

October 2010
E. Nuhfer, MRes, MSCP
Katherine Wisner, MD

A special thanks to Liz Nuhfer, who has constructed these wonderful newsletters, with lovely pictures and great stories!

The information editor function will be taken over by Cindi Logsdon, from the University of Louisville, after this issue.

Marcé Society Newsletter *Welcoming you to Pittsburgh, PA!*

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Postpartum Support International Annual Silent Auction

The following is taken from the PSI Annual Silent Auction announcement correspondence.

August 13, 2010

With the annual conference fast approaching this coming October in Pittsburgh, your help is needed for a successful PSI's Annual Silent Auction. The Silent Auction offers an opportunity to "Eat, Drink, and Be Merry" during the evening Banquet on Friday October 29th. As in past years, we are asking for interesting, artistic items or useful services. We need your charitable contribution to make this a fun and successful event!

Please contribute a piece of art, jewelry, a weekend at your beach or ski house. Be creative or team up to provide a wonderful basket of goodies! Also, consider contacting a friend in business who might have something worthwhile to donate. Last year, someone donated a Satellite TV service for one year. Salon and massage services and restaurant gift cards also are all outstanding auction items.

Please help us make the Silent Auction a success. If you would like to serve on the Silent Auction committee, your help is most welcome.

Your contributions are vital to our success. Thanks in advance!

For donation forms, please email
lklempner@verizon.net, or
nuhferec@upmc.edu

Best regards,

Linda Klempner, Silent Auction Chair



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MedEDPPD Survey

MedEDPPD is conducting a survey on depression treatment decisions of women of 18-44 years of age, and who are either pregnant or have recently given birth. The survey is anonymous and participation is voluntary.

Dr. Sapana Patel (who works with Dr. Katherine Wisner on this project!) is the principal investigator of the study and will answer any questions about the study or participation.

Take the survey here:

<http://www.surveymonkey.com/s/BL5CX CZ>

A Selection of PSI Silent Auction Items



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Transdermal Estradiol for Postpartum Depression

Women's Behavioral HealthCARE Research

From our postpartum depression screening study at Magee-Womens Hospital in Pittsburgh, PA, we know that 14.6% of women who deliver have questionnaire responses suggestive of postpartum depression at 4-6 weeks after birth. Our new study, **Transdermal Estradiol for Postpartum Depression**, supported by the National Institute of Mental Health can address this treatment need.

This is a study of estradiol skin patch treatment for postpartum depression. We will compare women's treatment responses to estradiol, sertraline (Zoloft) and placebo. It is important to note that placebo treatment for depression results in improvement in about 30% or more of women, probably due to education, support and expert monitoring. For mothers who improve with treatment over 8 weeks, we will continue treatment through 6 months postpartum. We will also evaluate infant development at 6 months.

What are the benefits of participation? All enrolled women receive an expert psychiatric assessment, consultation with treatment recommendations, and a review of mental health care options whether they decide to participate in the study or not. These services are provided free of charge by an internationally recognized team of perinatal psychiatry specialists (Drs. Wisner, Famy and Sit). We also provide breastfeeding information, childcare for appointments, an honorarium for attendance at our clinical program, study medication without cost, and the hope of making treatments better for postpartum women of the future.

You are appropriate for this study if you are:

- Ages 18-45
- No more than 12 weeks postpartum
- Breastfeeding or Bottlefeeding
- Medically healthy
- Not on an antidepressant currently, unless it is ineffective
- Smoke < 1/2 pack cigarettes per day or are willing to cut down or quit



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Pregnancy-related discontinuation of antidepressants and depression care visits among Medicaid recipients

A recent study by Ian M. Bennett, Steven C. Marcus, Steven C. Palmer, and James C. Coyne found that when reviewing a sample of over 3,000 women from all 50 states who gave birth in 1999-2000 pregnancy was associated with discontinuation of any depression care among women receiving Medicaid. Additionally, depression care in these women did not resume in the postpartum period. Results revealed that prepregnancy antidepressant use rate was 66% which dropped to 27% during pregnancy. Depression care visits in the prepregnancy period also dropped to just 31% in the pregnant cohort.

Race-ethnicity findings indicated that white women had a greater reduction in depression care visits in the pregnancy cohort, but less reduction in antidepressant use in the postpartum period. Medicaid cash benefit status was associated with less discontinuation of depression care visits in the postpartum period. The authors concluded that pregnancy is associated with the reduction of depression care among women receiving Medicaid that was found to last on average for at least four months postpartum. Further efforts are warranted to overcome these reductions in care as maternal depression is associated with poor maternal/infant outcomes.

Bennett, I. M., Marcus, S. C., Palmer, S. C., Coyne, J. C. (2010) Pregnancy-related discontinuation of antidepressants and depression care visits among Medicaid recipients. *Psychiatric Services*, 61(4), 386-391.

SSRI Treatment during pregnancy: Are we asking the right questions?

What is the prevalence of depression and antidepressant use during pregnancy?

- Prevalence of MDD 3.1-4.9% during pregnancy
- Approximately 2.3% of 4 million infants exposed to SSRI during fetal life
- Although prevalence of depression during pregnancy is high, women are usually neither identified nor treated

What are the risks of depressive disorder during pregnancy?



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- Gestational depression increases risk for preterm birth, sudden infant death syndrome, lower birth weight, and developmental delays.
- Postpartum depression indicates a range of adverse cognitive and emotional outcomes, particularly in male children

What are the treatments for gestational depression?

- Women who discontinue their antidepressant treatment proximal to conception show a 68% recurrence rate for MDD
- Treatment data are emerging for the effectiveness of novel treatments including fish oil and bright light therapy.

What are the outcome data for SSRI use during pregnancy?

- Two landmark large-scale case-controlled studies demonstrated that overall SSRI exposure as not associated with congenital heart or the majority of other categories of birth defects.
- Neonates exposed to SSRI in late pregnancy are three times more at risk for transient neonatal syndrome that resolves 2 weeks post-birth.
- Few or no differences in scores on the Bayley Scales of Infant Development have been observed in studies comparing SSRI and non-SSRI exposed babies.

How can we improve our treatment of depressed pregnant women?

- Minimum effective dose of pharmacological treatments should be used.
- Mental health should be emphasized in pregnant and postpartum women, screening and management for depression are of crucial importance.

Wisner, K. L. (2010). SSRI treatment during pregnancy: Are we asking the right questions? *Depression and Anxiety*, 27, 695-698.



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Sponsors of the 2010 Marcé Conference – Thank you!!!

UPMC Health Plan (Diane Holder, CEO)

UPMC Health Plan is owned by UPMC, one of the nation's top-ranked health systems. As part of an integrated health care delivery system, UPMC Health Plan partners with UPMC and community network providers to improve clinical outcomes as well as the health of the greater community. (www.upmc.edu)

Fine Foundation

The Fine Foundation is the creation of longtime hotel investor Milton Fine and his wife Sheila, who have been good friend of our Women's Behavioral HealthCARE staff!

Staunton Farm Foundation

The Staunton Farm Foundation is a family foundation established in 1937 in accordance with the wishes of Matilda Staunton Craig, who wanted her estate to be used to benefit people with mental illness. The Foundation is dedicated to improving the lives of people who live with mental illness and/or substance use disorders. The Foundation works to enhance behavioral health treatment and support by advancing best practices through grant making to non-profit organizations in ten southwestern Pennsylvania counties. (<http://www.stauntonfarm.org/>)

Heinz Foundation

The H. J. Heinz Company Foundation was established in 1951 to make contributions to further the public welfare. Funded each year by the H. J. Heinz Company, the H. J. Heinz Company Foundation is committed to promoting the health and nutritional needs of children and families. Priority is given to programs in communities where Heinz operates with a special focus given to southwestern Pennsylvania. The Foundation proactively donates funds to develop and strengthen organizations that are dedicated to nutrition and nutritional education, youth services and education, diversity, healthy children and families, and quality of life. (www.heinz.org/)

NIH Conference Grant, awarded by NIMH

NIH's mission is to seek fundamental knowledge about the nature and behavior of living systems and the application of that knowledge to enhance health, lengthen life, and reduce the burdens of illness and disability. (www.nih.gov/)



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The Pittsburgh Training Program for Perinatal Depression Screening

With great pleasure we are announcing the availability of a new educational activity on MedEdPPD.org, [The Pittsburgh Training Program for Perinatal Depression Screening](#). This activity, adapted from a live, full day, interactive training program conducted in partnership with MedEdPPD on June 4, 2010 by Dr. Katherine Wisner at Women's Behavioral HealthCARE, Pittsburgh, PA., includes 6 training sessions based on a comprehensive depression management model developed by Dr. Laura Miller, Director of Women's Mental Health Department of Psychiatry, Brigham and Women's/Faulkner Hospitals, Harvard University. Each interactive steps of the model are presented and discussed by a panel of faculty consultants and recognized leaders in the field. This educational activity, both the original live event and this web-based adaptation, has been made available through the generous support provided by the [Staunton Farm Foundation](#). Topics include:

- Perinatal Depression: Detection and Screening
- Screening for and Diagnosis of Perinatal Disorders
- Overcoming Barriers to Treatment Engagement for Low Income Populations
- Iterative Steps in a Comprehensive Program Model: Program & Treatment Overviews
- Symptom Improvement; Improved Outcomes for Perinatal Depression.

Are you friends with the Marcé Society?

With 78 friends and counting, the **Marcé Society** now has another way to communicate with members, potential members, and the lay public. The Society hopes to utilize the site to generate discussions, ask questions, share events, and post hot topics, updates and articles relevant to the membership. We encourage you to join [Facebook](#) and "friend" the society. With Facebook, we hope to grow the awareness of our mission, increase knowledge and share resources with our worldwide audience.

[Click here to go to the Marcé Society page.](#)

If you have any questions, please email us at info@marcesociety.com. Thank you!



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Marcé Society Election Results

Dear Marcé Society Members:

Thank you for your responses to the recent Marcé Society slate of officers put forth to the membership for approval. We are pleased to let you know that the slate was approved. Beginning their term at the October meeting in Pittsburgh, your Executive Committee will be as follows:

President-Elect: Jane Hanley (term 2010-2012)

Secretary: Jane Hanley will continue her role as Secretary (term: 2008-2012)

Treasurer: Vivette Glover will continue her role as Treasurer (term: 2008-2012).

Information Editor: Cindi Logsdon (term 2010-2014).

Executive Committee Members (term 2010-2012): Angela Bowen, Alison Hipwell, Ian Jones, Martin Kammerer, Gillian Wainscott, and Linda Chaudron.

Continuing their term through 2012: Caroline Zanetti, Jane Honikman, Anne-Laure Sutter, Oguz Omay, Mike O'Hara and Jane Fisher.

As approved in a previous vote:

President (term 2010-2012)

Nine Glangeaud

Past-President (term 2010-2012)

Katherine Wisner

The Executive Committee looks forward to serving you for the next two years, as we anticipate membership growth, increased opportunities for collaboration within the society, and exceptional communication among members and partners in the field. Please stay in touch and visit the website at: <http://www.marcesociety.com/> and our Facebook page at: <http://www.facebook.com/pages/The-International-Marce-Society/123364077694228?v=wall>.

Sincerely,

Katherine L. Wisner, M.D., M.S.

Director, Women's Behavioral HealthCARE

Professor of Psychiatry, Obstetrics and Gynecology and

Reproductive Sciences, Epidemiology and Women's Studies

Investigator, Women's Research Institute

President, Marcé Society



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