

How Should we Screen for Mental Health Conditions in the Perinatal Period?

Preliminary results from a systematic review of systematic reviews



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INTRODUCTION



Around 20% of women experience mental illness during the perinatal period. Not only can this contribute to significant maternal mortality, offspring exposed to antenatal distress have poorer physical and psycho-social development



Timely identification and treatment is therefore vital



Many screening tools have been developed for the identification and stratification of mental health conditions



Edinburgh Postnatal Depression Scale (EPDS), Beck Depression Inventory (BDI-II) and Patient Health Questionnaire-9 (PHQ-9) have been used in perinatal communities globally.

Validation of these tools is vital. A systematic review is required to summarise the most up to date knowledge. We need clear guidance on validated tools for use in clinical settings.

METHODS

REVIEW QUESTION:

- Which screening tools to identify common perinatal mental health disorders have been validated for use in clinical settings internationally?
- What "gold standard" has the screening tool been compared to (E.g Structured Clinical Interview, PH9-Q)?



STUDY DESIGN: Systematic review of systematic reviews



SEARCH STRATEGY: Electronic data bases searched (Ovid MEDLINE, PsychINFO, EMBASE, Global Health and Cochrane Database of Systematic Reviews) using MeSH terms ("Perinatal") AND ("Mental Health") AND ("Screening" OR "Validation") AND ("Systematic Review")



INCLUSION CRITERIA: Systematic reviews published in any year, in any language, of any quality were included. These must summarise the validity of screening tools used in perinatal period.

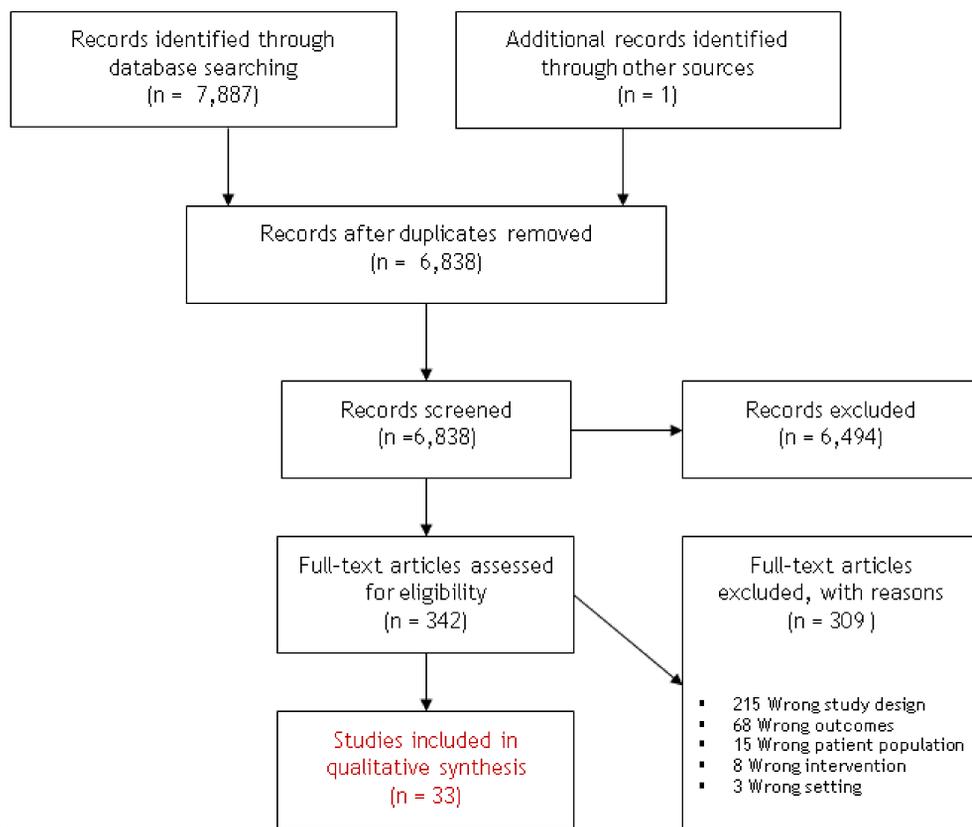


QUALITY APPRAISAL: AMSTAR-2 tool (A Measurement Tool to Assess Systematic Reviews) used to assess quality of included reviews. Degree of inter-rater agreement calculated using Cohen Kappa.



DATA SYNTHESIS: Meta-synthesis approach used for a narrative comparison of the results. If possible, pooled positive and negative predictive value, sensitivity and specificity will be compared. If possible, summary receiver operating characteristic curves (SROC) may be compared for validity assessment of various threshold settings.

RESULTS: SYSTEMATIC REVIEW



PERINATAL PERIOD:
The time during pregnancy and up to 1 year after delivery

PRELIMINARY RESULTS



Women from Myanmar and Thailand complete the EPDS
Consent for photographs gained from participants



PRELIMINARY SUMMARY CHARACTERISTICS:

- 33 Papers included for review
- Size of the included reviews ranges from 2-53 papers
- Reviews were published in Norwegian, French and Portuguese, but English was the most common language.



PRELIMINARY ANALYSIS:

- Most screening tools are validated for use in depression
- Much less data available on anxiety
- The Edinburgh Postnatal Depression Scale (EPDS) is validated for use in largest number of cultural contexts
- Newer tools (e.g Postpartum Depression Screening Scale) are starting to be used in favour of the EPDS



NEXT STEPS:

- Complete Data extraction from all 33 studies
- Analysis of data using narrative synthesis of results