

Collaborative care assessment with perinatal patients



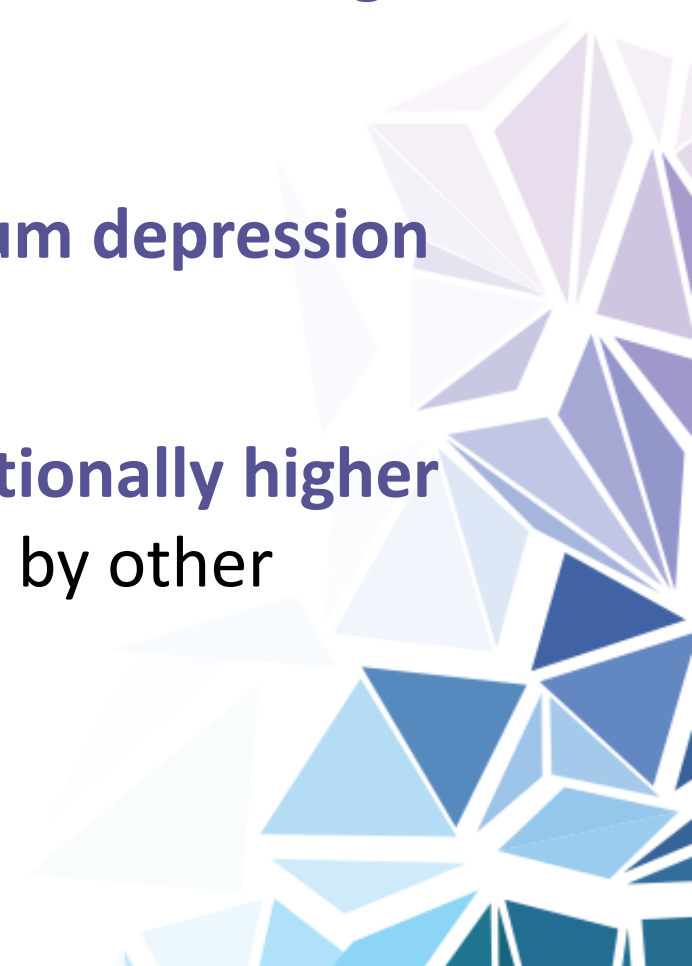
Learning objective

- Identify three specific areas requiring assessment with perinatal patients



The importance of assessment with perinatal patients

- The emotional state of the pregnant person impacts the **wellbeing of the child** both in utero and once born.¹
- Certain psychosocial factors increase **risk of postpartum depression and anxiety**.²
- Maternal morbidity and mortality rates are **disproportionally higher in marginalized groups** in ways that are not explained by other factors.³



Components of perinatal assessment

Medical and medication history

Pregnancy and reproductive history

Emotional and mental health concerns

Substance use

Trauma history

Perinatal psychosocial stressors

Safety and intimate partner violence

Concrete needs

Social support network

Other providers involved in care

Assessing medical and medication history

- **Medical issues** they are being treated for outside of pregnancy
- History of psychotropic medications and experiences
- What medications they are **currently taking** at what **dose and frequency**
- **Plans to discontinue** medication due to pregnancy or breastfeeding
- Who prescribes and monitors these medications currently



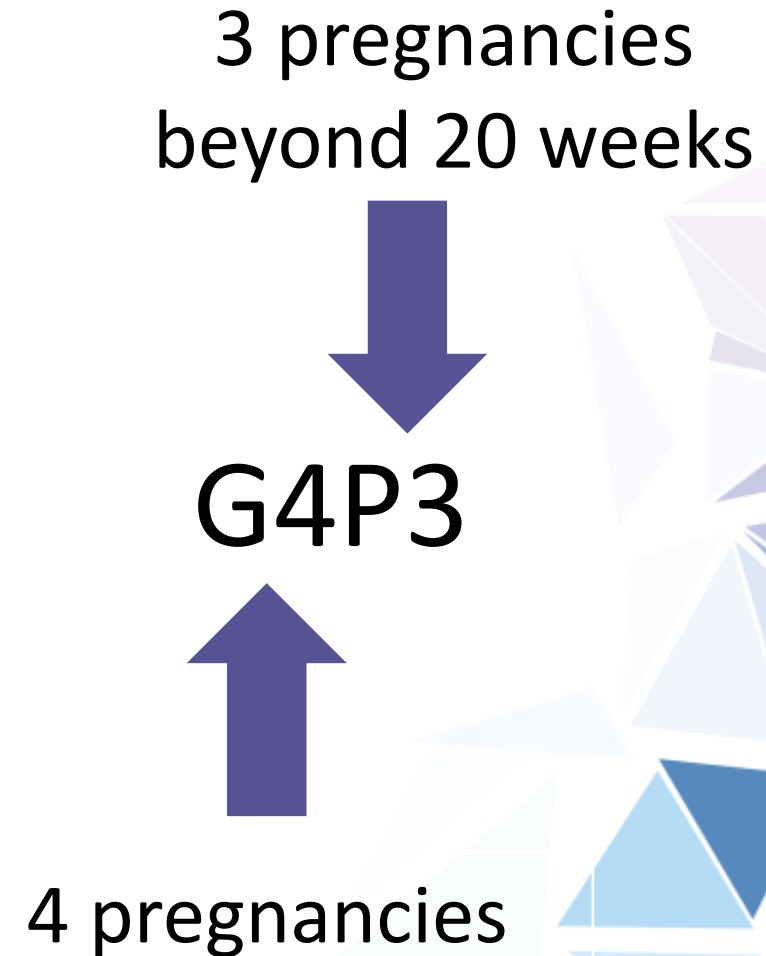
Assessing pregnancy and reproductive history

- Number of pregnancies and live births
- If current pregnancy was planned
- Previous history of fetal or infant loss
- Previous history of infertility or other reproductive challenges
- Current and past medical complications during perinatal period



Pregnancy history shorthand

- Gravida = the number of pregnancies including current pregnancy
- Para = the number of pregnancies beyond 20 weeks gestation, regardless of the number of fetuses or outcome



Risk and protective factors for complicated perinatal grief

Risk Factors⁴

- Maternal psychopathology
- History of gestational loss
- Social pressure to get pregnant soon after loss

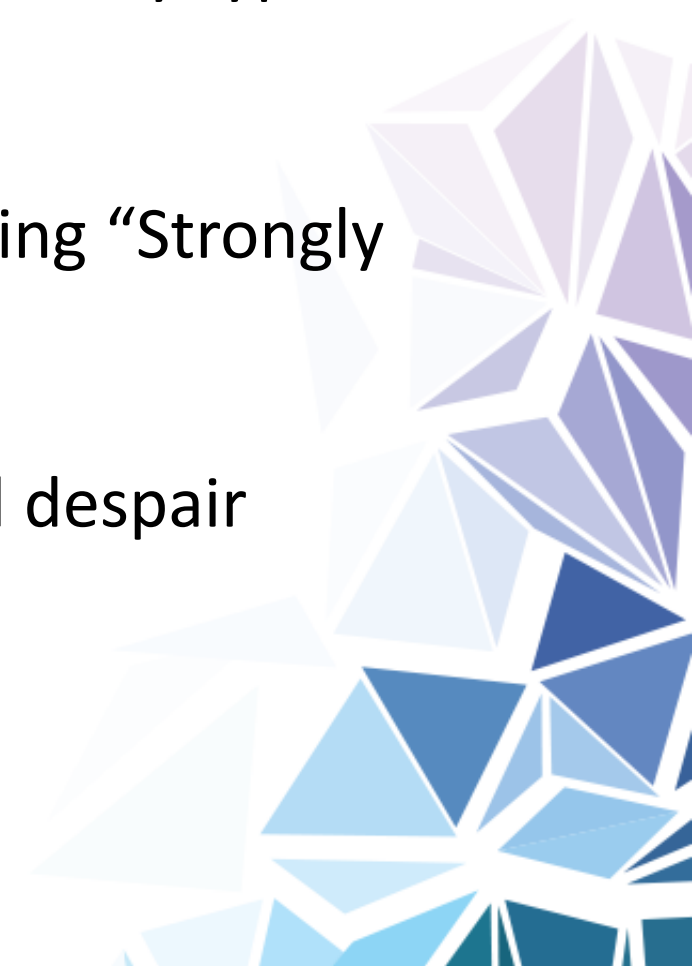
Protective Factors

- Presence of a living child
- Quality of available grief support services
- Social support



Perinatal Grief Scale (PGS)

- 33-item measure that has been validated for use with many types of pregnancy-related loss
- Patients respond on a scale from 1-5 with 1 representing “Strongly Agree” and 5 representing “Strongly Disagree”
- 3 subscales including active grief, difficulty coping and despair



Assessing mental health concerns

Current and previous diagnoses, including perinatal

Presence of suicidal ideation or thoughts of harming self or baby

Current and past mental health treatment



Eating disorder screening: SCOFF (Sick, Control, One, Fat, Food)

S: Do you make yourself **Sick** because you feel uncomfortably full?

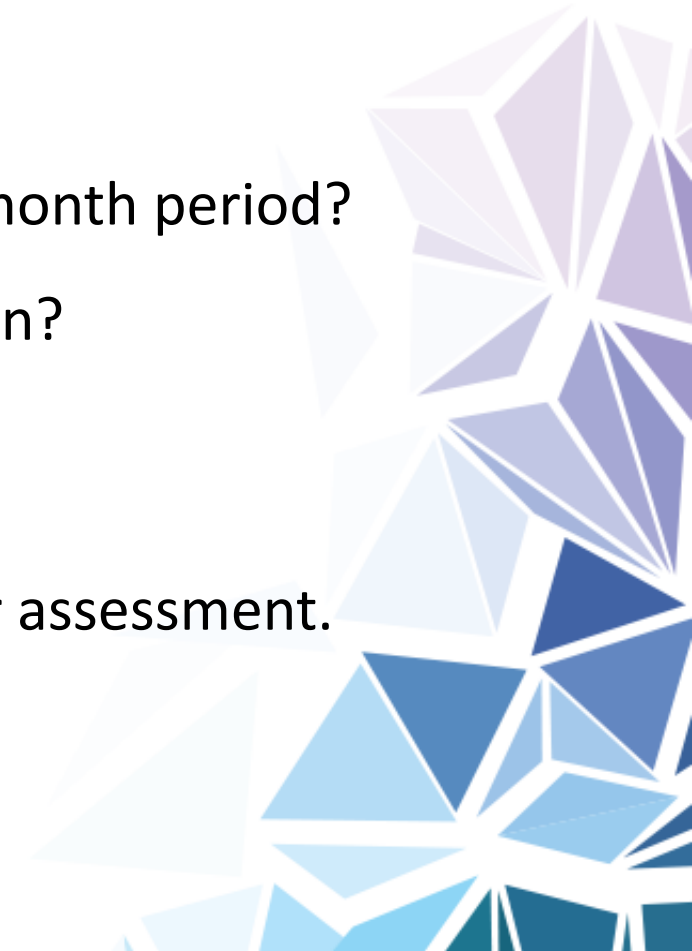
C: Do you worry you have lost **Control** over how much you eat?

O: Have you recently loss more than **One** stone (14 lbs) in a 3-month period?

F: Do you believe yourself to be **Fat** when others say you are thin?

F: Would you say that **Food** dominates your life?

A “yes” answer to 2 or more questions indicates need for further assessment.



Assessing for emotional changes and adjustment concerns



- Adjustment to pregnancy and parenthood and emotional changes since pregnancy or birth
- Feelings around this pregnancy or baby
- Sense of attachment and bonding to fetus or baby

Assessing perinatal substance use

- Caffeine intake level
- Past use of tobacco, alcohol, or drugs prior to pregnancy
- Current use of tobacco, alcohol, or drugs in pregnancy
- Past or current treatment for substance use disorders
- Utilize screeners such as 4P's, CRAFFT, NIDA quick screen



Assessing trauma history

- Assess for exposure to trauma such as:
 - Birth or pregnancy-related trauma
 - Abuse, including physical, sexual, psychological and emotional abuse
 - Neglect
 - Exposure to violence in home or community
- Focus on impact over specific details
- Utilize screening tools: ACES, PC-PTSD, and PCL-5



Impact of breastfeeding on perinatal mental health



- “Bi-directional” relationship between breastfeeding and depression⁵
- Stopping breastfeeding can often lead to increased anxiety and depression symptoms
- However, breastfeeding can also be a major source of stress itself
- **Dysphoric Milk Ejection Reflex (D-MER)** can cause negative emotions such as irritability, sadness and anxiety right before letdown of milk

Assessing feeding concerns

- If pregnant:
 - *How are you hoping to feed your child? How do you feel about this plan?*
- If postpartum:
 - *How is your baby fed and by whom? How is feeding going?*
 - **If breastfeeding:** *Have there been any noticeable changes to your mood while nursing or pumping?*



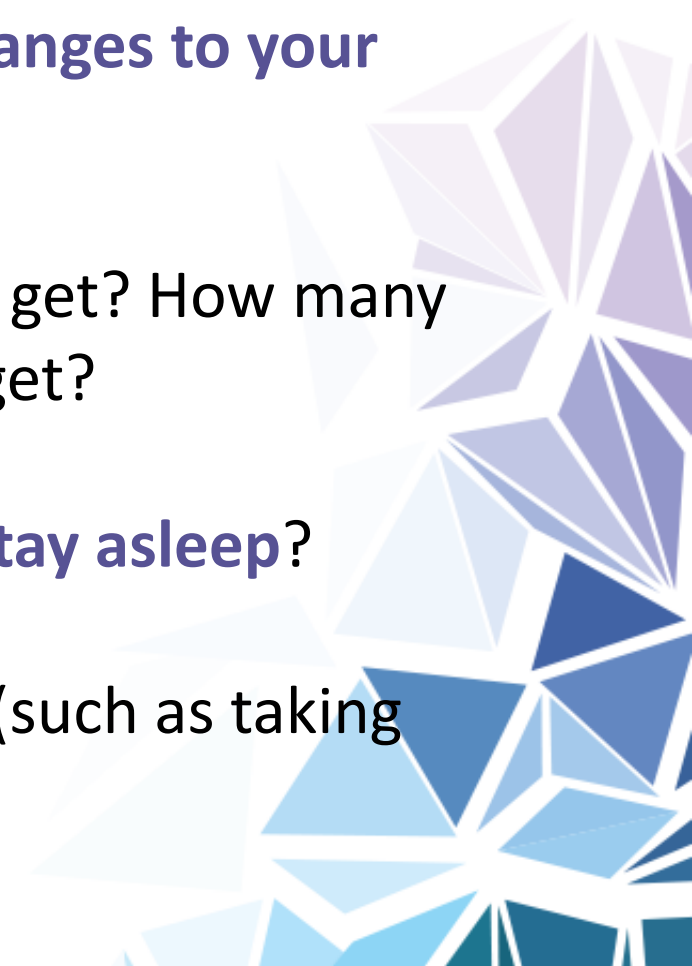
Impact of sleep on perinatal mental health

- Fatigue and poor sleep quality lead to higher risk of developing postpartum depression⁶
- Depression can also contribute to sleep problems, such as insomnia
- Extreme sleep deprivation affects physical and mental health



Assessing sleep concerns

- How have you been adjusting to the changes with your sleep schedule since baby was born? Have you noticed any **significant changes to your mood** due to loss of sleep?
- How many **hours in a row of sleep** are you usually able to get? How many **hours total over the course of the night** do you typically get?
- When you're able to sleep, do you **fall asleep easily and stay asleep**?
- Do you have any **support with the baby during the night** (such as taking turns with someone else for nighttime wakings)?



Impact of intimate partner violence (IPV) on perinatal patients

IPV victim-survivors:

- Are more likely to receive delayed prenatal care
- Are at higher risk for postpartum depression
- Experience more frequent pre-term birth, low birth weight and perinatal death^{7,8}

Risk factors for IPV⁹

- Prior history of abuse
- Partner alcohol abuse
- Partner jealousy
- Partner suspicion of infidelity
- Young age
- Single
- Minority status

Intimate partner violence screening with perinatal patients

At intake:	
In the last year have you been:	
1. Afraid of someone close (or less close) to you?	Yes or No
2. Hit, slapped, kicked, pushed, shoved, or otherwise physically hurt by someone close (or less close) to you?	Yes or No
3. Frequently made upset, ashamed, or embarrassed by someone close (or less close) to you?	Yes or No
4. Forced to have sex by someone close (or less close) to you?	Yes or No
At intake and monthly:	
5. Do you currently feel safe?	Yes or No

The impact of social determinants on perinatal patients

- Increased stress
- Negative impact on infant development before and after birth
- Negative impact on pregnancy and postpartum health outcomes¹⁰



Assessing social determinants of health with perinatal patients (1 of 2)

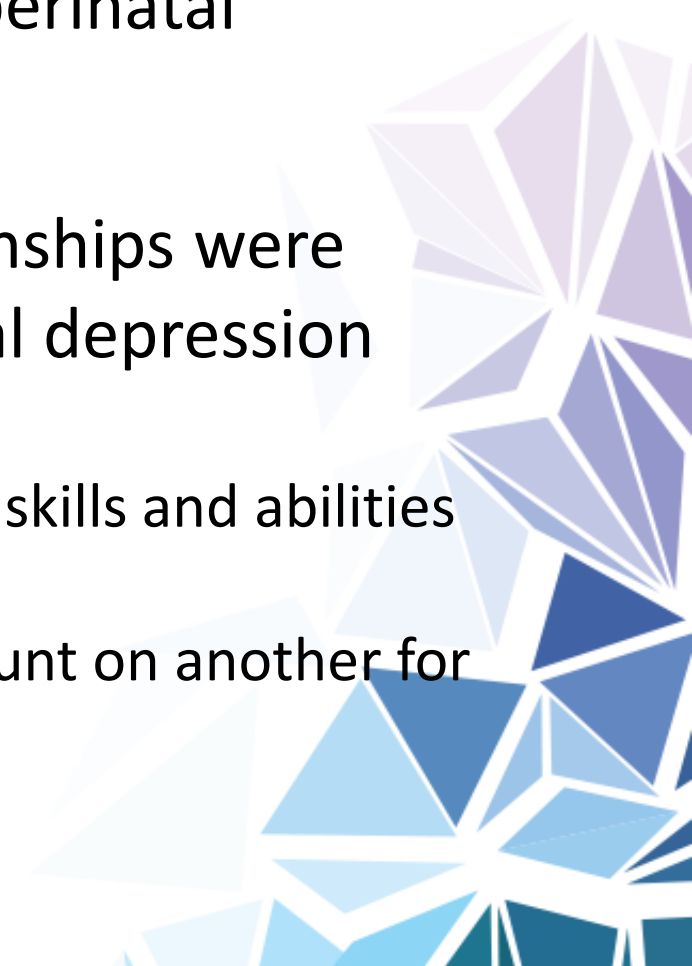
Domain	Question
Food	<ul style="list-style-type: none">• In the last 12 months, did you ever eat less than you felt you should have because there was not enough money for food?
Utility	<ul style="list-style-type: none">• In the last 12 months, has your utility company shut off your service for not paying your bills?
Housing	<ul style="list-style-type: none">• Are you worried that in the next 2 months, you may not have stable housing?
Childcare	<ul style="list-style-type: none">• Do problems getting childcare make it difficult for you to work, study or get to healthcare appointments?
Financial resources	<ul style="list-style-type: none">• In the last 12 months, have you needed to see a doctor but could not because of cost?

Assessing social determinants of health with perinatal patients (2 of 2)

Domain	Question
Transportation	<ul style="list-style-type: none"> In the last 12 months, have you ever had to go without healthcare because you did not have a way to get there?
Exposure to violence	<ul style="list-style-type: none"> Are you afraid you might be hurt in your apartment building, home or neighborhood?
Education and health literacy	<ul style="list-style-type: none"> Do you ever need help reading materials you get from your doctor, clinic or the hospital?
Legal status	<ul style="list-style-type: none"> Are you scared of getting in trouble because of your legal status? Have you ever been arrested or incarcerated?
Next steps	<ul style="list-style-type: none"> If you answered yes to any of these questions, would you like to receive assistance with any of those needs?

Importance of social support for perinatal patients

- Low social support is associated with higher rates of perinatal depression and anxiety¹¹
- In one study, two characteristics of supportive relationships were identified as strong protective factors against perinatal depression and anxiety¹²
 - **Reassurance of worth:** relationships in which the woman's skills and abilities are acknowledged
 - **Reliable alliance:** relationships in which the woman can count on another for assistance under any circumstances



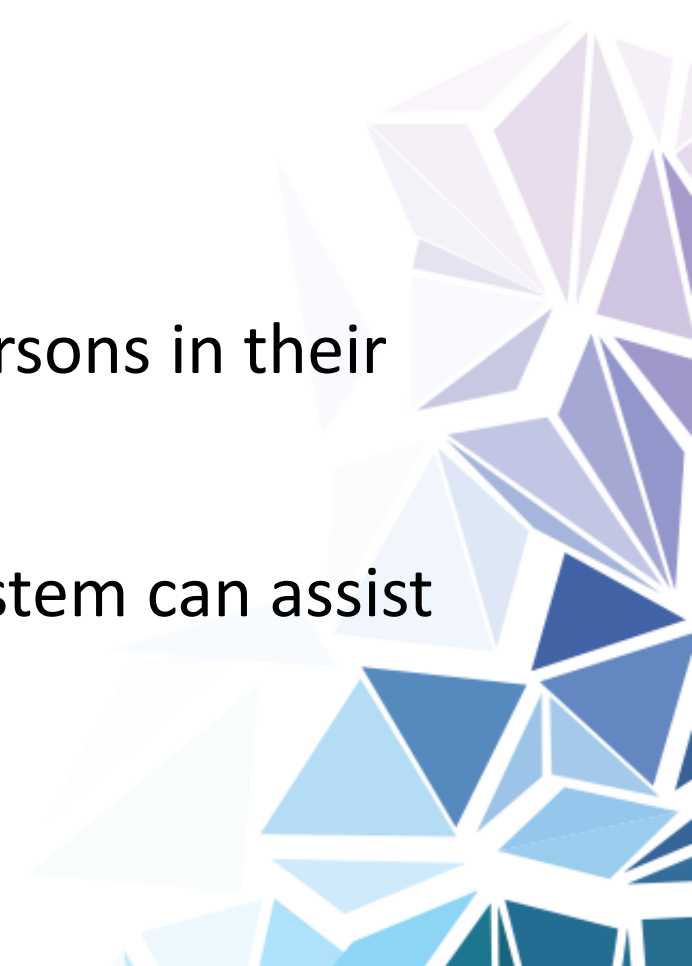
Integrating social supports in perinatal care



<https://www.youtube.com/watch?v=Nvlrf4pK-1A>

Assessing social support with perinatal patients

- Ask about sources of support:
 - Type
 - Level
 - Quality
- With patient's consent, consider involving support persons in their care
- Assess patient's perceived needs and how support system can assist with these
 - Physical, emotional, psychological



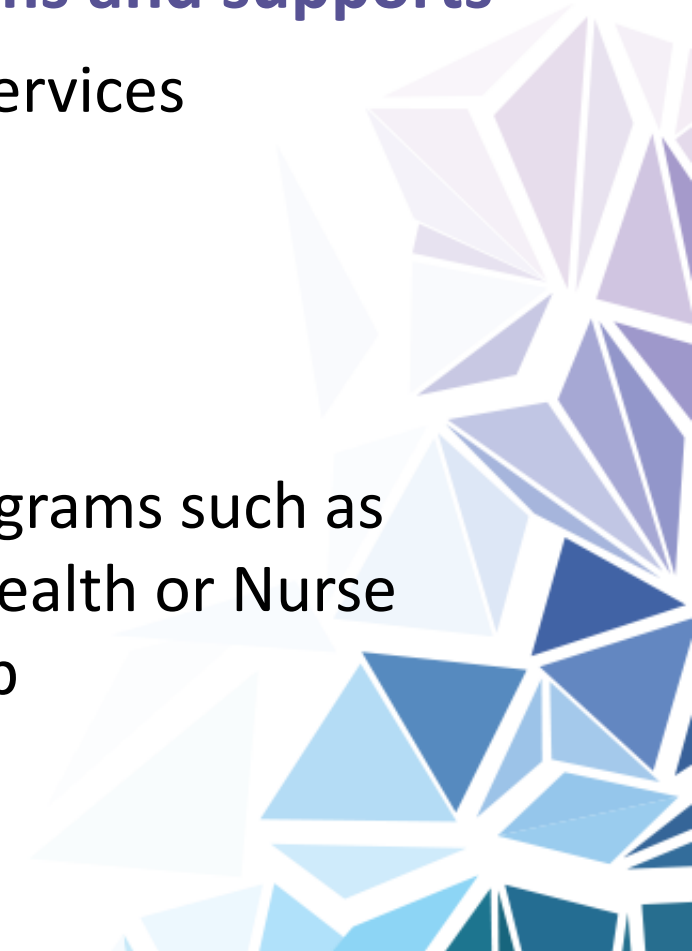
Assessing for other providers and systems involved in perinatal patient care

Mental health/SUD providers

- Therapists
- Psychiatrists
- Substance use treatment
 - Outpatient or inpatient treatment
 - Support groups (AA, NA, etc.)

Community systems and supports

- Child Protective Services involvement
- WIC
- Home visiting programs such as Maternal Infant Health or Nurse Family Partnership



Resources

- [PRISM Perinatal Grief and Infertility Webinar](#)
- [Perinatal Grief Scale \(PGS\) and scoring](#)
- [SCOFF screening tool for eating disorders](#)



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