

Transcript Details

This is a transcript of an educational program. Details about the program and additional media formats for the program are accessible by visiting: <https://reachmd.com/programs/advances-in-womens-health/educating-nurse-practitioners-on-perinatal-mental-health/16172/>

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Educating Nurse Practitioners on Perinatal Mental Health

Announcer:

You're listening to *Advances in Women's Health* on ReachMD. On this episode, we'll hear from perinatal psychiatric nurse practitioner Christena Raines, who's the Founder of Chris Raines Consulting and Adjunct Professor of Psychiatry at the University of North Carolina at Chapel Hill. She'll be discussing perinatal mental health, which is the topic of her session at the 26th Annual Nurse Practitioners in Women's Healthcare Conference.

Let's hear from her now.

Christena Raines:

I think that increasing the knowledge base of women's health nurse practitioners because we are really the front line for women that are coming through as either pregnant or postpartum or even preconceptional, so being able to help the audience that I'll be speaking to understand first, what is perinatal mood disorders and why is it important to understand? Because what we know is untreated mental health and untreated mental health during pregnancy has long-term effects on both mother and infant, so being able to look at it from that perspective and increase that knowledge base and help nurse practitioners feel more comfortable asking the questions and knowing what to do with those answers.

ACOG has come out with practice guidelines. In fact, what ACOG has said is that patients need to be screened; birthing persons need to be screened during pregnancy and the postpartum period. If they screen positive, then that needs to be followed up. Frontline providers need to be able to initiate treatment, and then follow up with referrals and have a specific follow-up that they do to make sure that these people don't fall through the cracks. And screening really does make a difference, but they also need to understand if they screen, what do they do with that screening? Screening by itself, it's just a piece of paper. So being able to really provide psychoeducation and understand when that crosses the line to support patients and support families as they go through this but understanding when things move outside of that realm of normal.

And the guidelines I use for that is when patients are not able to really take care of themselves, when their average daily living changes, when they feel like it's impacting their emotions and their anxiety or their depression is really impacting their lifestyle, then that's something that they need to talk to a professional about and let them know what their options are. There's many options. We've got so many more options now than we used to have, not only for the provider but for the patients too. So understanding where your resources are, understanding what to do, and then if you need to start medication then having a good toolbox for that.

We need more trained nurse practitioners, physicians. There's not enough perinatal or reproductive psychiatrists or perinatal psychiatric nurse practitioners around to really meet the need, and when a perinatal patient needs to see somebody, they can't wait a week or two weeks.

Get involved. Postpartum Support International, an nonprofit organization that's been around for 36 years, is near and dear to my heart. We have chapters in every state, so you can get involved with your state chapter to find out where your resources are. We have over 30 online support groups every day that are free to the public. PSI also has their Maternal Mental Health Hotline—1-833-TLC-MAMA, M-A-M-A. It is manned 24 hours a day, seven days a week. I have so many patients and family members that say, "It was two o'clock in the morning, and she couldn't sleep, and I didn't know what to do. I didn't know who to call." This is who you call at two o'clock in the morning because they can help you, and they will get you connected with services.

If you have questions or you have a patient that you don't know what to do with, you can schedule an appointment with a reproductive psychiatrist free at our consultation line at PSI, or you can call one of the hotlines in your state that have reproductive psychiatrists on

call to answer those questions. So I guess the takeaway that I want people to hear is that you're not alone as a provider either. We are here to support you, and we just want you to ask the question.

Announcer:

That was perinatal psychiatric nurse practitioner Chris Raines discussing her session on perinatal mental health that she presented at the 26th Annual Nurse Practitioners in Women's Healthcare Conference. To access this and other episodes in our series, visit *Advances in Women's Health* on ReachMD dot com, where you can Be Part of the Knowledge. Thanks for listening!