personalized to include specific counseling services and community activities accessible in the community
- ▶ The pandemic-related information is brief and relies more on providers to answer specific questions or provide more comprehensive resources
- ▶ The resource is limited by the short duration of the clerkship, and therefore the inability to survey a large sample of prenatal patients

Future Recommendations

Implement	distribution of this handout to all newly pregnant patients beginning prenatal care at Milton Family Practice
Encourage	providers to document when patients mention concerns elicited by PHQ-2 and GAD-2 questions listed on the handout as well as demonstrated use of mind-body interventions to handle stress
Widen	the distribution of the resource to include other practices that provide obstetric care in Vermont
Survey	patients who received the handout to assess effectiveness of recommended interventions

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- ▶ Lebel, C., MacKinnon, A., Bagshawe, M., Tomfohr-Madsen, L., & Giesbrecht, G. (2020). Elevated depression and anxiety symptoms among pregnant individuals during the COVID-19 pandemic. *Journal of affective disorders*, 277, 5–13.
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- ▶ Guo, Pingping, Zhang, Xuehui, Liu, Na, Wang, Jie, Chen, Dandan, Sun, Weijia, . . . Zhang, Wei. (2021). Mind-body interventions on stress management in pregnant women: A systematic review and meta-analysis of randomized controlled trials. *Journal of Advanced Nursing*, 77(1), 125-146.

Interview Consent Forms

Thank you for agreeing to be interviewed. This project is a requirement for the Family Medicine clerkship. It will be stored on the Dana Library ScholarWorks website. Your name will be attached to your interview and you may be cited directly or indirectly in subsequent unpublished or published work. The interviewer affirms that he/she has explained the nature and purpose of this project. The interviewee affirms that he/she has consented to this interview.

- ▶ Consented: **Yes**
- ▶ Name: **Melisa Gibson, MD – Milton Family Practice**
- ▶ Name: **Sarah Guth, MD – Vermont Center for Children, Youths & Families**