



PROVIDER GUIDE

Considerations for Perinatal Mental Health Diagnoses

Perinatal mood and anxiety disorders are among the most common complications that occur in pregnancy or in the first 12 months after delivery. Despite the negative effects on maternal, obstetric, birth, offspring, partner, and family outcomes, perinatal mental health disorders often remain underdiagnosed, and untreated or under-treated.

COMMON PERINATAL MENTAL HEALTH CONDITIONS

| | PERINATAL ANXIETY | PERINATAL DEPRESSION | POSTPARTUM PSYCHOSIS |
|-----------------|---|--|--|
| CHARACTERISTICS | <ul style="list-style-type: none"> + Anxiety is often centered around baby | <ul style="list-style-type: none"> + Lack of interest in the baby, not feeling bonded to the baby + Excessive feelings of being a bad mother | <ul style="list-style-type: none"> + High Infanticide risk + Hallucinations may center around harm to baby |
| SYMPTOMS | <ul style="list-style-type: none"> + Excessive anxiety and worry, occurring more days than not <p>Difficulty controlling worry associated with ≥ 3 of the following symptoms:</p> <ul style="list-style-type: none"> + Restlessness, feeling keyed up or on edge + Being easily fatigued + Difficulty concentrating or mind going blank + Irritability + Muscle tension + Sleep disturbance | <p>At least five of the following symptoms for at least two weeks:</p> <ul style="list-style-type: none"> + Depressed mood (most of the day, nearly every day) + Sleep changes + Change in interest or pleasure in activities + Weight or appetite changes + Psychomotor agitation or retardation (observable by others) + Fatigue or loss of energy + Feelings of worthlessness or excessive or inappropriate guilt + Decreased concentration or indecisiveness + Recurrent thoughts of death, recurrent SI, or suicide attempt | <p>Symptoms resemble a manic or mixed mood episode with psychotic symptoms.</p> <p><i>Manic Symptoms:</i></p> <ul style="list-style-type: none"> • Persistent elevated, expansive or irritable mood • Increased activity and energy with decreased need for sleep • Inflated self-esteem or grandiosity • More talkative or pressured • Flight of ideas or subjective experience of racing thoughts • Distractibility • Increase in goal-directed activity or psychomotor agitation • Excessive involvement in activities that have high potential for painful consequences <p><i>Psychotic Symptoms:</i></p> <ul style="list-style-type: none"> • Delusions • Hallucinations • Disorganized Speech • Grossly disorganized or catatonic behavior • Negative Symptoms (diminished emotional expression or total lack of motivation) |
| TIMELINE | <ul style="list-style-type: none"> + Can occur throughout pregnancy and postpartum period | <ul style="list-style-type: none"> + Mood episodes can occur during pregnancy or within the 4 weeks following delivery | <ul style="list-style-type: none"> + Can occur within 48-72 hours after delivery, majority within 2 weeks |

RESOURCES TO SUPPORT PERINATAL SERVICE WOMEN

Steps for Provider Assessment:

- ❑ Assess thoughts of harm to self or others (Are you having any thoughts of harming yourself, anyone else, and/or your baby?)
- ❑ Assess mother's symptoms using attached screener(s) applicable to your setting
- ❑ Assess the mother's stress levels (On a scale of 0 – 10 how stressed are you feeling during this transition period?)
- ❑ Assess mother's relationship quality (Who do you feel is there for you right now? Do you feel supported? What would you need to feel supported?)
- ❑ Assess the mother's sleep (How much sleep are you getting? Are you able to sleep when given the opportunity?)
- ❑ Know the signs of perinatal mental health by reviewing the handout on page 1 (Tip: Bring handout into the room to review as you discuss with the mother)
- ❑ Ask mother if they have had any mental health concerns (before birth or after the birth of another child)
- ❑ Give the mother a list of resources
- ❑ Consider warm hand-off to behavioral health, particularly if there is a provider with experience with perinatal mental health (Local Specialty Care Clinic: _____)

Provider Resources to Guide Care:

1. [The Edinburgh Postnatal Depression Scale \(EPDS\)](#)
2. [PHQ-9 \(Patient Health Questionnaire\)](#)
3. [GAD-7 \(General Anxiety Disorder-7\)](#)
4. [Postpartum Support International – Perinatal Mental Health Discussion Tool](#)
5. [Beck Anxiety Inventory](#)
6. [Beck Depression Inventory](#)
7. [Perinatal Anxiety Screening Scale](#)
8. DHA Behavioral Health Screening and Referral in Pregnancy and Postpartum Practice Recommendation

The image shows a sample of the Edinburgh Postnatal Depression Scale (EPDS) form. It includes a header with the title 'Edinburgh Postnatal Depression Scale¹ (EPDS)', a form for personal information (Name, Address, Date of Birth, Baby's Date of Birth, Phone), and a series of 10 numbered questions. Each question has two columns of response options: 'Yes, all the time' and 'No, not at all'. Below the questions, there is a 'SCORING' section with instructions on how to score the responses. The form also includes a disclaimer and a note about the mother's ability to complete the scale herself.

RESOURCES

TO GUIDE BEST CARE PRACTICES FOR PARENTS

- *Military and Family Life Counselors*
- *Army Community Services*
- *Fleet and Family Services*
- *Community Counseling Program*
- *Family Life Counseling Chaplains*
- *Military One Source: 1-800-342-9647*
- *New Parent Support Program*
- *Additional Local/Regional Resources*

TO GUIDE BEST MEDICAL CARE PRACTICES FOR PARENTS

Emergency Resources:

- 988
- 911
- *National Maternal Mental Health Hotline: Text or Call 1-833-943-5746*

Non-Emergency Resource:

- *Postpartum Support International (PSI) Helpline: Text or Call 1-800-944-4773*

Individual Mental Healthcare:

- *Adult Outpatient Behavioral Health*
- *Humana Military / TRICARE Provider*
 - [Tricare \(psidirectory.com\)](#)
 - [Humana Military](#)
- *TeleHealth Therapy*
 - *Dr On Demand*
 - *Telemetry*
 - *Sensible Care*
 - *Cohen Veteran Network*

Group Therapy:

- [PSI Online Support Meetings](#)
- [PSI: Help for Military Families \(virtual\)](#)
 - *2nd and 4th Wednesdays 4 PM PT/ 7 PM ET*