

# Mental Health in Mothers of Infants with NAS and Prenatal Opioid Exposure



<https://www.sjog.org.au/our-locations/st-john-of-god-burwood-hospital/our-services/mental-health-and-therapy/mother-and-baby-unit>

**The Study:** Faherty, Matone, Passarella, Lorch (2018) conducted a study aimed to describe the prevalence of four mental health disorders: depression, anxiety, bipolar disorder, and schizophrenia among three groups: mothers of infants with NAS, mothers of infants with long term prenatal opioid exposure (LTPOE) who did not develop NAS, and controls.

## The Statistics:

- ❖ Pregnant women using opioids have a high prevalence (56-73%) of mental health difficulties
- ❖ Opioid use in women with depression and anxiety disorders are almost double than those without these diagnoses
- ❖ 30.9% of mothers of infants with NAS and 21.4% of mothers of infants with LTPOE were prescribed a psychotropic drug during pregnancy when compared with 4.3% of mothers in the control group
- ❖ Almost half of mothers with NAS and LTPOE (46.8%) received prescription narcotics during pregnancy compared with 26.7% of controls
- ❖ Mothers of infants with NAS have 2.5 times the risk to have depression, no difference in the risk of bipolar disorder or anxiety, and at 6.3 times the risk for schizophrenia

## What does this mean for mother and baby?

- ❖ Mental health diagnoses and inadequate support can affect prenatal care adherence, birth outcomes, and attachment between mom and baby
- ❖ Infants with NAS typically have needs for special care and this puts more stress on mothers this exacerbating mental health difficulties
- ❖ This leads to infants with NAS having higher risk for hospitalization due to maltreatment/trauma than infants without NAS

## How can professionals help?

- ❖ Ensure mother and infant are cared for as a unit and issues that affect both are not overlooked
- ❖ Connect mothers with services for their substance use, resources to help them care for themselves and their infants, and mental health support during the prenatal period
- ❖ Screen all pregnant women for mental health diagnoses during initial prenatal appointments to provide earlier detection and treatment
- ❖ Create a safe environment where women feel comfortable sharing struggles with substance use before, during, and after pregnancy
- ❖ The study also suggests “warm hand-offs” of information among clinicians, early involvement of social work and mental health professionals, and optimization of EMR to improve confidential communication of important information regarding substance use/mental health history