



CASE STUDY

◆ After Lara Bishop gave birth to Joshua she was diagnosed with severe postnatal depression and began taking the antidepressant Prothiaden.

'I didn't want to take anything initially, but six to eight weeks after Joshua was born I couldn't sleep and I had panic attacks and obsessive fears. I knew I had to try medication,' recalls Lara, 34, from Canberra.

Lara stayed on the pills as she moved home, suffered three miscarriages and cared for Joshua as he braved operations to repair club feet.

'I had a lot of stress in my life, and the pills helped to a certain extent, but I still had a lot of anxiety and sleeplessness,' Lara says. 'I constantly worried.'

After 18 months on medication, Lara went to a specialised unit for help with depression. She learnt cognitive behavioural therapy, new parenting skills, and she and husband Charles had counselling to help tackle depression.

Soon after Lara switched to a new medication, Prozac, then tried Zoloft. She has been on Zoloft for five years and is gradually reducing her dose.

While on Zoloft, Lara discovered she was five weeks pregnant with Isabella, now three. She then faced the dilemma of coming off medication and trying to

cope with pregnancy and severe depression, or remaining on anti-depressants and worrying about any possible impact on her unborn child.

'I came off Zoloft, but within three weeks I was a disastrous mess. I had panic attacks, I cried all the time and I felt I'd never get better,' Lara recalls.

Lara consulted her psychiatrist and obstetrician and began taking Zoloft again – at about a quarter of the maximum recommended daily dose.

'I also used cognitive therapy, yoga and weekly visits to my psychiatrist, and my second pregnancy was a lot more enjoyable than my first,' she says.

Lara didn't breastfeed Joshua due to concerns about the medication passing to the breast milk. As she believed the newer style antidepressants are safer, she was able to feed Isabella.

'I'd prefer people to get by without medication, especially during the first trimester, but there is no real evidence of increased risk of abnormalities to the child,' Professor Hickie says.

'Breastfeeding and antidepressants is still a controversial area. Some of the newer drugs may have side effects for the baby. It is up to the specialist to choose medication that minimises excretion of the drug into the milk.'