



Presidenza del Consiglio dei Ministri

NATIONAL BIOETHICS COMMITTEE

ASSISTANCE TO PREGNANT WOMEN AND POST-PARTUM DEPRESSION

(16th December 2005)

abstract

The opinion deals with the complex question of post-partum depression within the context of a heated debate involving two different lines of reasoning: one directed to interpretation of the issue of assistance to pregnant women exclusively in terms of the risk of post-partum depression and the other directed to an in-depth analysis of the complete issue, also acting as prevention of abortion (in accordance with the explicit provisions of art. 5 of Law 194/1978). The NBC believes that a unitary approach is essential to the numerous profiles that the forms of assistance can assume, for the woman, in relation to the sequence pregnancy-childbirth-*puerperium*; the aim is to encourage thought on the overall profound significance of such a (characteristically unique) condition on a woman's life in order to contribute to her protection from possible traumatic consequences.

The woman's body is involved at all levels in the experience of pregnancy: biological, physical and physiological, psychological and psychodynamical, as well as on a relational and spiritual level. Assistance to pregnant women, during childbirth and *puerperium*, is a priority commitment. If this assumption is generally valid in apparently normal situations, it becomes even more important for cases in which there is a particular fragility that exposes to the risk of psychiatric illness.

The requirements for "good assistance" to pregnant women, with the objective to reduce risk factors or prevent their worsening through timely intervention, are specified by the NBC as follows:

- the people with various skills who participate in the assistance of women in the experience of such fundamental situations, must have specific qualifications, continuously improve through comparison with others working in the same sector, keep up-to-date in their respective subject, have a valid grounding in health policy;
- it is necessary to create the basis for a good relationship between those looking after the woman, the woman herself and the father of the unborn child: the relationship should go beyond "good clinical practice" and foresees the ability to listen, and to detect mood and recognise situations at risk by means of a discerning sensibility;
 - a continuative and correct prenatal assistance is hoped for, preferably with the same medical team or at least with a homogeneous medical team;
 - a psychiatric consultation is hoped for, when there is the perception that the woman needs a better understanding of the clinical situation;
 - the members of the family should be made aware of the situation, the father in particular, should be reminded of his responsibilities and moral and juridical obligations as well as the importance of his participation in both the period of gestation and post-partum.

The culture of childbirth, given its profound bioethical and social value, should pervade the whole of society and consequently the public health service. Post-partum depression represents an important aspect of the many difficulties which "coming into the world" puts forward and it underlines how the only way to deal with them is collectively, that is to say by focusing on the value of the human being, related to each component of the family.