

Integration of Mental Health Care in Obstetrics: Interprofessional Education Opportunities

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Background

- In the U.S. each year ~500,000 pregnant women have or will develop psychiatric illness (1).
- The prevalence of depression in pregnant women is between 14%-23%.
- Up to 70% of pregnant women have symptoms of depression (1,2).
- Graduate medical education does not require obstetrics-training for psychiatrists or psychiatry-training for OB-Gyn residents.
- Family medicine, internal medicine, and OB-Gyn residents are not required to train in psychiatry during residency by the ACGME.
- The limited experience with mental illness in the puerperal period during training is modifiable.
- Training in a combined obstetric-psychiatric (OB-Psych) clinic would rectify this gap in education with great benefit to patients and trainees alike including promotion of interprofessional teamwork.

Methods

- A literature review compared various ACGME program requirements in the psychiatric treatment of pregnant women.
- Data from the CRMH OB-Psych Clinic training site was compiled and analyzed to show:
 - gaps in interdisciplinary residency training.
 - necessity for coordinated care learning environments in residency training.
 - specifics of the treatment of psychiatric patients during pregnancy.
 - educational benefit of this experience across multiple specialties.
- Residents were interviewed about their experiences on the rotation.

- Training in obstetric patients with psychiatric needs is inconsistent among U.S. psychiatry residency programs (6).
- Sparse and generalized lack of exposure to obstetric patients with psychiatric needs.
- This rotation addresses all core competencies including Medical Knowledge and Patient Care, Interpersonal and Communication Skills, Practice Based Learning, Systems Based Practice, and Professionalism.

Residency Program Specialty	Required experience in OBGYN (months)	Required experience in Psychiatry (months)	
Psychiatry	0	n/a	
Obstetrics and Gynecology	n/a	0	
Family Medicine	1 month GYN 2 months OB	0	
Internal Medicine	0	Optional	

Interdisciplinary Team Members and Organizations

Psychiatry Attending Physician

Obstetrics Attending Physician

Neonatologist

Resident Physicians (Obstetrics and Psychiatry)

Certified Nurse Practitioner

Nursing Staff

Medical Students

Lactation Consultants

Substance Abuse Services

State and/or Federal Agencies

- **Child Protective Services**
- Homeless Shelters
- Bethany Hall

Clinical Obstetrics Social Workers

Medicaid Support Services

Interpretive Services

Legal Advocates

Results

Required	
experience in	
Addiction	
(months)	

- ~200 new patients come through the OB-Psych clinic annually
- After surveying residents who have had training in reproductive psychiatry, they reported:
- Greater comfort with managing medications in pregnancy.
- Increased knowledge base of psychiatric medications. - Working with a collaborative team of obstetrics and
- psychiatry specialties increases patient comfort with taking medications for their mental health.
- Residents particularly enjoy working with Dr. Jennifer Wells, who first trained in OB-Gyn and later completed her residency in psychiatry at Carilion.

"So often in pregnancy we are faced with patients dealing with depression who are reluctant to take antidepressants. Through our time in the OB-Psych clinic we have learned to be comfortable with prescribing medications and reassuring patients that their mental health and stability are extremely important to overall fetal health."

"My time in OB-Psych clinic helped me get comfortable with using psychiatric medications in pregnancy. It also really helped my conversations with my patients when I refer them. It helps to be able to say that I know Dr. Wells, I have worked with her, and I know she is going to take really good care of you. It's the next bests thing to being able to walk her over to them myself. Many of my patients are anxious about using psychiatric medications in pregnancy and knowing that they are being cared for by a specific OB-Psych clinic really puts their minds at ease."

List of Commonly seen Mental Health **Disorders in the OB-Psych Clinic**

Major Depressive Disorder

Generalized Anxiety Disorder

Post Traumatic Stress Disorder

Opiate Use Disorder

Nicotine Use Disorder

Alcohol Use Disorder

Panic Disorder with or without agoraphobia

Schizophrenia

Conclusion / Discussion

- residency is warranted.
- disciplines.
- population.

References

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• Due to the high incidence of maternal mental health disorders in pregnancy, greater exposure to this population during

• Creating more opportunities for educational advancement with obstetric patients with psychiatric co-morbidities would benefit residents from multiple

• Participation in this clinic will enhance training in the treatment of this high-risk

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