



Special care for struggling moms

First-of-its-kind perinatal psych unit treats mood disorders

By Heather Stringer

North Carolina

In August, University of North Carolina Hospitals charted new territory by opening the doors of a perinatal psychiatry inpatient unit — the first free-standing psychiatry unit in the country dedicated solely to pregnant or postpartum women suffering from severe mood disorders.

According to Samantha Meltzer-Brody, MD, medical director of the unit, 10% to 15% of all pregnant women will develop postpartum depression. Starting in 2008, Meltzer-Brody collected data at the UNC Center for Women's Mood Disorders to track how many of the PPD cases were severe enough to require hospitalization. She found that about 5% required hospitalization. This data confirmed that there was a need to better serve these patients by creating the free-standing inpatient unit.

The new unit's decor includes four bedrooms and five beds and is equipped with glider rocking chairs, cribs in the bedrooms, hospital-grade pumping machines and a breast milk refrigerator. The staff on the unit includes a nutritionist who also is a lactation consultant, a nurse who has a background as a doula and another nurse with a long history in labor and delivery.

"What I have witnessed is that patients feel a great sense of relief that there is a place they can be admitted that addresses their needs as well as their babies' needs," said Lynne Burns, RN, nurse manager of the new unit. "There also is research potential, so we plan to collect extensive data that can give us information about preventative measures for the future."

So far 20 women have been admitted to the program; most suffer from conditions such as major depression or bipolar disorder that can include comorbid anxiety disorders, Burns said. Some patients have a long-standing history of psychiatric illness, while others develop symptoms during pregnancy or postpartum, according to Meltzer-Brody.

"We admit women during pregnancy and postpartum," said Meltzer-Brody. "Many women are not admitted until some months have passed in the postpartum period and they no longer can function at home or outpatient treatment has been unsuccessful."

During their time in the unit, patients can participate in group therapy that covers nutrition, recreation, mindfulness training, spirituality and attachment to the baby. Evening group meetings are open to partners of the women. Group therapy sessions cover topics such as which medications are safe, bonding, time management and how to manage intrusive thoughts, guilt and feeling overwhelmed. "Another advantage of having a special unit for these women is that they are with other patients who struggle with similar issues, so they have a group experience rather than feeling isolated," Burns said.

Burns remembers a patient in her 30s who was suffering from overwhelming feelings that something was wrong because she could not emotionally attach to her newborn baby. The woman acknowledged that she had felt similarly when her first child was born, but she had not sought treatment because she believed medication was not an option for nursing mothers. While in the new unit, she was diagnosed with major depression and



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started taking anti-depressant medication. The mother also learned coping strategies and left feeling more confident that she could handle a newborn and young child at home, according to Burns.

"Our program has a large outpatient program and most patients will do well in the outpatient setting," Meltzer-Brody said. "However, some women will require inpatient treatment due to having suicidal thoughts, thoughts of

hurting the infant, or having severe enough symptoms that they are unable to function."

For Burns and the other staff in the new unit, positive outcomes fuel their hopes that this is just the beginning of what could become a new trend in treatment for mothers with mood disorders. Their hope is that the unit will not only serve families locally and within North Carolina, but also throughout the nation. •

Heather Stringer is a freelance writer.



TO LEARN MORE about UNC's perinatal psychiatry inpatient unit, visit womensmooddisorders.org.



Eileen Spahl, RN-BC, BSN, MED, clinical director, psychiatry and rehabilitation (retired); Elizabeth Bullard, MD, inpatient attending, UNC perinatal psychiatry program; and Samantha Meltzer-Brody, MD, MPH, medical director.

Photos courtesy of UNC Healthcare