

Oral Defense Announcement

University of Missouri – St. Louis Graduate School

An oral examination in defense of the dissertation for the degree
Doctor of Nursing Practice with an emphasis in Women's Health Nurse Practitioner

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B.S. in Nursing, May 1997, Illinois Wesleyan University

Implementation of Postnatal Depression Screening: A Pilot Study

Date: July 9, 2024
Time: 11:30 a.m. to 12:00 p.m.
Place: Seton Hall

Abstract

Background: Postpartum depression (PPD) is a prevalent problem among women during their childbearing years, affecting approximately 1 in 7 women. Alarming, about 50% of PPD cases go undiagnosed and untreated, contributing to poor maternal outcomes, including suicide, which is a leading cause of maternal mortality in the United States.

Issue: Despite its prevalence and severe consequences, PPD often goes unrecognized due to inconsistent screening practices. Current guidelines vary by organization and lack consistent, evidence-based criteria.

Objective: This pilot program aimed to implement universal PPD screening with a validated tool at the six-week postpartum follow-up visit. The goal was to enhance PPD identification rates, enable early intervention, and improve maternal outcomes.

Methods: The observational, descriptive pilot program utilized the plan-do-study-act model as a framework. The primary investigator (PI) employed a train-the-trainer method to familiarize the provider, a women's health nurse practitioner (WHNP), with administering and scoring the Edinburgh Postnatal Depression Screen (EPDS), project protocols, mental health safety plan, and local/national resources. The WHNP provided an updated list of active women's mental health providers for referral purposes. Screening took place during six-week postpartum visits when the WHNP was onsite.

Results: During implementation, 100% of six-week postpartum visits were screened using the EPDS. One positive screen led to immediate treatment and referral to a mental health provider. Clinic staff feedback was positive regarding access to updated resources. Participants voiced satisfaction with the opportunity to discuss PPD and learn about available resources.

Conclusion: Standardized screening with validated tools is imperative for early detection and intervention in PPD. This pilot facilitated the compilation of local and national health resources, enhancing the clinic's ability to individualize care. Future endeavors should include an onsite, comprehensive EPDS screening initiative to promote universal screening and optimize maternal outcomes.

Defense of Dissertation Committee

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