

Perinatal Depression and Anxiety in Women With Multiple Sclerosis

A Population-Based Cohort Study

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Study Question

What are the risks of depression and anxiety during pregnancy and in the postpartum period in women with multiple sclerosis (MS)?

What Is Known and What This Paper Adds

MS is a risk factor for depression and anxiety in the general population. This investigation's results suggest that women with MS have a higher risk of perinatal depression, and that women with MS with symptom onset up to 5 years after pregnancy had an increased risk of depression and anxiety during pregnancy.

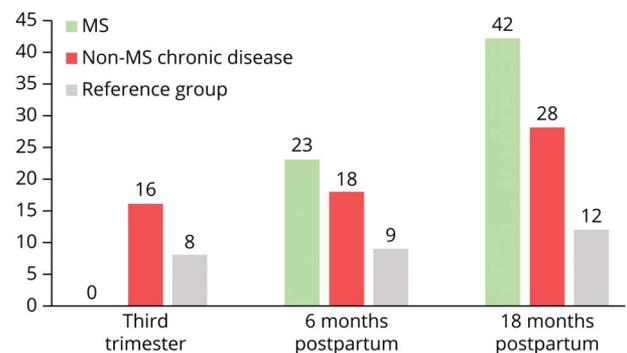
Methods

For these longitudinal analyses, the investigators analyzed data from 114,629 pregnant women who participated in the Norwegian Mother, Father, and Child Cohort Study between 1999 and 2008. During and after pregnancy, the women underwent screenings for depression and anxiety separately with validated short versions of the Hopkins Symptom Checklist-25. The diagnosis of postpartum depression was validated with a short version of the Edinburgh Postnatal Depression Scale. Perinatal depression or anxiety were diagnosed when symptoms were experienced during pregnancy or in the first 6 months postpartum. Data from Norwegian health registries and hospital records were used to categorize the women with MS into groups as 1) those diagnosed with MS before pregnancy ($n = 140$), 2) diagnosed with MS after pregnancy and experiencing symptom onset before pregnancy ($n = 98$), and 3) women with MS who had symptom onset in the 5 years after pregnancy ($n = 308$). The remaining women without MS diagnoses ($n = 111,627$) served as a reference group. Risks of depression and anxiety were analyzed with logistic regression analyses.

Results and Study Limitations

Compared with women without MS, women diagnosed with MS before pregnancy had a higher risk of third-trimester depression (odds ratio, 2.0; 95% confidence interval, 1.2–3.1),

Figure Perinatal Depression and Other Diagnoses



Prevalence rates for perinatal depression in different time periods for women with MS (green), women with non-MS chronic conditions (red), and women with neither (gray).

but no increased risk of perinatal anxiety. Women with MS onset ≤ 5 years after pregnancy had increased risks of both depression and anxiety during pregnancy, but women with MS onset >5 years after pregnancy did not. Those diagnosed with MS in the postpartum period had increased occurrence of postpartum depression. The study's limitations include lack of physician-issued diagnoses of depression and anxiety and the possibility that women in psychological distress were not motivated to enroll in the cohort.

Study Funding and Competing Interests

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A draft of the short-form article was written by M. Dalefield, a writer with Editage, a division of Cactus Communications. The corresponding author(s) of the full-length article and the journal editors edited and approved the final version.

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