



Theme 2: Women's Mental Health research in clinical settings

What do we mean with “depression”? The conceptualization of depression in perinatal psychiatric research

The use of the term “depression” in perinatal psychiatric research is inconsistent and ambiguous. Awareness about its use and misuse has crucial implications for the quality and generalizability of studies and results.

The overlap of mental and physical symptoms in pregnant women complicates the identification and diagnostics of perinatal mental disorders. This has led to the development of the Edinburgh Postnatal Depression Scale as a screening instrument. The EPDS identifies pregnant women with depressive and anxiety symptoms at risk of perinatal depression, but it lacks capability to measure depression severity and to diagnose depression. It is though not uncommon,

that positive screening results are referred to as “depression”. It is thus necessary to include diagnostic instruments to verify the presence of a depressive episode and severity instruments to measure change. A depressive episode is though neither “a depression” before differential diagnoses and comorbidities have been evaluated. The diagnostic terminology becomes further complicated by the presence of psychotic symptoms, complicating e.g. register based research on postpartum depression. Furthermore, many studies exclude patients with any kind of suicidal symptoms, even though suicidal thoughts are part of the diagnosis of depression, affecting generalizability. The aim of my talk is to describe the concept of psychiatric diagnostic terminology in the perinatal setting. Based on an ongoing treatment study for antenatal depression I will address methods for diagnosing and assessing treatment change, common co-morbidities and exemplify how patients with suicidal symptoms can be included into treatment studies.



Marie Bendix, *Karolinska Institutet, Sweden*. MD, PhD, Researcher and consultant psychiatrist. Her clinical work and research centers on perinatal mental health, with a particular emphasis on affective disorders. Her current research focuses on internet CBT treatment of antenatal depression and its implementation into regular healthcare. She also participates in perinatal pharmacoepidemiologic research. She works as a perinatal psychiatrist and is involved in the dissemination of clinical best practices and evidence-based interventions in the Swedish health care system.



Advancing Women's Mental Health Research Across Disciplines

WOMHER International Graduate Conference 2024

Theme 2: Women's Mental Health research in clinical settings

ADHD in Females: Addressing Gender-Specific Challenges with Precision Health

ADHD in females remains underdiagnosed and inadequately addressed due to societal gender biases, delayed referrals, and a lack of tailored interventions that account for biological differences. Girls and women with ADHD face significant risks, due to delayed diagnoses, including adverse effects from contraceptives, teenage pregnancies, postpartum depression, and mental and physical comorbidities. These challenges are exacerbated by predictable hormonal changes across the female lifespan, yet research on their specific impact remains scarce. Despite consuming substantial healthcare resources and pharmacological treatment, females with ADHD often feel misunderstood and unsupported by health professionals, who report limited knowledge on managing female-specific ADHD challenges.

Our transprofessional research emphasizes the urgent need for a precision health approach that takes into account the effects of sex hormones on ADHD symptoms and treatment. This includes understanding how hormone fluctuations during puberty, pregnancy, postpartum, and perimenopause exacerbate psychiatric symptoms and affect ADHD medication efficacy. We advocate for comprehensive, interdisciplinary efforts to improve diagnosis, treatment, and support for females with ADHD.

During this talk, you will hear about the co-creative research process supporting the development of, Letterlife, the world's first digital self-care tool for women with ADHD. A tool built by, and for, women with ADHD with the aim of bridging the gap between limited healthcare resources and women's needs and expectations.

We find this novel approach to be a crucial societal investment to mitigate long-term adverse outcomes, improve shared decision-making in healthcare, and enhance overall quality of life for women across generations.



Charlotte Borg Skoglund, *Uppsala University, Sweden*. MD, PhD, Senior physician and specialist in general medicine and psychiatry. Founder of SMART Psychiatry and the research project Letterlife.

Photo: Eva Lindblad
