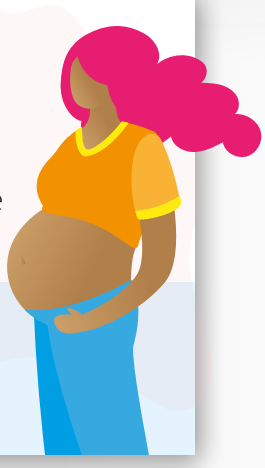
Major Depressive Disorder During Pregnancy

Your Options for an Informed Treatment Choice

Who is this document for?

If you are pregnant (or intend to become pregnant) and have been informed by a healthcare professional that you suffer from a major depressive disorder, this document is for you.

It will help you explore treatment options to support you in your discussion with your healthcare professional and help you make an informed decision.



If you're already taking an antidepressant and have just found out you're pregnant, consult your healthcare professional to discuss what to do next. It's also important to remember that stopping your medication too quickly can put you and your baby at risk.

What is depressive disorder?

Depression during pregnancy affect approximately **10 to 15 %** of women

It's normal during pregnancy to experience fatigue, strong emotions or changes in appetite. However, when symptoms have a significant impact on daily functioning and life, it may be a major depressive disorder. A pregnant woman diagnosed with a major depressive disorder may also lose interest in her pregnancy or neglect medical appointments.

Depending on the number and intensity of your symptoms and their impact on your daily life, you may be classified as having a mild, moderate, or severe depression.

Any depressive episode should be discussed with a healthcare professional and treated, even during pregnancy. It's normal to feel a certain reluctance to broach this subject, but this feeling tends to diminish once you begin follow-up. Don't hesitate to consult a health professional about your mental health.

If you have any questions about your pregnancy or mental health, **you can call 811.**

There are also a number of free resources, including:

Ma grossesse service : Register on this site for more information on the care and services available to pregnant women.

Trousse de soutien - Le bien être en période périnatale : consult this document for more information on mental health during and after pregnancy.

If you have suicidal thoughts or aggressive feelings towards others:

Call 1-866-APPELLE (277-3553) or visit **suicide.ca** for free, confidential listening and support.

All scientific studies in the present work use gender and not gender identity or expression to describe their participants. Thus, throughout this document, the term «female» includes cisgender, transgender, and non-binary people designated at birth as female. For more details, visit inesss.qc.ca

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Why is it important to treat depressive disorder?

Untreated or under-treated major depressive disorder during pregnancy increases the risk of adopting behaviours that are less favourable to your health and that of your baby. Here are a few examples:

- Difficulty taking care of yourself (diet, sleep)
- Difficulty attending follow-up appointments
- Increased risk of using tobacco, alcohol, or drugs
- Increased risk of suicidal ideation

It also increases the risk of developing a major depressive disorder **after childbirth**, which can lead to difficulty interacting with and bonding to your baby.

What are my treatment options?

The treatment of major depressive disorder consists of one or other of these 3 options:

	Psychotherapy or psychosocial intervention
	Taking an antidepressant
+	**Combination of the first two options**

Note that maintaining a healthy lifestyle has a positive effect on physical and mental health, particularly in terms of sleep hygiene, physical activity, diet, and smoking cessation.

If you need help, call Info-Social (811, option 2) to find out which community resources are available in your area.

What is psychotherapy or psychosocial intervention?

Psychotherapy and psychosocial interventions aim to bring about changes in interpersonal relationships and in ways of thinking, reacting, and feeling, thereby promoting better overall health.

These treatments generally involve regular sessions with a health and social services professional (e.g., a psychologist or social worker). These sessions can be offered on an individual or group basis.

- Weekly or bi-weekly meetings with the professional are generally required.
- The length of treatment may vary, depending on your needs and the approach used.

Some treatments can be undertaken on one's own, or with the support of loved ones, community services, or professionals. Called self-care, they can be supported by material (e.g. mobile app, book) and aim to maintain or improve one's health and psychological well-being.

Some self-care tools are available here:

Digital and self-care mental health support tools

If you choose one of these treatment options, your professional will discuss the best approach with you.

What's involved in taking an antidepressant?

An antidepressant is a drug that acts on depressive symptoms and mood. It must be taken every day to be effective. There are a number of different antidepressants available to treat major depressive disorder. However, each one has its own specific characteristics, with varying degrees of side-effects.

If taking an antidepressant is the best option for you, your healthcare professional will guide you towards the most suitable medication.

Please note that…

- Pregnancy and breast-feeding **are not incompatible** with antidepressant use.
- Taking an antidepressant during pregnancy **is not associated** with long-term intellectual or motor development problems in the child, nor with attention deficit disorder with or without hyperactivity (ADHD), or autism spectrum disorder (ASD).
- **Natural health products should be avoided during pregnancy**. The effect of most of these products has not been evaluated in pregnant women. It is important to consult a health professional for more information on this subject.
- Light therapy, yoga, or acupuncture are complementary approaches often mentioned, but they **do not replace** psychosocial intervention, psychotherapy, or antidepressants.

What are the **advantages** and **disadvantages** of treatment options?

	PARTICIPATE IN PSYCHOTHERAPY OR PSYCHOSOCIAL INTERVENTION	TAKING AN ANTIDEPRESSANT
WHAT ARE THE ADVANTAGES?	• Improved well-being, quality of life, and daily functioning during pregnancy and after childbirth. • Treatment efficacy may vary according to the severity of your condition and your personal history. • Reduced risk of recurrence during pregnancy and after childbirth. • **Psychotherapy or psychosocial intervention combined with an antidepressant** may have additional benefits, especially for moderate to severe depressive	
WHAT ARE THE RISKS?	• There do not appear to be any significant risks associated with this option.	• Some people experience adverse drug reactions (e.g. gastrointestinal upset, dry mouth, headache, dizziness, drowsiness or insomnia, loss or increase of appetite). These effects are generally temporary. • At birth, your baby may experience restlessness, irritability, tremors, or difficulty breathing. These signs are usually transient and disappear after 2 to 14 days, but some babies may need special care. Talk to your healthcare professional for more information and to find out if there are any other risks in your situation.
WHAT ARE THE DISADVANTAGES?	• **Time required:** Regardless of the duration and frequency of treatment, a reduction in symptoms may take some time (usually a few weeks). • **Costs:** Treatment costs may not be 100% covered by private insurance, where applicable.	
	• **Access to services:** There could be a waiting list to see a healthcare professional.	

There is no «right» or «wrong» decision when it comes to choosing a treatment.

Before your follow-up meeting with your healthcare professional, take the time to think about what's important to you, your values, and your preferences regarding the various options available.

Discussions with people close to you, such as your partner or family members, can also help you think things through.

What's important to me

You can use the table below to note your preferences for each option.

	PARTICIPATE IN PSYCHOTHERAPY OR PSYCHOSOCIAL INTERVENTION
What do I like about this option?	
What don't I like about this option?	

	TAKING AN ANTIDEPRESSANT
What do I like about this option?	
What don't I like about this option?	

	COMBINING TREATMENT OPTIONS
What do I like about this option?	
What don't I like about this option?	

Personal notes

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