



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/medical-industry-feature/importance-of-a-timely-postpartum-depression-diagnosis-patient-perspectives/17934/

ReachMD

www.reachmd.com info@reachmd.com (866) 423-7849

Importance of a Timely Postpartum Depression Diagnosis: Patient Perspectives

Announcer:

You're listening to *Advances in Women's Health* on ReachMD. This medical industry feature, titled "Importance of a Timely Postpartum Depression Diagnosis: Patient Perspectives," is sponsored by Sage Therapeutics and is intended for healthcare providers.

Here's your host, Dr. Matt Birnholz.

Dr. Birnholz:

Welcome to ReachMD. I'm your host Dr. Matt Birnholz, and today we'll gain some insight into the patient's perspective on the importance of timely screening and diagnosis of postpartum depression.

Joining me is Kay Matthews, who has lived experience with postpartum depression and now advocates for others. She's also the Executive Director and Founder of Shades of Blue, which is dedicated to breaking cultural barriers in maternal mental health.

Kay, thanks for being here with us today.

Kay:

Thank you so much for having me today, Dr. Birnholz.

Dr. Birnholz:

To start, Kay, can you share with us some aspects about your journey with postpartum depression and how it led to your advocacy?

Kay:

So, my personal experience with postpartum depression unfortunately resulted from a loss. I delivered my daughter stillborn at full term, and at that time no one was really talking about postpartum depression in my community. It took almost 12 months for a healthcare provider to acknowledge and diagnose my postpartum depression.

Once I was able to figure out what resources were out there, those things helped me to get screened. Access to tools, just really being able to help me to navigate my postpartum depression experience. I will add though, we don't know what we don't know, and one of the contributing factors is, and I want to uplift this, we can't expect mothers or families to be able to recognize the symptoms of postpartum depression if they don't know about it and what to look for. There's definitely no one-size-fits-all journey or birthing experience, so we need to be able to recognize that individual experiences will be different. If we don't address postpartum depression upfront with screening as a part of routine maternal healthcare, then women are left to figure it out on their own causing unnecessary delay.

Dr. Birnholz:

Well, I'm so appreciative, Kay, for the details that you shared of your story, which I'm sure are hard to relay, but so inspiring to hear of how you've relayed that into your advocacy work.

So, Kay, from your perspective of working with other patients with postpartum depression, what would you say are the barriers that prevent or delay patients from seeking care, especially mothers across historically underserved populations and those negatively impacted by social determinants of health?

Kay:

Well, the main barrier of care I see is the issue around access. Some people don't have adequate access to care and a lot of people don't know if they even have access to resources. And even with access, there may be challenges, like for instance, are there





appointments available? Things like that may come up. Education is another large part of the barrier I see, including not having the information on what to do. The assumption is that pregnant women know what to do for their health to help themselves and their baby, but many women aren't aware of what to do while pregnant, or even after giving birth. That includes those who've been pregnant or delivered before. For example, many women don't know that they need to go back to their health care provider. That may sound strange, but that's something that women are experiencing after delivery for their own checkups, or even in addition to their baby's checkups. "I'm checking on the baby, not necessarily checking on myself, because that's not my focus." It's a lot of what we hear.

Then there's also stigma. Folks say that women suffer in silence, but we actually know they suffer out loud. In my experience, women dealing with maternal mental health issues are showing signs through their demeanor, something that they may post on social media, conversations and actions that they're suffering but just don't know how to recognize it.

There's stigma in asking for help. The difficult part for postpartum women is not just asking for help, but also identifying the help that they need. For example, maybe they don't know that they have access to therapy or that therapy is something that may help or that they want. This is where a person with a different perspective or fresh eyes can help with ideas on what that help could actually be. At the Shades of Blue project, we're also addressing the screening inequities that we see in mothers from historically underserved populations.

We also need to look at health disparities affecting Latina and African American mothers, as well as the causes of these disparities. Maternal health and maternal mental health both need to be discussed. It's not one or the other.

Dr. Birnholz:

Excellent. That's really helpful information. So, Kay, given these potential barriers to seeking postpartum depression care, what strategies do you often recommend for patients and their families to help combat stigma as you talked about it, and encourage a more timely diagnosis?

Kay:

Just as we make a birth plan, I encourage patients to make a postpartum plan. We all need help, especially in that first three months after delivery. It's important to consider what postpartum care looks like for your patient, including maternal mental health. Sharing knowledge of postpartum depression symptoms, and postpartum depression screening with other expectant moms, your community and families. Ask about postpartum depression screening at your maternal care visits. This is where a postpartum care plan definitely can help patients advocate for themselves.

I also firmly believe in writing things down. So, your patients can create their own plans and then their designated co-partners can refer to it. So, you're helping across the board with that. I advise women to take notes whenever they're thinking about postpartum care any time before delivery. And, also it's important to recognize that the designated co-partner doesn't need to be an immediate family member. Sometimes your patient has to build their support system that they need, and it will look different for everyone. That's where support groups and community organizations truly come into play.

Dr. Birnholz:

For those just tuning in, you're listening to *Advances in Women's Health* on ReachMD. I'm Dr. Matt Birnholz, and today I'm speaking with Kay Matthews about the patient's perspective on seeking care for postpartum depression.

So, Kay, I'd like to spend some time on the clinician's role in this perinatal period. What are your thoughts on the ways healthcare providers can best support their patients here?

Kay:

The biggest piece is being proactive in educating your patients. Have literature, have posters, have things very visible for them to be able to see and interact with. When you give them a pamphlet, be sure to explain what the information is in the pamphlet, so they know that it's valuable and that they should be using it. For example, have you seen the poster on postpartum depression? Start a conversation in talking about it. If your patients aren't informed, then monitoring for postpartum depression won't be on their minds if symptoms occur. Conversations about mental health can be tricky, and it all comes down to your delivery. As a patient, I'm coming to healthcare providers as the experts to guide me and at least give me the information so that I'll know what to look for and how to follow up. And very importantly, be clear about who the patient can contact and how to do that for questions or concerns. Having information from the clinic office and knowing who to contact allows the patient to be better equipped with the resources to follow up. And part of that includes scheduling those follow up appointments after the initial one or after delivery.

Dr. Birnholz:

Well, those are fantastic recommendations, Kay, thanks so much. But before we go, I'd like to open things up just one more time for any





other takeaways or recommendations you may have in this context of postpartum depression. Is there anything you'd like patients and healthcare providers to come away with today?

Kay:

Yes, I recommend patients to advocate for themselves. Use your voice. Recognize symptoms of postpartum depression and be empowered to seek help. I recommend healthcare providers to be proactive in their approach to screening and diagnosing postpartum depression and understanding the importance of empathetic and comprehensive care for patients with postpartum depression through their diagnosis.

Dr. Birnholz:

With those very helpful tips in mind, I want to thank our guest, Kay Matthews, for sharing her perspective with us as a patient advocate for postpartum depression.

Kay, it was a genuine pleasure speaking with you today. Thanks so much.

Kay:

Thank you. I appreciate it.

Announcer:

This medical industry feature was sponsored by Sage Therapeutics. If you missed any part of this discussion or to find others in this series, visit *Advances in Women's Health* on ReachMD.com, where you can Be Part of the Knowledge.

Sage Therapeutics ©2024 MRC-PPD-00804 05/2024