## Outline

#### The Clinical Profile of PMADs: (Perinatal Mood and Anxiety Disorders):

What causes postpartum mental health disorders?

The "perinatal masquerade" and illusion of perfection in motherhood

Why "perinatal" is a multi-decade stage in life What makes mood disorders during this period

Breaking through guilt, shame and silence Limitations of the research and potential risks

#### **PMAD Screening and Assessment**

Are you asking the right questions? Red flags: What to look/listen for each time you

Evidence-based assessment tools Differential diagnosis: The PMAD spectrum

Depression, Anxiety, OCD, PTSD, psychosis The Postpartum Stress Center PMAD Response

How to respond if she discloses thoughts of harm to herself or the baby

Where and how to refer to a specialist/higher level of care

#### **Clinical Interventions for Mothers** Who are Symptomatic, Exhausted, and Preoccupied

How treatment differs for this population Create a safe "holding environment" Help her break through guilt, shame and silence Navigating scary intrusive thoughts Practical interventions for busy new moms The perinatal family: Identify and engage necessary supports in treatment

Tools for healing the perinatal intimate partnership

Psychotropic medications: Safe for pregnant or nursing mothers?

Collaborative care with other providers

**Videos:** Beyond the Fear & Voices of Recovery **Exercises:** Token assessment and case examples

## The Nuanced Experience of the Perinatal

Managing countertransference Ethical decision making: Breaking the rules and self-disclosure

Collaboration and collegial support

#### **Special Considerations**

Feeding issues: Breastfeeding and/or bottle Infertility/Assisted reproductive technologies

Perinatal grief and loss

When PMADs are left untreated or present later in motherhood

Multicultural factors

# FREE Materials for Your **Clinical Toolbox!**

- Evidence-based PMAD assessments
- Tokens assessment
- Referral resources

- Postpartum pact

- ✓ And more!

# **Objectives**

- Recognize how and why mood disorders in the perinatal period are unique, nuanced and high-risk.
- Differentiate between "normal" perinatal experiences and clinically relevant symptoms.
- Design effective, efficient, and appropriate interventions utilizing screening tools, interview questions, and The PPSC's Voice of Depression Response Model.
- 4. Explain ways the family system is impacted by PMADs and how to address intergenerational issues between grandmother, mother and child.
- Articulate why therapist vulnerability and urgent client need render supervision and collegial collaboration especially important in this field of work.
- Discuss impact of special circumstances (breastfeeding, NICU, perinatal loss, adoption, depression in the partner) on therapeutic process and treatment planning.

#### Target Audience:

Social Workers • Counselors • Psychologists • Marriage and Family Therapists • Psychiatrists • Pediatricians Gynecologists • Nurses • Nurse Practitioners • Midwives and Doulas • Lactation Consultants Other professionals who work with perinatal women

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# **POSTPARTUM** DEPRESSION

# & Related Disorders

**Clinical Strategies to Identify and Treat Mothers Who Are Suffering in Silence** 

## TREVOSE, PA

Monday, December 9, 2019

## **LIVE VIDEO WEBCAST**

Tuesday, December 10, 2019

## **KING OF PRUSSIA, PA**

Tuesday, December 10, 2019

## MT. LAUREL, NJ

Wednesday, December 11, 2019

# Clinical Strategies to Identify and Treat **Mothers Who Are Suffering in Silence**

- Discern between "normal" perinatal experiences and clinically relevant symptoms
- Gain specific language and tools to immediately engage and intervene with this vulnerable, high-risk population

POSTPARTUM

DIFFIRESSION

& Related Disorders

- Differentiate diagnostically between the various Perinatal Mood and Anxiety Disorders (PMADs)
- Best practices for screening, assessment, and treatment with consideration to her pregnant or lactating state

### TREVOSE, PA

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## **Postpartum Depression & Related Disorders**

It's not a topic that comes up at play groups or over coffee. Instead, 1 in 7 new mothers prefer to suffer quietly, engulfed in shame and secrecy, afraid to dispel the ever-present myths about motherhood – "everything is perfect", "I love being a mother", and "this is the happiest time of my life".

She doesn't share the dark thoughts, intense anxiety, scary intrusive thoughts, checking excessively on the baby, feelings of inadequacy, grief over her former independence, thoughts of harming herself or the baby, and even delusions and hallucinations.

#### Perinatal Mood and Anxiety Disorders (PMADs) are real, pervasive, and life-threatening.

#### Are you missing the signs with the women you treat?

Attend this compelling one-day seminar and gain tools to intervene during a critical period that does not offer the luxury of time. Postpartum women are exceptionally vulnerable, as are their infants who are fully dependent on them. And given that suicide is the 2nd leading cause of maternal death, this seminar is a must-attend for any professional working with pregnant or postpartum women.

Sign up today!

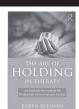
"Every postpartum woman is preoccupied, whether she is depressed or not...but if her symptoms of depression and anxiety are acute enough, if she is sick enough, if her thoughts are distorted enough, she needs help. And she needs help right away." – Karen Kleiman, The Art of Holding in Therapy: An Essential Intervention for Postpartum Depression and Anxiety

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#### The Art of Holding in Therapy

An Essential Intervention for Postpartum Depression and Anxiety

By Karen Kleiman, MSW, LCSW

Readers will learn how to contain high levels of agitation, fear, and panic in a way that cultivates trust and the early stages of connectedness. Also addressed through vignettes are personality types that make holding difficult, styles of ineffective holding, and how to modify holding techniques to accommodate the individual woman. A must-read for postpartum professionals, the techniques learned in this book will help clients achieve meaningful and enduring recovery.



#### **Dropping the Baby and Other Scary Thoughts**

Breaking the Cycle of Unwanted Thoughts in Motherhood

By Karen Kleiman, MSW, LCSW & Amy Wenzel, Ph.D.

What if I drop my baby when I go down the steps? What if I burn the baby in the bathtub?

Thoughts like these can be frightening to new mothers, but are a common symptom pregnant and postpartum women can experience. Dropping the Baby and Other Scary Thoughts addresses the nature of these intrusive, negative and unwanted thoughts. Kleiman and Wenzel offer answers to the women who seek information, clarification, and validation in this useful resource for healthcare professionals working



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## Speaker.

Clinical Strategies to Identify and Treat Mothers Who Are Suffering in Silence Hilary Waller, MS, LPC, is a psychotherapist who specializes in the treatment of perinatal mood and anxiety disorders. She is the director of education and programming at The Postpartum Stress Center outside of Philadelphia, which was founded by renowned perinatal expert Karen Kleiman and was listed in Philly Magazine as a "Center of Excellence" for Maternal/ Fetal Care in 2008. In addition to providing direct care services to individuals, couples and groups at the center, Hilary serves as an instructor with Karen Kleiman, providing a quarterly 12 CE hour post-graduate advanced training for clinicians across the US and abroad who want to specialize in treating the perinatal population. Hilary also conducts workshops and trainings for maternal mental healthcare providers as well as non-clinical staff working with the perinatal population. Hilary completed her master's degree in counseling psychology from Holy Family University in 2013. She is deeply honored to support new parents as they navigate the challenges pregnancy and parenthood present.

Speaker Disclosures:

Financial: Hilary Waller has an employment relationship with The Postpartum Stress Center. She receives a speaking honorarium from PESI, Inc. Non-financial: Hilary Waller is a member of the American Counseling Association; National Certified Counselor; and the Postpartum Support

#### **Live Seminar & Webcast**

**Schedule** (Times listed in Eastern)

7:30 Registration/Morning Coffee & Tea

8:00 Program begins

**11:50-1:00** Lunch (on your own)

**4:00** Program ends

There will be two 15-min breaks (mid-morning & mid-afternoon) Actual lunch and break start times are at the discretion of the speaker. A more detailed schedule is available upon request.

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Lactation Consultants: CERPs applied for from IRI CE Contact PESI's Customer Service Departmen for the most current information. PLEASE BRING YOUR IBLCE NUMBER WITH YOU TO THE PROGRAM Midwives: ACNM specialty credit has been applied for.

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