



# IDENTIFYING WOMEN AT-RISK OF POSTPARTUM DEPRESSION WITHIN 6-8 WEEKS POSTPARTUM: AN OPPORTUNITY FOR PREVENTING DISEASE AND PROMOTING PATIENTS' WELLBEING

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# INTRODUCTION

Postpartum depression is a complex public health problem, with high prevalence rates globally, especially in lower-middle income countries such as Colombia. It is defined as a major depressive episode that may appear during pregnancy and puerperium, impacting not only mothers, but also children, and families` wellbeing. The present project aims to identify postpartum depression risk during the sixth to eighth week of the puerperium, with The Edinburgh Postnatal Depression Scale (EPDS), in women over 18 years old who received delivery care at Fundación Santa Fe de Bogotá.

## **METHODS**

- "Pregnancy & Childbirth" ICHOM standard set was used as a guide to measure postpartum depression as part of an integral risk identification protocol.
- A total of 2.253 mothers were recruited from August 2022 to September 2024 and screened for postpartum depression via e-mail or phone call between 6 and 8 weeks after delivery, using The Edinburgh Postnatal Depression Scale (EPDS).
- Participants with EPDS scores ≥10 were contacted by the head of nursing from Obstetrics and Gynecology (OB/GYN) service who redirected them to schedule an appointment with a psychologist or a psychiatrist, or suggested them to attend an emergency department, as appropriate.

3 **Administer Explain results Analyze results** Refer at-risk screening for improving patients value-based care Screen all women who Refer those women Give feedback of Analyze data collected the results to the had delivery care with scores of 10 or for for closing care between the 6th and higher to mental loops to enhance a patient. 8th postpartum health specialists for value-based patient

further evaluation

and support

experience

Figure 1. Postpartum depression risk identification protocol

### RESULTS

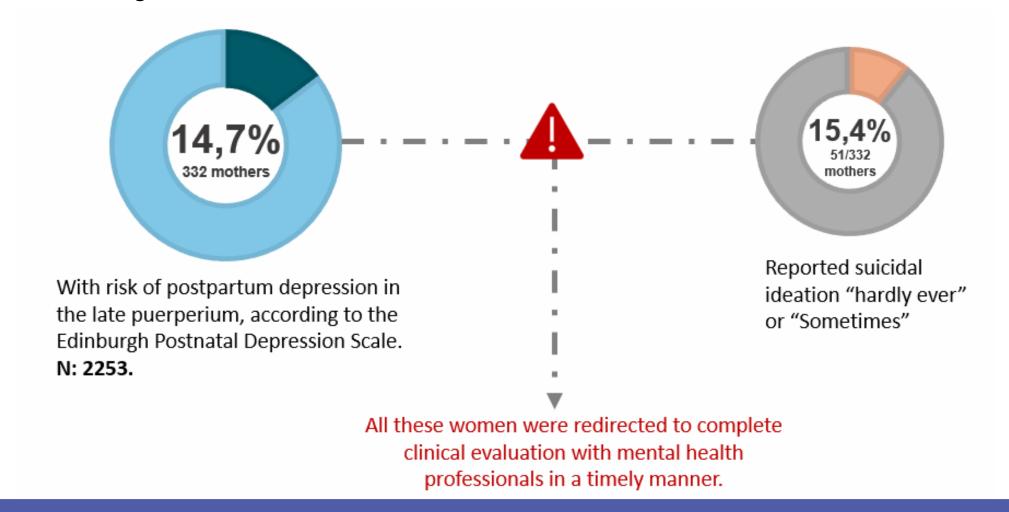
weeks, with Edinburgh

**Postnatal Depression** 

Scale

Of the total cohort of 2.253 women assessed with EPDS, 14.7% (N: 332) were identified at risk of postpartum depression in their puerperium, according to EPDS scores ≥ 10, and were thus redirected to complete clinical evaluation with mental health professionals in a timely manner. Out of these 332 women, 51 of them (15,4%) reported suicidal ideation "hardly ever" or "sometimes", and received guidance to assist an emergency psychiatric consult, for mitigating risk.

Figure 2. Postpartum depression risk – screening results. N: 2253



### CONCLUSIONS

Screening postpartum depression at Fundación Santa Fe de Bogota represents an integral protocol aligned to our organization's value-based health strategy. These findings provide a clear and predictive estimation of at-risk mothers and guide the development of clinical care protocols in the OB/GYN service, aligned not only with process or results indicators but also with what truly matters to patients. The subsequent challenge is to identify and assess effective approaches for mitigating the risk and preventing the consolidation of postpartum depression diagnosis after positive screening identification.







