

Pregnant women risk early delivery from using psychiatric medication

October 29 2009, by Joel Schwarz

(PhysOrg.com) -- Women with a history of depression who used psychiatric medicine during pregnancy have triple the odds of delivering a premature baby.

The odds triple for premature child delivery pregnant [women](#) with a history of depression who used psychiatric medication, according to a new study.

Researchers at the University of Washington, University of Michigan and Michigan State University found that a combination of medication use and depression -- either before or during [pregnancy](#) -- was strongly linked to delivery before 35 weeks' gestation.

Amelia Gavin, lead author and UW assistant professor of social work, said the findings highlight the need for carefully planned studies that can clarify associations between depression, psychiatric medications and preterm delivery.

"Women with depression face difficult decisions regarding the benefits and risks of using psychotropic medications in pregnancy," Gavin said. "Therefore, a focus on disentangling medication effects and depression effects on mother and offspring health should be a major clinical priority."

"Medication use may be an indicator of depressive symptom severity, which is a direct or indirect contributing factor to pre-term delivery,"

added Kristine Siefert, co-author and a Michigan professor of social work.

Most physicians initiated preterm deliveries after the women suffered complications, such as pre-eclampsia, poor fetal growth or acute hemorrhage.

The study examined the associations among maternal depression, psychiatric medication use in pregnancy and preterm delivery among women in five Michigan communities who received prenatal care at one of 52 participating clinics between September 1998 and June 2004. These women had to be at least 15 years old, with no history of diabetes, and were 15 to 27 weeks pregnant.

Researchers analyzed responses of nearly 3,020 women who participated in the Michigan-based Pregnancy Outcomes and Community Health Study, which asked about depressive symptoms that occurred within the week of taking the questionnaire. The study also asked about the women's history of depression that required medication, such as tranquilizers or sleeping pills.

Overall, 335 women (11 percent) delivered preterm. Among the women who reported having depression during pregnancy, 75 percent had a history of depression and 62 percent used medication in the first half of pregnancy.

Another finding showed that without medication use, elevated levels of depressive symptoms at midpregnancy and history of [depression](#) did not pose an increased risk of [preterm delivery](#).

The study's other researchers include Claudia Holzman, professor of epidemiology at Michigan State, and Yan Tian, a data analyst at Michigan State.

The findings appear in the September/October issue of *Women's Health Issues*.

Provided by University of Washington ([news](#) : [web](#))

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