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The Association between Immediate Postpartum Etonogestrel Implants and Positive Postpartum Depression Screens in Adolescents and Young Adults

Erin Drake [1], Kira Grush [2], Jeanelle Sheeder [2], Kristina Tocce [3]

Affiliations
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Abstract

Objective: We aimed to compare rates of positive postpartum depression screens at 6 weeks postpartum among adolescents and young adults (AYA) initiating immediate postpartum contraceptive implants and those initiating other methods.

Design: Through a retrospective observational design, we collected data on demographics, reproductive history, prenatal and postnatal depression, and postpartum contraception.

Setting: Patients participating in an AYA prenatal-postnatal program were eligible for inclusion.

Participants: A total of 497 patients were enrolled between January 2013 and December 2016. The median age was 19 years (range 13-22 years); 86% were primiparous, 50% were Latina, 24% were black, and 16% were white; 34% initiated immediate postpartum implants (n = 169).

Intervention: Those initiating a contraceptive implant within the first 14 days postpartum were included in the intervention group.

Main outcome measure: We compared rates of positive Edinburgh Postpartum Depression Scales (EDPS) (scores ≥10) in AYA initiating immediate postpartum implants and those initiating other contraceptive methods.

Results: The AYA initiating immediate postpartum implants were similar to the rest of the cohort in baseline characteristics, aside from an increased rate of preterm births among the intervention group (19.4% vs 12.1%; P = .03). Prenatally, 14% had an elevated Center for Epidemiologic Studies Depression Scale (CES-D) scores (11.5% immediate postpartum implants vs 15.4% comparison, P = .25). At 6 weeks postpartum, 7.6% had a positive postpartum depression screen; this rate was significantly lower for those initiating immediate postpartum implants compared to those choosing other methods (4.1% vs 9.5%, P = .04).

Conclusions: Providers should continue to encourage AYA to choose whichever highly effective contraceptive method they prefer for postpartum use.

Keywords: Adolescent; Immediate postpartum implant; Long-acting reversible contraception; Postpartum depression.

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