

Anxiety disorders during pregnancy and postpartum more prevalent than previously thought

July 24 2019, by Cheryl Rossi



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Many mothers have likely heard about postpartum depression, but what about postpartum anxiety?

According to UBC researcher Nichole Fairbrother, this type of anxiety is not well understood and deserves more attention. In a [meta-analysis](#) published recently in the *Journal of Clinical Psychiatry*, Fairbrother and her colleagues found that one in five pregnant women experience at least one type of anxiety disorder.

In this Q&A, Fairbrother, assistant professor of psychiatry and director of the perinatal anxiety research lab at UBC, explains what perinatal and postpartum anxiety is, and why there is a need for improved anxiety screening for expectant and [new mothers](#) by obstetricians and gynecologists.

What effect does a mother's anxiety have on her baby?

Maternal anxiety has been associated with a number of negative pregnancy outcomes, including miscarriage and [high blood pressure](#) during pregnancy, with strong evidence for pre-term delivery and low birth weight. There's some evidence that when mothers are really anxious, it can impact the ways they communicate with their infant, that they're a little less skillful or less responsive. Maternal anxiety is also associated with the infant not being as good at self-soothing. Children of mothers who score high for anxiety also have significantly increased risk of ADHD.

It's important to look at associations with caution, but that doesn't mean that treating the mother for anxiety wouldn't also have a positive impact on the child.

How can mothers determine the difference between healthy levels of anxiety and problematic anxiety?

It's completely normal and healthy for all of us to experience some degree of anxiety and some variation in mood. What we're looking for is anxiety that is causing an individual a significant amount of distress or is interfering with that person's ability to live their life normally. For example, someone with [obsessive-compulsive disorder](#) who is engaging in a lot of checking or washing behavior might not be able to get to work on time. It doesn't always need to be that extreme, but that's what we look at when assessing the problem.

What is the most effective treatment for prenatal and postpartum anxiety?

Outside of pregnancy and postpartum, the evidence is clear that for most anxiety and related conditions, cognitive behavioral therapy (CBT) is the first-line treatment. It has been found to be as effective, or more effective than medication for the majority of anxiety and related disorders. What makes CBT so compelling is that when you receive a course of CBT, it offers protection against relapse, which means you can actually stop treatment. There's something really meaningful about receiving a course of treatment that leaves you with mastery and control and understanding.

More information: Emily J. Fawcett et al. The Prevalence of Anxiety Disorders During Pregnancy and the Postpartum Period, *The Journal of Clinical Psychiatry* (2019). [DOI: 10.4088/JCP.18r12527](https://doi.org/10.4088/JCP.18r12527)

Provided by University of British Columbia

Citation: Anxiety disorders during pregnancy and postpartum more prevalent than previously thought (2019, July 24) retrieved 4 May 2024 from <https://medicalxpress.com/news/2019-07-anxiety-disorders-pregnancy-postpartum->

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