
EFFECTS OF PRENATAL EXPOSURE TO PSYCHOTROPIC MEDICATION ON NEONATAL OUTCOMES: THE ROLE OF THE PSYCHIATRIC - OBSTETRIC LIAISON CONSULTATION

V. Martins¹, S. Pimenta¹, I. Murta¹, M. Pitorra²

¹Serviço de Psiquiatria, Centro Hospitalar Universitário de Coimbra, Coimbra, Portugal ; ²Maternidade Bissaya Barreto, Centro Hospitalar Universitário de Coimbra, Coimbra, Portugal

Introduction: Pregnancy and postpartum are periods of increased vulnerability for psychiatric disorders, such as mood disorders, anxiety and psychotic disorders, that, when left untreated, imply serious consequences for the pregnant and the fetus. Since 1995, the Psychiatric Liaison Consultation in Bissaya Barreto Maternity (MBB) is part of the Early Intervention Unit (UIP), which consists of a multidisciplinary team that ensures a specific intervention in pregnant and postpartum women with psychiatric illness.

Methods: The authors conducted a case-control study to compare neonatal outcomes among pregnant women exposed to psychotropic drugs (antidepressants, antipsychotics, mood stabilizers and benzodiazepines), observed at the Psychiatry - Obstetric Consultation (n=100), with those of women followed at the Obstetric Consultation, without psychopathology during pregnancy, who were not exposed to psychiatric medication (n=93). The study was performed during a period of one year (October 2011 – October 2012)

Results: The results were analyzed using the Statistical Package for the Social Sciences - SPSS (19th version).

Discussion/Conclusions: Antidepressants and benzodiazepines were the most prescribed drugs during pregnancy. Concerning neonatal complications, there were no statistical differences between groups, in terms of gestational age at delivery, birth weight and APGAR score. Obstetrical and neonatal outcomes in the group exposed to psychiatric medication are as good as in the control group, supporting that the use of psychotropic drugs during pregnancy is safe to the mother and the baby, as long as used with caution. Early psychiatric intervention during pregnancy, in conjunction with obstetrics, is the gold standard to follow up pregnant women with mental illness.