

# Bipolar and Postpartum Psychosis: **PRE**gnancy **Pl**anning (**PREP**) Study **PREP Study**

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# Mental Health in the Perinatal Period

- The perinatal period – pregnancy up to 1 year postpartum
- Mental health problems are common during the perinatal period - affecting up to 1 in 5 women
- Suicide is a leading cause of maternal death
- £8.1 billion for each one year cohort of births - mainly impact of maternal illness on the child

# Postpartum Psychosis

- Affects 1-2 in every 1000
- Symptoms:
  - mania, severe affective psychosis, mixed mood symptoms, perplexity
- Onset - within 2 weeks of delivery
- Rapidly progressing and changing picture
- Treatment: psychiatric emergency, medication, admission

# Bipolar Disorder and Postpartum Psychosis

Women bipolar disorder and/or previous experience of postpartum psychosis are at high risk of experiencing postpartum psychosis.

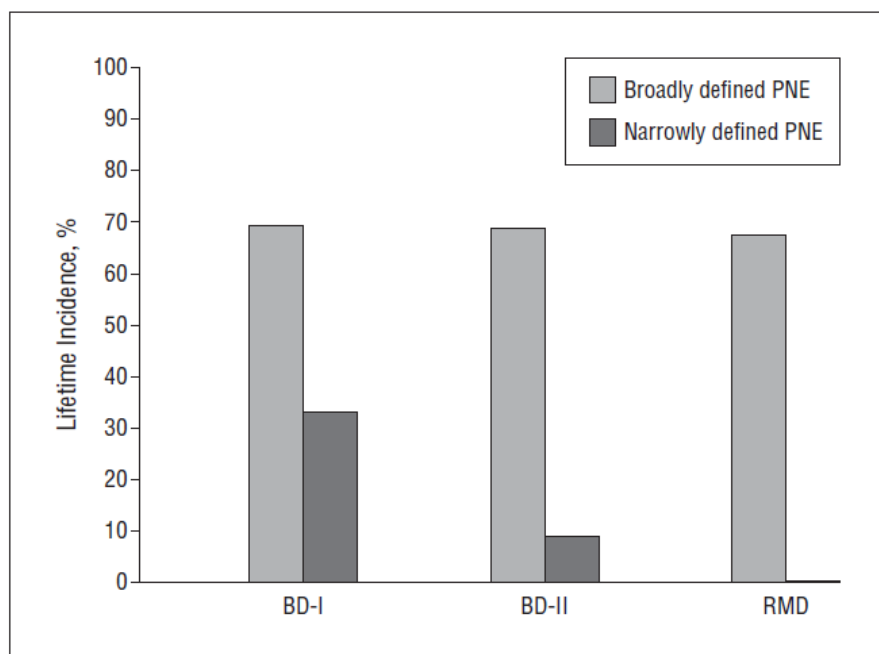
## **Risk of postpartum psychosis:**

- 20% of women with bipolar disorder
- 50% of women with previous history of postpartum psychosis

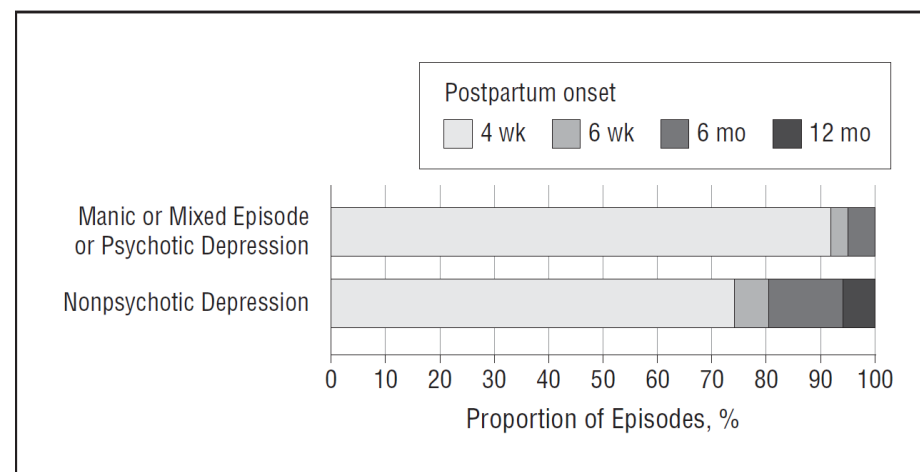
# High Risk Period for Recurrence

Bipolar disorder affects 2-3% of the population

Perinatal is a high-risk period - 40-50% risk recurrence



**Figure 2.** Lifetime perinatal episodes (PNEs) of illness in parous women with affective disorders. Narrowly defined PNE: an episode of mania/hypomania or affective psychosis with onset within 6 weeks of delivery. Broadly defined PNE: any major mood disorder with onset in pregnancy or within 6 months of delivery. For simplicity we have not presented the intermediate definition. BD-I indicates bipolar I disorder; BD-II, bipolar II disorder; and RMD, recurrent major depression.



**Figure 4.** Proportion of postpartum episodes identified as related to childbirth according to different definitions of postpartum onset.



# Women with bipolar disorder and pregnancy: factors influencing their decision-making

Clare Dolman, Ian R. Jones and Louise M. Howard

## “Bashing my head against a brick wall”

*“It took us quite a long time to become proactive ...I think it would have been good...to have some hard facts from them, rather than... just sort of putting me off really”*

*In light of the lack of advice available to them, a number of women thought it would be useful to have ‘some kind of guide or booklet for women’, which was ‘not forbiddingly medical ... and “doomy and gloomy”’*



# Previous research

**Conclusions from Dr Clare Dolman's research:** Improved access to information and specialist advice is needed and research on the possible usefulness of a decision aid would be helpful.

*"...so that someone isn't coming to me and then I'm just hitting them with all this information; they've actually had time to think about it, to process it, to start that decision making process before they've even come to see me ..."* General Psychiatrist

*"...it could help facilitate the discussion and also ...help her have that ongoing discussion with other family members."* Perinatal Psychiatrist



# Decision aid use in pregnancy

Journal of Affective Disorders 251 (2019) 91–99

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 **Journal of Affective Disorders**

journal homepage: [www.elsevier.com/locate/jad](http://www.elsevier.com/locate/jad)



Research paper

**A patient decision aid for antidepressant use in pregnancy: Pilot randomized controlled trial**


Simone N. Vigod<sup>a,b,c,\*</sup>, Neesha Hussain-Shamsy<sup>c</sup>, Donna E. Stewart<sup>a,f</sup>, Sophie Grigoriadis<sup>a,g</sup>, Kelly Metcalfe<sup>d</sup>, Tim F. Oberlander<sup>h</sup>, Carrie Schram<sup>a</sup>, Valerie H. Taylor<sup>a,b</sup>, Cindy-Lee Dennis<sup>a,d,e</sup>



ORIGINAL ARTICLE

**Evaluation of a Decision Aid for Women with Epilepsy Who Are Considering Pregnancy: A Randomized Controlled Trial**

Amanda McGrath, DCP/MSc, Louise Sharpe, PhD, Suncica Lah, PhD, Kaitlyn Parratt, MBBS

 **ELSEVIER**

Patient Education and Counseling 71 (2008) 108–115

[www.elsevier.com/locate/pateduco](http://www.elsevier.com/locate/pateduco)

**Patient Education and Counseling**

**The motherhood choice: A decision aid for women with multiple sclerosis**

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Meade et al. *BMC Musculoskeletal Disorders* (2015) 16:260  
DOI 10.1186/s12891-015-0713-0



**RESEARCH ARTICLE** **Open Access**



**The motherhood choices decision aid for women with rheumatoid arthritis increases knowledge and reduces decisional conflict: a randomized controlled trial**

T. Meade<sup>1,2\*</sup>, E. Dowswell<sup>1</sup>, N. Manolios<sup>2</sup> and L. Sharpe<sup>3</sup>





# Resources for women at risk of postpartum psychosis

[www.ncmh.info](http://www.ncmh.info)  
**bipolarUK** **APP**  
**NCMH**  
 National Centre for Mental Health  
**Bipolar Disorder, pregnancy and childbirth**  
 Information for women, partners and families

**RCPSYCH**  
 ROYAL COLLEGE OF PSYCHIATRISTS  
**Postpartum Psychosis: Severe mental illness after childbirth**

**Insider Guide**  
**Planning pregnancy: a guide for women at high risk of Postpartum Psychosis**  
**APP**  
 Action on Postpartum Psychosis  
 LOTTERY FUNDED

**RCPSYCH**  
 ROYAL COLLEGE OF PSYCHIATRISTS  
 Become a psychiatrist Training Members Events Improve  
 Home » Mental health » Problems and disorders » Postpartum psychosis  
**Postpartum psychosis**  
 Buy this leaflet Print this page Share this page Email this page  
 This information is written for any woman who has

- A high risk of postpartum psychosis because of previous mental health problems.
- Had, or is recovering from, a postpartum psychosis.
- Had postpartum psychosis before, and is pregnant again.
- A family history of postpartum psychosis.

And ...

- Her partner, family and friends.
- Anyone who just wants to know more about mental health problems after childbirth.

**bipolarUK**  
 FAQs

## Women and Bipolar

Information around pregnancy and childbirth for people affected by bipolar

Does bipolar affect women differently? ↓

If I want to have a baby what do I need to know? ↓

Should I come off my medication to have a baby? ↓

What sort of medical help can I expect? ↓

Second Opinion Perinatal Service ↓

**APP**  
 Action on Postpartum Psychosis  
 Home What is PP? Help and Support About Us Support Us News Research Forum  
 Action on Postpartum Psychosis

# **This project** - Bipolar and Postpartum Psychosis: Pregnancy Planning (PREP) Study

**Co-producing** a guide that women at risk of postpartum psychosis can use when planning for the perinatal period

- 1) Determine critical components of the guide
- 2) Establish whether the guide is acceptable to women and clinicians
- 3) Determine whether a phase 2 Randomised Controlled Trial (RCT) is feasible

# Method

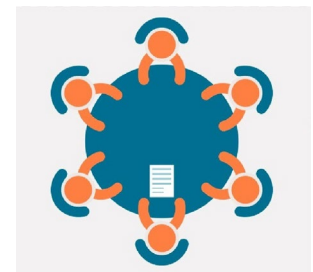
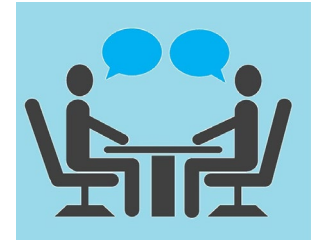
Following **Medical Research Council (MRC) guidance** for developing and evaluating complex interventions - *developing a prototype, pilot testing and refining on the basis of feedback.*

## Stage 1 - Development

- Focus groups
- Interviews

## Stage 2 - Piloting and Refining

- Test guide (2 phases)
- Feedback and refinement
- Inductive Thematic Analysis (Braun & Clarke, 2006).



# Partnership and Collaboration

## The 'collaborative guide'

Stage 1 –  
developing  
the guide

Feedback and  
refining

**Using the guide -  
Co-producing  
plans and joint  
decision making**

Stage 2 –  
testing the  
guide  
(2 pilot studies)

Dissemination



# Stage 1 so far:

## Women with lived experience of bipolar disorder or postpartum psychosis:

### *On current resources available:*

“no central place to write it down, other than your general booking notes ... I’ve just been kind of pulling things together myself.”

“there is no formal guide, and nowhere to write down, so I’ve been writing notes myself and putting them in a folder”

### *On the importance of planning:*

“I think it is all in the planning ... knowing what works if you’ve had a previous episode of postpartum psychosis ... making those sort of advanced decision ... and having everything in place”

# Next steps:

## Continue with Stage 1 Recruitment:

- Women with lived experience of bipolar disorder and / or postpartum psychosis
- Key stakeholders, for example:
  - Clinicians
  - Healthcare workers
  - Researchers
  - 3<sup>rd</sup> Sector organisations



# Acknowledgements

- Supervisors: Professor Ian Jones, Dr Catrin Lewis, Dr Jessica Heron
- All participants and stakeholders that have helped so far



[www.ncmh.info/prep](http://www.ncmh.info/prep)

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