

PATERNAL POSTPARTUM DEPRESSION

Abstract

Background:

Postpartum paternal depression (PPPD) is an under-acknowledged problem worldwide, compared to maternal depression; however, the prevalence of PPPD is known to be as high as depression in mothers. Although PPPD has clear health consequences on fathers as well as other family members, preventive methods have been under-studied. Our study aimed to investigate the effectiveness of an educational intervention to prevent PPPD.

Methods:

We performed a parallel-group, randomized controlled trial in an obstetric clinic in Japan that included expecting fathers and their pregnant partners at 28-32 weeks gestation. The intervention comprised of distributing an educational booklet created for fathers during pregnancy and after childbirth. As the primary outcome, Edinburg Postnatal Depression Scale (EPDS) was measured at 1 month and 3 month post-delivery, and EPDS of 8 or greater was considered presence of depressive symptoms among fathers.

Results:

The participants were 286 couples for the intervention group and 282 couples for the control group. The prevalence of fathers with EPDS ≥ 8 was 7.2 % for the intervention group and 9.8 % for the control group ($p=0.40$). Logistic regression in an adjusted analysis showed a reduced risk

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of PPPD (odds ratio=0.61, 95% confidence interval=0.31-1.20), but was not statistically significant.

Conclusions:

Our study was the first randomized controlled trial in Japan to evaluate an interventional approach for PPPD prevention. The results of our study suggest that distributing the educational booklet to fathers may have potential to reduce depressive occurrences; however, more intensive approaches may be needed for effective prevention.