

Low-income urban mothers have high rate of postpartum depression

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More than half of low-income urban mothers met the criteria for a diagnosis of depression at some point between two weeks and 14 months after giving birth, according to a study led by University of Rochester Medical Center researchers and published online by the journal *Pediatrics*.

This is the first study to describe the prevalence of depression among low-income urban mothers, who were attending well-child care visits, through the use of a diagnostic interview. It also is the first study of this population group to test the accuracy of three depression screening tools routinely used by physicians.

The screening tools have high accuracy in identifying depression, the researchers concluded, but cutoff scores may need to be altered to identify depression more accurately among low-income urban mothers.

The study involved 198 mothers who were 18 years of age or older and whose children were no older than 14 months. The mothers attended well-child visits at the outpatient pediatric clinic at Golisano Children's Hospital at the Medical Center.

The researchers found that 56 percent of the mothers, after a diagnostic interview, met the criteria for a diagnosis of a major or minor <u>depressive</u> <u>disorder</u>.

"This is an unexpected, very high proportion to meet diagnostic criteria



for depression," said Linda H. Chaudron, M.D., associate professor of Psychology, Pediatrics and of Obstetrics and Gynecology. "This may be a group at high risk for depression. The message of this study is that pediatricians and other clinicians who work with low-income urban mothers have multiple screening tools that are easy to use and accurate. These tools can help clinicians identify mothers with depression so they can be referred for help."

Many women experience the so-called "baby blues." When the feelings persist or worsen it may be <u>clinical depression</u>. The symptoms include insomnia, persistent sadness, lack of interest in nearly all activity, anxiety, change in appetite, persistent feelings of guilt, and thoughts of harming oneself or the baby. Postpartum depression affects up to 14 percent of new mothers in the United States, with higher rates among poor and minority women.

The researchers evaluated three screening tools, the Edinburgh Postnatal Depression Scale, the Beck Depression Inventory II and the <u>Postpartum</u> <u>Depression</u> Screening Scale, using the diagnostic interviews for validation.

The three screening tools have been evaluated in many populations, but one of the reasons the study was done was to test the tools with a group for whom there is not much data—low-income women, especially African-American women, Chaudron said. The researchers also evaluated the validity of the screening tools at various times during the postpartum year.

"The screening tools are valid when used anytime during the postpartum year," Chaudron said.

Use of traditional cutoff scores may not be as accurate as previously thought. Clinicians should be aware that scores two or three points below



traditional cutoff scores may indicate a need for further evaluation, the researchers concluded.

Provided by University of Rochester Medical Center

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