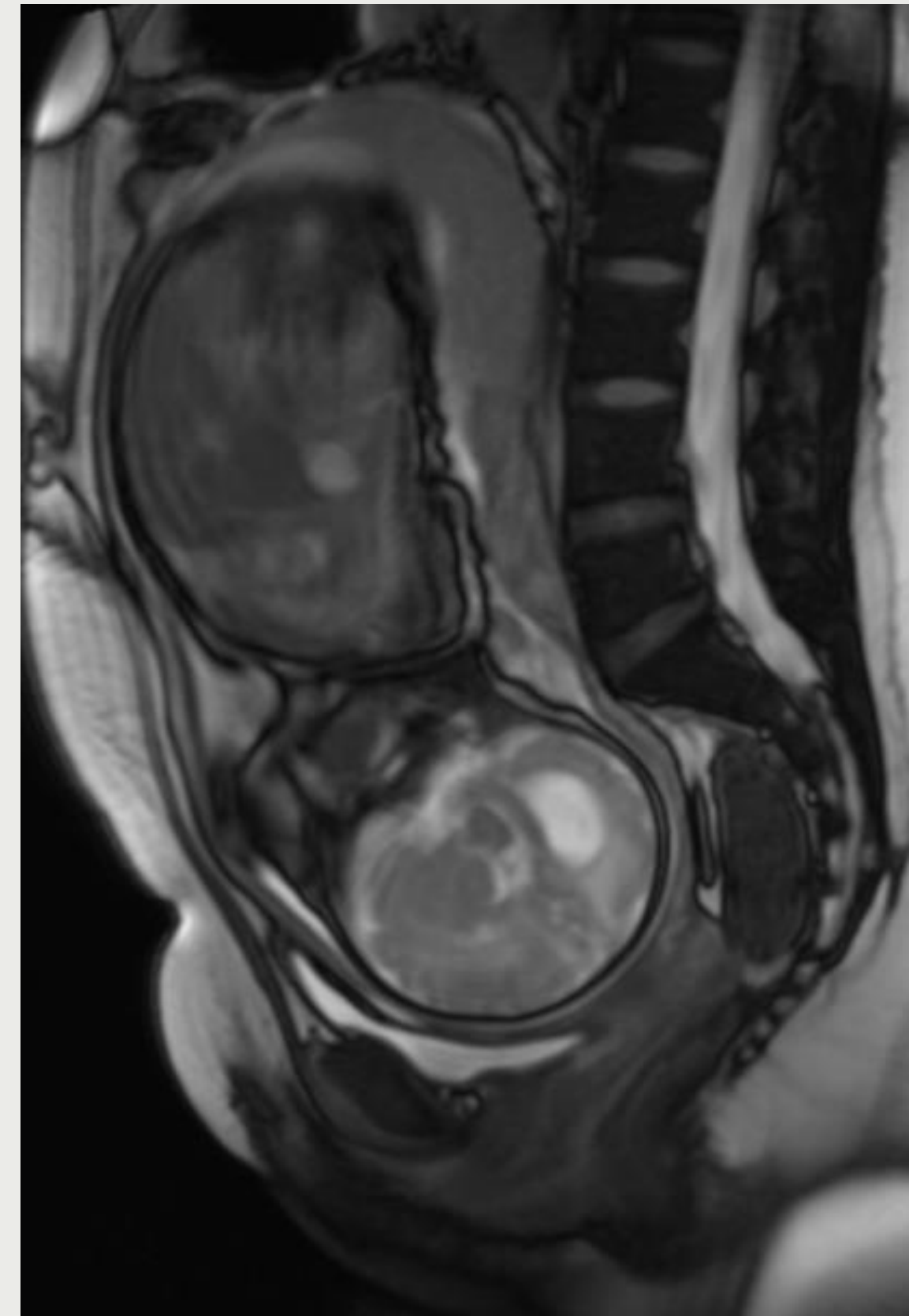


The psychosocial aspects of receiving a prenatal diagnosis of a congenital anomaly

Pieta Shakes

MHN, PhD Candidate, MN(Mental health),
PGC C&A Mental Health, BN(Hons)





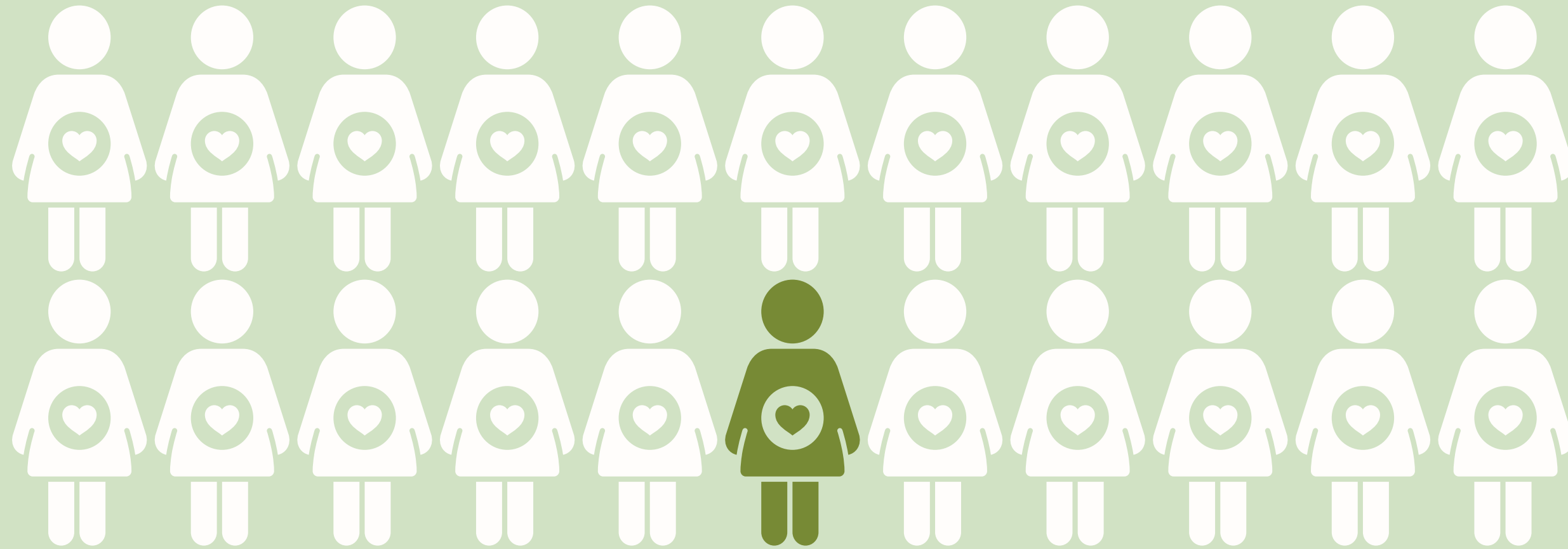
through the
unexpected

www.throughtheunexpected.org.au

mhpn



Prenatal Diagnosis & Mental Health
Online Network



1 in 22 babies have a major congenital anomaly

(Consultative Council on Obstetric and Paediatric Mortality and Morbidity, 2019)



Carrier screening

First trimester screen

Nuchal translucency scan

Non-invasive prenatal testing (NIPT)

Morphology scan

more parents

more information

more unknowns

distress

shock

disassociation





haze

unclear

overwhelm

shutdown



changes to
sleep, diet, mood, concentration

- Traumatic event for 88% of mothers and 83% of fathers (Aite et al., 2003)
- Suicidal ideation significantly more prevalent (Kaasen et al., 2017)
- 39% of mothers met full diagnostic criteria for PTSD Rychick et al., 2013), and 60% experienced ongoing symptoms (Horsch et al., 2013)
- Prenatal diagnosis reported significantly increased psychological distress compared to parents who received a postnatal diagnosis (Skari et al., 2006)
- A 'high chance' screening result impacts long-term mental health even when the baby does not have an anomaly (Kristjandottir et al., 2014)

ending their pregnancy

continuing their pregnancy

perinatal palliative care



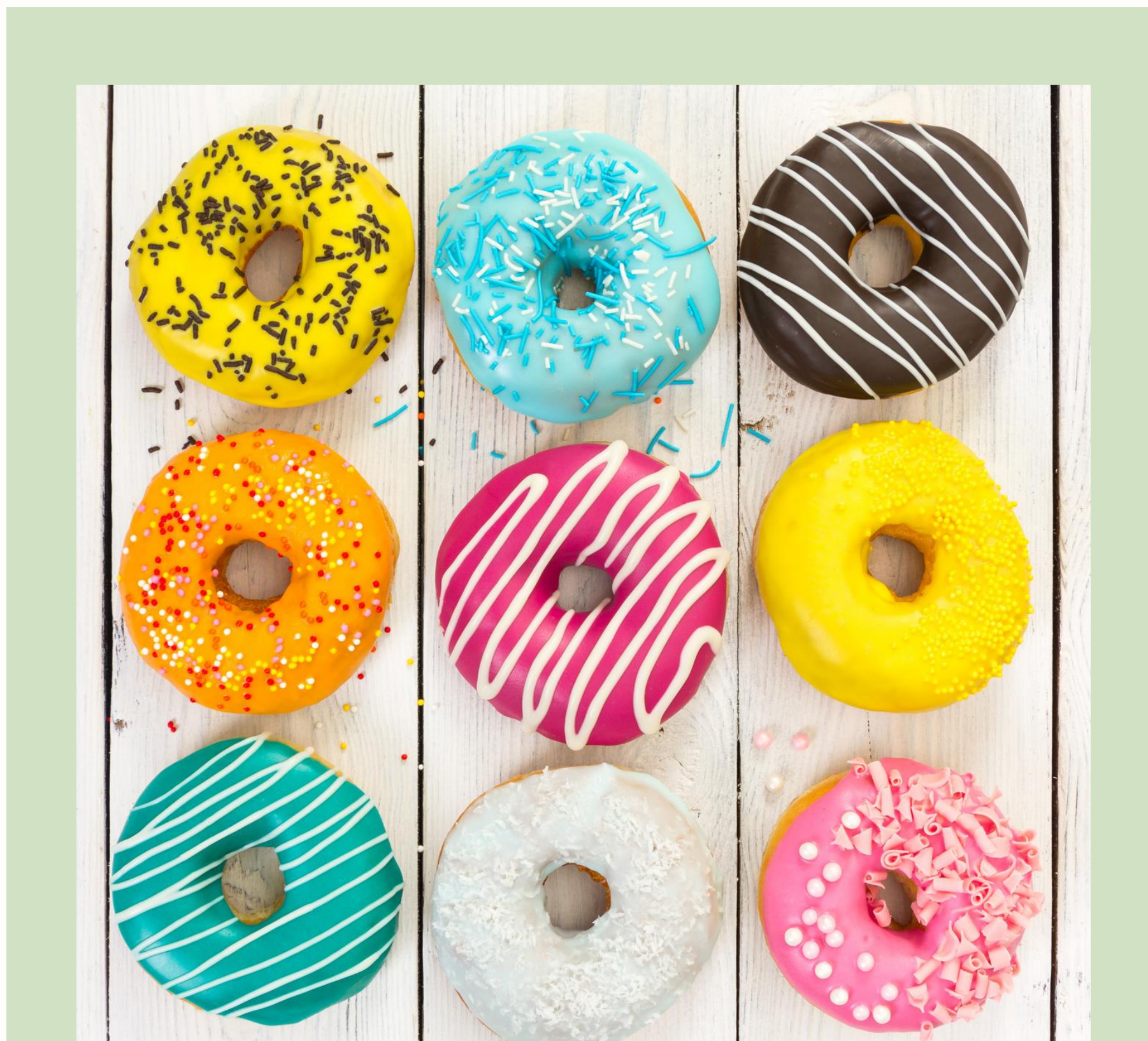


A lack of
guidelines, training
and support



How do we work with parents who have received a prenatal diagnosis?

Empathise with distress,
not the diagnosis



Be mindful of words



Empower them

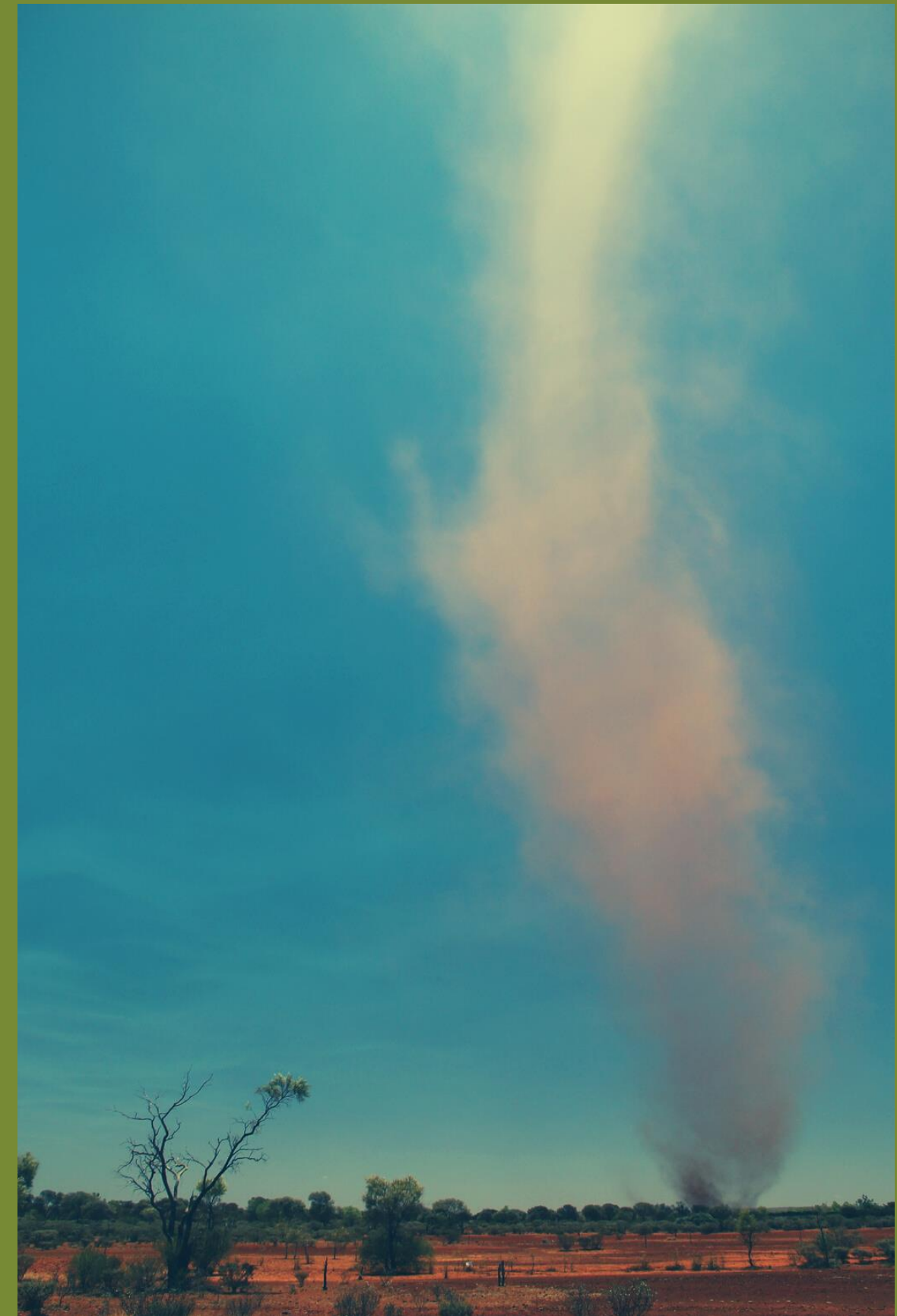


Signpost support and information

Bring back pregnancy



Normalise the whirlwind
of emotions





Be their advocate

Don't be afraid of hope





Care for you

It's hard because they don't just cry, they sob, their grief is so profound. I think that lies with you. I do feel the trauma of a lot of the families. (Beth, allied health practitioner)

(Menezes et al., 2015)