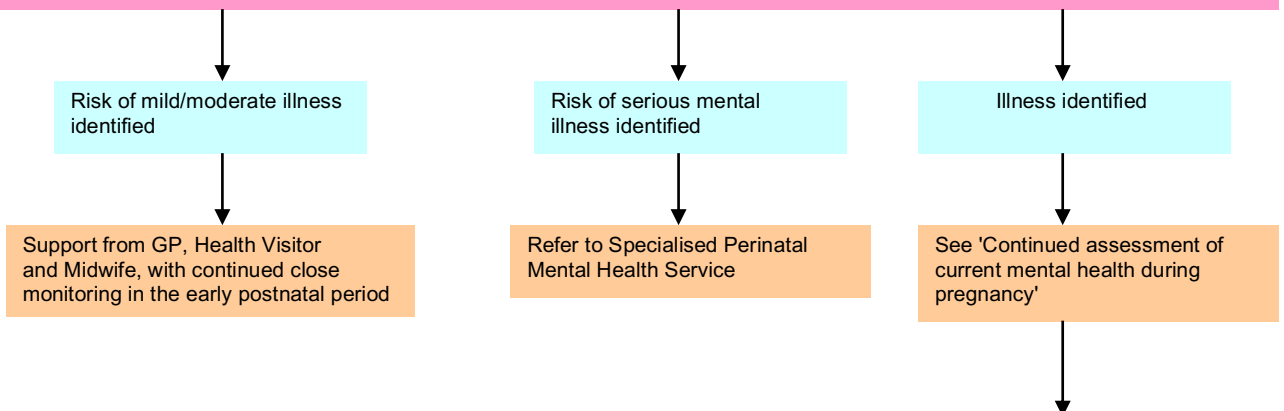
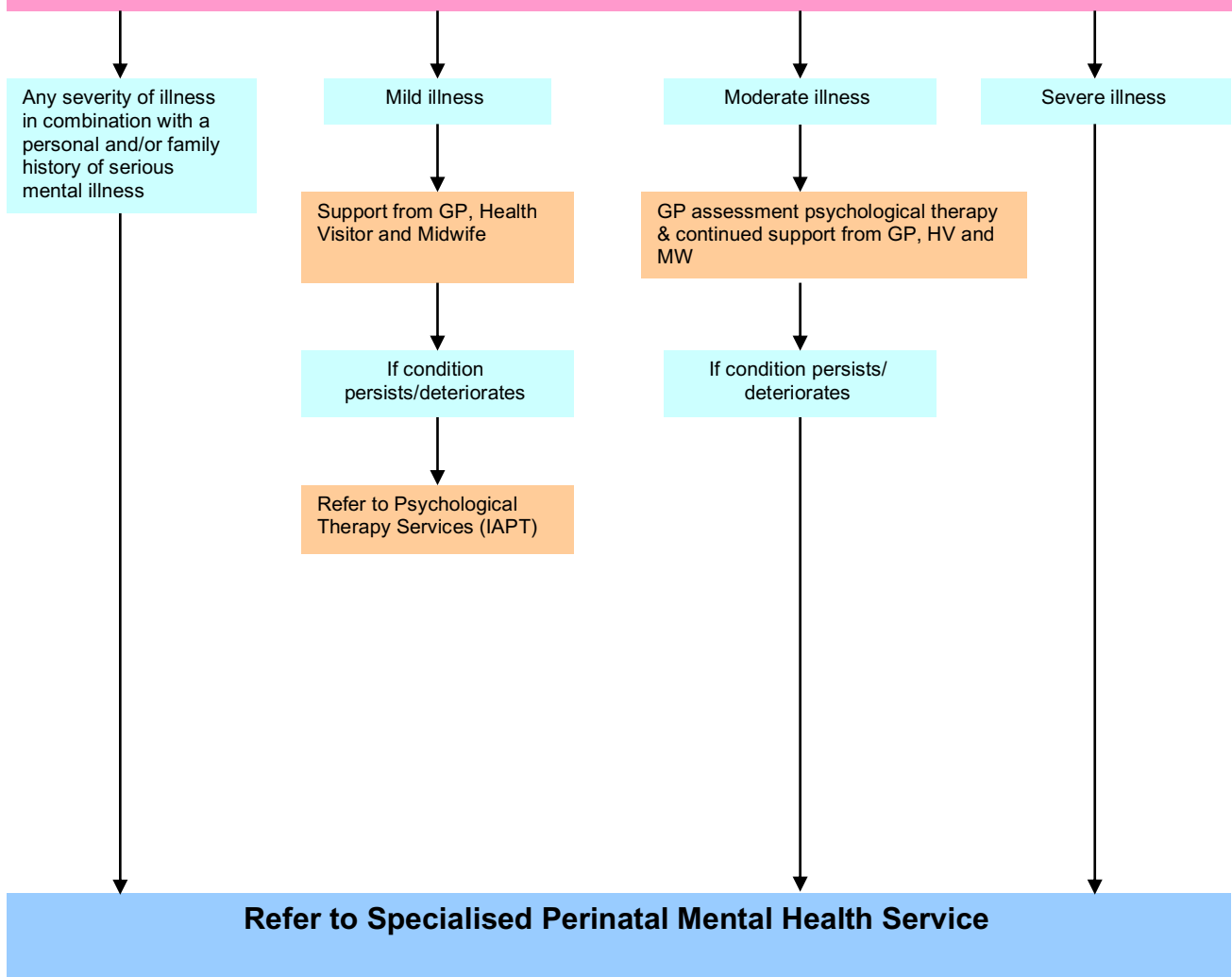


PERINATAL MENTAL HEALTH ANTENATAL CARE AND REFERRAL PATHWAY

Screening for current and personal history of mental illness in early pregnancy



Continued assessment of current mental health during pregnancy



PERINATAL MENTAL HEALTH POSTNATAL CARE AND REFERRAL PATHWAY

Extra monitoring of mental health required during the first 6 weeks postpartum

**Assess current mental health during first postnatal year
(at least at 4-6 weeks and 3-4 months postpartum)**

Any severity of illness within 6 weeks or in combination with a personal and/or family history of serious mental illness

Mild illness

Moderate illness

Severe illness

Reassess in 2 weeks

Reassess in 2 weeks

If condition persists/deteriorates

If condition persists/deteriorates

Refer to Psychological Therapy Services (IAPT)

GP assessment

If concerned

Refer to Specialised Perinatal Mental Health Service

GUIDELINES FOR THE MANAGEMENT OF NEW ONSET POSTNATAL MENTAL ILLNESS

ASSESSMENT OF MENTAL HEALTH, WHICH SHOULD INCLUDE: DURATION, TYPE AND SEVERITY OF SYMPTOMS, PREVIOUS MENTAL HEALTH PROBLEMS & FAMILY HISTORY (BI-POLAR ILLNESS, SEVERE POSTNATAL ILLNESS)

If symptoms accompanied by:

Personal and/or family history of serious mental illness.

Mild Depressive Illness

Symptoms (constant for 2 weeks):

Low mood, usually improved when in company.
Exaggerated emotional response e.g. tearful, irritable, sensitive, anxious.

Timing:
Usually presents within 3-6 months postpartum.

Refer to Psychological Therapy Services (IAPT)

Moderate Depressive Illness

Symptoms (constant for 2 weeks, combined with 4 of the following):

Loss of pleasure/interest.
Loss of confidence.
Self-reproach/ guilt.
Impaired concentration.
Agitation or slowing up.
Sleep disturbance.
Appetite often decreased but no weight loss.
Feeling tense and irritable with the baby and other children.

Timing:
Usually presents within 6 weeks of childbirth.

GP assessment and treatment.

If condition persists or particular concerns or within 6 weeks of birth.

Severe Anxiety/ Panic Disorder /OCD

Symptoms:

Inability to relax.
Dizziness.
Hyperventilation/ Palpitations.
Sleep disturbance.
Excessive cleanliness.
Avoidance/agoraphobia.
Disproportionate concerns about the baby.

Timing:
At any time but commonest in first 3 months postpartum.

GP assessment and treatment.

If condition persists or particular concerns or within 6 weeks of birth.

Severe Depressive Illness

Symptoms as for Moderate Depressive Illness but also with:

Early morning waking.
Feeling worse in the morning.
Weight/appetite loss.
Marked disinterest in life
Suicidal thoughts.

Timing:
Gradual onset within first 2 weeks of childbirth.

Psychotic illness

Symptoms:

Hallucinations.
Delusions.
Confusion.
Excitement.
Lack of insight.

Timing:
Early, usually within 4 weeks postpartum.

NB: Transient distress very common 3-5 days (the Blues).

Emergency referral to Specialised Perinatal Mental Health Service. [Out of hours: contact GP services]

Refer to Specialised Perinatal Mental Health Service.