



# Mental Health Outcomes and Treatments Utilized for Postpartum Depression Patients Hospitalized for a Mood Disorder in the US using Real-World Data

Ashley Dever<sup>1</sup>, [ashley.dever@trinetx.com](mailto:ashley.dever@trinetx.com)  
<sup>1</sup>TriNetX, LLC., Cambridge, MA, USA.

## OBJECTIVES

Postpartum depression (PPD) is a form of chronic depression that occurs during or after pregnancy. Risk factors include personal or family history of depression/PPD, bipolar disorder, and lack of financial/social support. Treatment options for PPD include psychotherapy, antidepressants, and Zolresso. Patients with PPD that are also diagnosed and hospitalized for a mood disorder might suffer from worse mental health outcomes than those who are not. This study aims to assess mental health outcomes and treatments utilized by patients with a PPD diagnosis and hospitalization for a mood disorder.

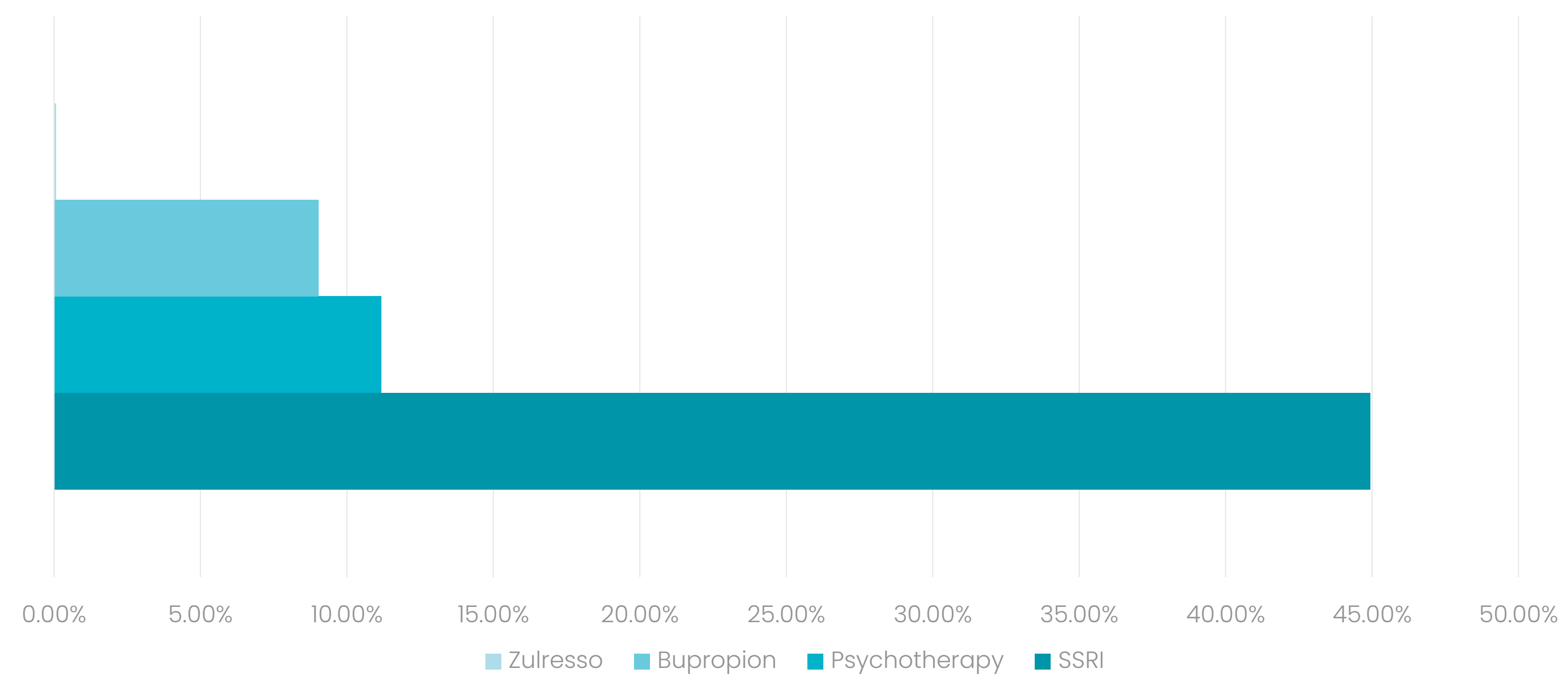
## METHODS

US-based patients diagnosed with PPD after giving birth and with a mood disorder diagnosis between 1/8/2021-1/8/2024 were identified in the TriNetX federated network of deidentified EHR data. Patients were categorized by those hospitalized on the same day of mood disorder diagnosis (N=10,740), and those that were not hospitalized (N=24,920). Cohorts were 1:1 propensity score matched on age, sex, race, and bipolar or schizophrenia diagnosis to adjust for confounding. The risks of suicidal thoughts/actions, self-harm, and seeking psychiatric care were evaluated.

Figure 1. Cohort Statistics and Risk Ratios

Risk Ratio of Suicidal Thoughts/Actions				
Cohort	Patients in Cohort PSM Matched	Patients in Cohort with Outcome	Risk Ratio	95% CI
PPD in mothers hospitalized for a mood disorder	8,860	150	2.264	1.707, 3.002
PPD in mothers with no history of being hospitalized for a mood disorder	9,360	70		
Risk Ratio of Self-Harm				
Cohort	Patients in Cohort PSM Matched	Patients in Cohort with Outcome	Risk Ratio	95% CI
PPD in mothers hospitalized for a mood disorder	9,340	80	2.06	1.411, 3.008
PPD in mothers with no history of being hospitalized for a mood disorder	9,620	40		
Risk Ratio of Seeking Psychiatric Care				
Cohort	Patients in Cohort PSM Matched	Patients in Cohort with Outcome	Risk Ratio	95% CI
PPD in mothers hospitalized for a mood disorder	7,640	820	1.356	1.232, 1.494
PPD in mothers with no history of being hospitalized for a mood disorder	8,720	690		

Figure 2. Treatment Pathways for Cohort 1 (PPD in mothers hospitalized for a mood disorder)



## RESULTS

In the matched analysis, a hospitalization for a mood disorder was associated with an increased risk of suicidal thoughts/actions (RR=2.264, 95%CI: 1.707,3.002), self-harm (RR=2.06, 95%CI: 1.411,3.008), and seeking psychiatric care (RR=1.356, 95%CI: 1.232,1.494) as shown in Figure 1. Additionally, the hospitalized patients were treated with an SSRI (44.93%) followed by psychotherapy (11.18%) and Bupropion (9.04%) shown in Figure 2. Zolresso, one of two FDA approved drugs for treatment of PPD, was used to treat 0.07% of patients (Figure 2).

## CONCLUSIONS

PPD patients hospitalized for a mood disorder are more likely to suffer from negative mental health outcomes compared to those with who are not hospitalized. Additionally, PPD patients that are hospitalized are more likely to be prescribed SSRIs than Zolresso. More research is needed to improve mental health outcomes of PPD patients and determine whether outcomes differ based on treatments.

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