- 1947 Family and Partner Psychopathology and the Risk of Postpartum Mental Disorders.
- 1954 Treatment of Premenstrual Worsening of Depression With Adjunctive Oral Contraceptive Pills: A Preliminary Report.

## Screening and Treatment for Women With Mood Disorders Associated With Reproductive Events

ederal legislation is currently under consideration in the United States to make screening for postpartum mood disorders mandatory and increase funding for research and treatment of postpartum women with mental illness. The passage of this legislation would represent an excellent investment in the health of women and families. Its implementation would also introduce important health care delivery challenges, such as the development of large screening programs and allocation of resources. Research and treatment resources will need to be directed for maximum impact, and data such as those presented by Munk-Olsen et al. will be needed to help identify risk factors for postpartum mood disorders. In their article, Munk-Olsen and colleagues demonstrate that, compared with the general population, first-time mothers have an increased risk of presenting for inpatient and outpatient psychiatric treatment after childbirth, and this risk is greatly increased if the mother or partner has a family history of psychiatric disorders.

Also in this issue, Joffe et al. investigate a poorly understood area of women's mental health: the impact of oral contraceptive pills on premenstrual mood symptoms. The investigators conducted a study in which women who were otherwise successfully treated with antidepressants continued to have premenstrual symptoms. All women received ethinyl estradiol plus drospirenone for 21 days of the cycle, followed by either ethinyl estradiol or placebo for days 22 through 28 of the menstrual cycle. Both groups improved significantly on depression measures in this 2-month treatment study. This study provides important pilot data indicating that estrogen may be beneficial in the treatment of major depressive disorder with premenstrual exacerbations. These results suggest that placebo-controlled double-blind data are warranted to assess estrogen augmentation of antidepressants for menstrual cycle–related mood exacerbations, and more study is needed to inform clinicians about the most effective dosing regimens.

These data inform health care providers about effective and efficient screening and treatment for mood disorders in the context of reproductive events and suggest areas that warrant further study.

For comments or suggestions regarding the Focus on Women's Mental Health section, please email me at mfreeman@psychiatrist.com.

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