



## LETTERS

## DEPRESSION IN PREGNANCY

# Paucity of data on the safety of drugs for treating depression in pregnancy

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The otherwise excellent review of depression in pregnancy deserves comment regarding the "What you need to know" box.<sup>1</sup>

Who will "Offer all women education about mental health problems in pregnancy, treatment options, and the effect on themselves and their offspring"? Drug safety is a major problem because children and pregnant women are vulnerable populations. Data to ascertain the benefit:harm ratio or guide dosing are mostly lacking. Similar to epilepsy, when data are available they are often overlooked by prescribers.<sup>2</sup> Patient information leaflets must be improved and disseminated early by clinicians, who should be better trained and assessed with regard to drug safety.

Secondly, "Offer women with mild or moderate depression psychological treatments if they have access to them and can commit time to therapy." Cognitive behavioural therapy (CBT) and antidepressants are similarly effective against major depression but CBT has fewer adverse effects.<sup>3</sup> Thus, CBT should be the first line treatment in major depression and not restricted to mild or moderate cases. It is difficult to justify limited access (although this happens in France through lack of reimbursement by the costly mandatory healthcare scheme of treatment by clinical psychologists). By analogy, we would not usually recommend an operation simply because a patient has difficulty committing time to more effective re-education.

Thirdly, "For pregnant women who have not used antidepressants, any SSRI [selective serotonin reuptake

inhibitor] (with the exception of paroxetine) is a reasonable first choice." This is incorrect. Fluoxetine also increases the risk of cardiac anomalies.<sup>4</sup> Last, but not least, these drugs should not be the first option when prescribing to any woman of childbearing age because teratogenicity can occur before women are aware they are pregnant.

To be able to offer all women the right information to make a shared decision on their treatment for depression, well designed research is urgently needed, including research on congenital anomalies, autism spectrum, and attention deficit disorders in the child.<sup>5</sup>

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