

Implementation of formal mental health screening using iCOPE in a private obstetric group practice

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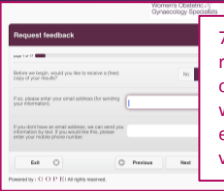
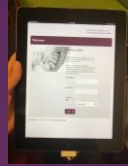
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1 in 7 women experience perinatal anxiety and/or depression, including those receiving private care. A formal mental health screening program was implemented in a private obstetric practice. It was used to identify women requiring mental health support and complies with the new MBS pregnancy management item numbers (16590, 16407).



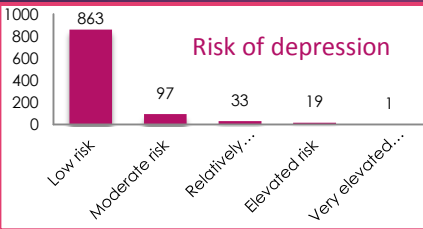
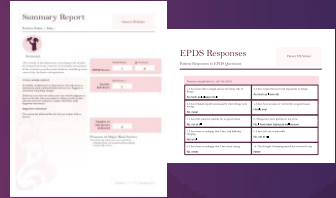
76% patients requested their own report which was emailed or sent via SMS

Methods

The iCOPE screening program was loaded onto dedicated iPads. All patients were asked to complete the screening at their second antenatal visit (generally between 14-16 weeks gestation) and at their 6 week postnatal visit. The generated reports were then reviewed by our practice midwives and filed into the patient's history. If the patient screened positively, the principal obstetrician was notified directly.

Results

Over the initial 8 months (1.11.17-10.8.2018), 1013 screens were completed- 664 antenatal, 349 postnatal. The average screening time was 4.3mins. 15% had a moderate to high risk of depression. 39% had symptoms of anxiety.



Had been anxious or worried for no good reason		
No	617	61%
Yes, at least sometimes	387	39%
Had felt scared or panicky for no good reason		
No	831	82%
Yes, at least sometimes	182	18%

Patients were offered the opportunity to sign up for regular emails to support them emotionally through their pregnancy. 55% requested this service.

Case Study
 33yo G1P0
 Past History:
 - Hypothyroidism
 - Depression, anxiety, bulimia (Previously on escitalopram, No current treatment/pyschiatrist)
 Uncomplicated pregnancy
 Did not want to engage in conversation about mental health but completed iCOPE screening at 15/40:
 - Moderate risk of depression – EPDS 7
 - High risk of anxiety with anxiety sub score 5
 Appeared anxious during appointment with a flattened affect, used iCOPE result to engage conversation. Declined further care as had previously had difficulty building rapport with psychiatrist. Called rooms the following day asking for a referral. First psychiatric appointment at 20 weeks gestation - Diagnosed with moderate depression and anxiety and commenced on sertraline 25mg daily. Well throughout remainder of pregnancy and initial postnatal period.

Conclusion

iCOPE has been successfully implemented into this private practice and has allowed identification of patients most at risk of perinatal anxiety and depression. It is quick to complete and accurately assesses patients to identify those at risk, prompting discussion and arrange appropriate referrals where necessary

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