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Suicidal ideation in pregnancy; A case of preterm induction of labour for psychosocial reasons

R van der Walt, Redlands Hospital QLD

Background

Psychosocial health problems are among the leading causes of maternal mortality in Australia. A literature review identified no cases of preterm induction of labour for mental health reasons before 33 weeks gestation.

Case

A 23-year-old multigravida woman with a history of mental health issues suffered a relapse of her panic disorder and major depressive disorder during her pregnancy. She was reviewed by two psychiatry teams and the obstetric team and due to significant suicidal ideation was deemed unsafe to continue her pregnancy beyond 33+2 weeks gestation. Steroids were administered prior to an induction of labour, followed by an uncomplicated SVD of a 2.3kg male infant. After 2 weeks in SCN the baby was discharged home. At 8 weeks follow up mother reported ongoing thoughts of self-harm being followed up with appropriate mental health support.

Discussion

Although induction of labour for psychosocial reasons is not uncommon, induction as early as 33 weeks gestation is not without risk. This case highlights the importance of regular mental health review as part of an optimal antenatal care model and ensuring adequate support is provided where concerns are raised.

The benefits of working closely with psychiatry as part of a multidisciplinary approach are clearly demonstrated. Given the real threat that psychosocial factors pose to maternal wellbeing it is important to not dismiss mental health concerns in pregnancy. Obstetric management of women with mental health conditions is complex, and psychiatric factors along with other maternal and/or foetal factors must be carefully considered to ensure optimal outcomes for both mother and infant.



The Royal Australian and New Zealand College of Obstetricians and Gynaecologists Excellence in Women's Health