

New Hope for Postpartum Depression Treatment

Josie Cooper

The Alliance for Patient Access (allianceforpatientaccess.org), founded in 2006, is a national network of physicians dedicated to ensuring patient access to approved therapies and appropriate clinical care. AfPA accomplishes this mission by recruiting, training and mobilizing policy-minded physicians to be effective advocates for patient access. AfPA is organized as a non-profit 501(c)(4) corporation and headed by an independent board of directors. Its physician leadership is supported by policy advocacy management and public affairs consultants. In 2012, AfPA established the Institute for Patient Access (IfPA), a related 501(c)(3) non-profit corporation. In keeping with its mission to promote a better understanding of the benefits of the physician-patient relationship in the provision of quality healthcare, IfPA sponsors policy research and educational programming.



The [FDA has approved](#) the first oral medication to treat postpartum depression, marking a major breakthrough for maternal mental health. (1)

Like other kinds of depression, postpartum depression can overwhelm a new mother with sadness, feelings of inadequacy, and fatigue. Treatment previously was available only through an IV administered in a clinical setting, which can be challenging to access, time-consuming, and inconvenient for busy families caring for a newborn.

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A Paradigm Shift in Treating Postpartum Depression

Patients given the oral medication once daily for two weeks experienced reduced symptoms of postpartum depression. That effect lasted up to a month after the final dose. After two randomized, double-anonymized, placebo-controlled trials – the gold standard for clinical research – the treatment received FDA approval under the [Fast Track](#) designation. (2)

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However, while medical breakthroughs are exciting, actual progress in reducing postpartum depression in the United States requires more than just new treatments.

Screening, early intervention, and access to care are crucial to transforming the lives of new mothers and whole families through better mental health support.

More Screening, Less Stigma

Improved screening for depression during pre- and postpartum care could help connect patients to treatment. It could also reduce the stigma around mental health challenges for new mothers. Establishing a baseline for maternal mental health before the third trimester, for example, may help clinicians identify women who are struggling or at risk for postpartum depression.

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Treating postpartum depression is important not only for mothers' mental health but also for infants' development. The relationship between mother and newborn is critical for emotional bonding and long-term well-being. Leaving postpartum depression untreated raises the risk of developmental delays.

About Postpartum Depression

About [15%](#) of new mothers experience symptoms of postpartum

depression. (3)

Without treatment, depression can escalate to life-threatening levels: suicide is the second leading cause of postpartum death.

“Even with these well-known risks, surveys indicate one in eight women will not even be asked about their emotional health during postpartum appointments. (4)”

Even with these well-known risks, surveys indicate one in eight women will not even be asked about their emotional health during postpartum appointments. (4) The resulting underdiagnosis and undertreatment can be addressed through an improved standard of care.

References:

1. <https://www.fda.gov/news-events/press-announcements/fda-approves-first-oral-treatment-postpartum-depression>
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4. Kuehn BM. Postpartum Depression Screening Needs More Consistency. JAMA. 2020;323(24):2454. doi:10.1001/jama.2020.9737

Disclosure: Josie Cooper is executive director of the Alliance for Patient Access. This article was also published at healthpolicytoday.org.


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