

Children's psychiatric symptoms improve after depression remission in mother

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Children of mothers with major depressive disorder showed improvement in their own psychiatric symptoms in the year after their mothers' depression responded to treatment, according to a study appearing in the online edition of *The American Journal of Psychiatry*.

Since the children of parents with major [depression](#) are also at increased risk of a psychiatric disorder diagnosis, the relationship between maternal remission and the decrease in offspring symptoms is encouraging as it represents an improvement in a child's future prospects, said authors of the study, published March 15 at [AJP in Advance](#), the online advance edition of *The American Journal of Psychiatry*, the official journal of the American Psychiatric Association.

The 80 mothers studied participated in the National Institute of Mental Health study known as STAR*D, or Sequenced Treatment Alternatives to Relieve Depression. The study, involving seven research sites, was led by Myrna Weissman, Ph.D. The analysis of the effects of remission on their children, ages 7 to 17, was led by Priya Wickramaratne, Ph.D., and colleagues on the STAR*D-Child team.

"STAR*D was designed to offer a sequence of treatments to patients who didn't respond to the first, or second, or even third treatment," Weissman said. "This study shows that remission, even after several months of treatment, can have major positive effects not only for the patient but also for her children."

In the study, the children of women with early remission had improvements in both mother- and child-reported symptoms of psychiatric disorders and in overall psychosocial functioning at home and at school. Offspring of mothers with late remission had improvements in several of the symptom measurements, but not in functioning. Children of mothers whose depression did not remit over two years had no symptom reductions and had an increase in outward-directed symptoms, such as disruptive behaviors.

More information: ajp.psychiatryonline.org/pap.dtl

Provided by American Psychiatric Association

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