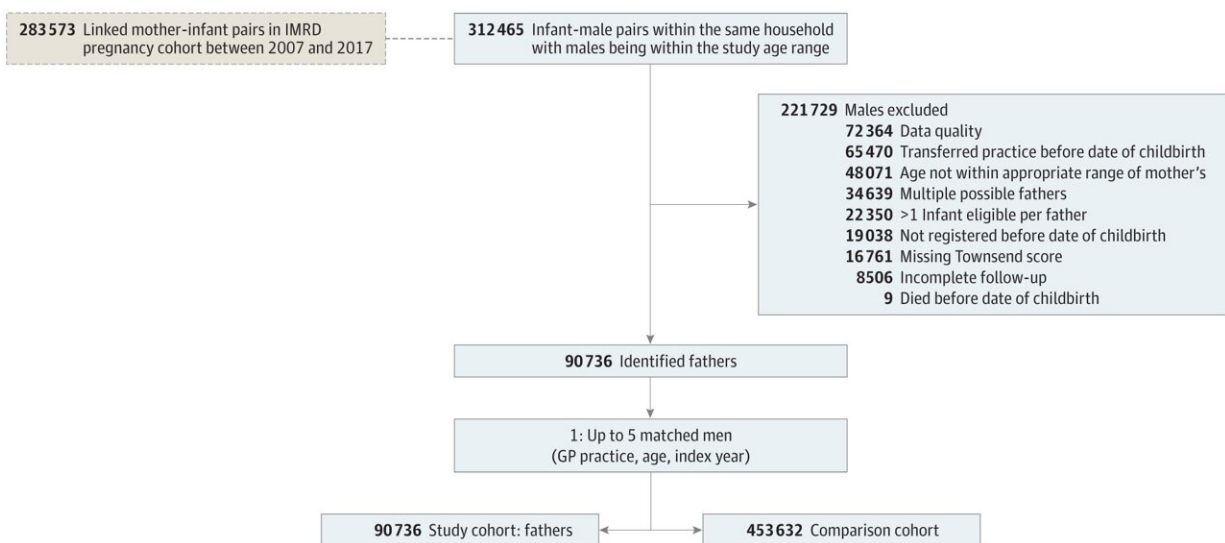


# Men who previously used antidepressants significantly more likely to need them after having a child, finds study

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Flowchart of Study Recruitment With Inclusion and Exclusion Criteria. GP indicates general practitioner. Credit: *JAMA Network Open* (2023). DOI: 10.1001/jamanetworkopen.2023.16105

New fathers are over 30 times more likely to take antidepressants in the first year after having a child, if they have a recent history of the treatment, finds a new study by UCL researchers.

The research, published in *JAMA Network Open*, analyzed information

from over 500,000 [primary care electronic health records](#) from the IQVIA Medical Research Database, from January 2007 to December 2016.

These included 90,736 men who had had a child in the previous year and 453,632 men who did not have a child. The team then examined how many men in each category had received an antidepressant prescription.

The researchers found no difference in antidepressant treatment between the two groups.

However, the results showed that having a history of antidepressant treatment made fathers over 30 times more likely to need treatment again after they had a child. Consequently, the researchers suggest that it could be beneficial for these men to have a mental health check-up with their GP in the first year after having a child.

Lead author, Ph.D. candidate, Holly Smith (UCL Institute of Epidemiology & Health), said "Our findings show that the relationship between [depression](#) and fatherhood is complex and that previous [antidepressant treatment](#) is a key determinant associated with antidepressant use in the year after having a child.

"This may be because the men are continuing treatment they were on before having a child, or these men may be more susceptible to having feelings of depression again and the challenges of having a new child may exacerbate this.

"After the birth of a child, attention is normally focused on the [health](#) of the mother and baby. However, we need to ensure that new dads get the care they need too by improving research on new fathers and how to engage with them about their [mental health](#)."

Previous evidence suggests that men may be at higher risk of depression directly following the birth of their child. And it is thought that as many as 1 in 10 may have depression in the year after their child's birth.

Antidepressants are one of the most common treatments for depression, yet there is little information on how many fathers are prescribed treatment in the year after having a child, and how this compares to men who haven't recently had a child.

Alongside previous antidepressant use, the researchers found that social deprivation was also a key factor as to whether [new fathers](#) were prescribed antidepressants.

Fathers who lived in the most deprived areas had an 18% higher risk of receiving an antidepressant prescription compared with fathers living in the least deprived areas.

## Study limitations

The identification of fathers in the study relied on women of a similar age in the same household being recorded as having a baby within the study timeframe. This means that the researchers may have underestimated the number of fathers in the data set.

Researchers also focused on men who were prescribed [antidepressants](#), rather than those with symptoms or diagnoses of depression.

**More information:** Holly Christina Smith et al, Association of Recent Fatherhood With Antidepressant Treatment Initiation Among Men in the United Kingdom, *JAMA Network Open* (2023). [DOI: 10.1001/jamanetworkopen.2023.16105](https://doi.org/10.1001/jamanetworkopen.2023.16105)

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