

Pathway for Perinatal Psychiatric Emergency

Universal Services

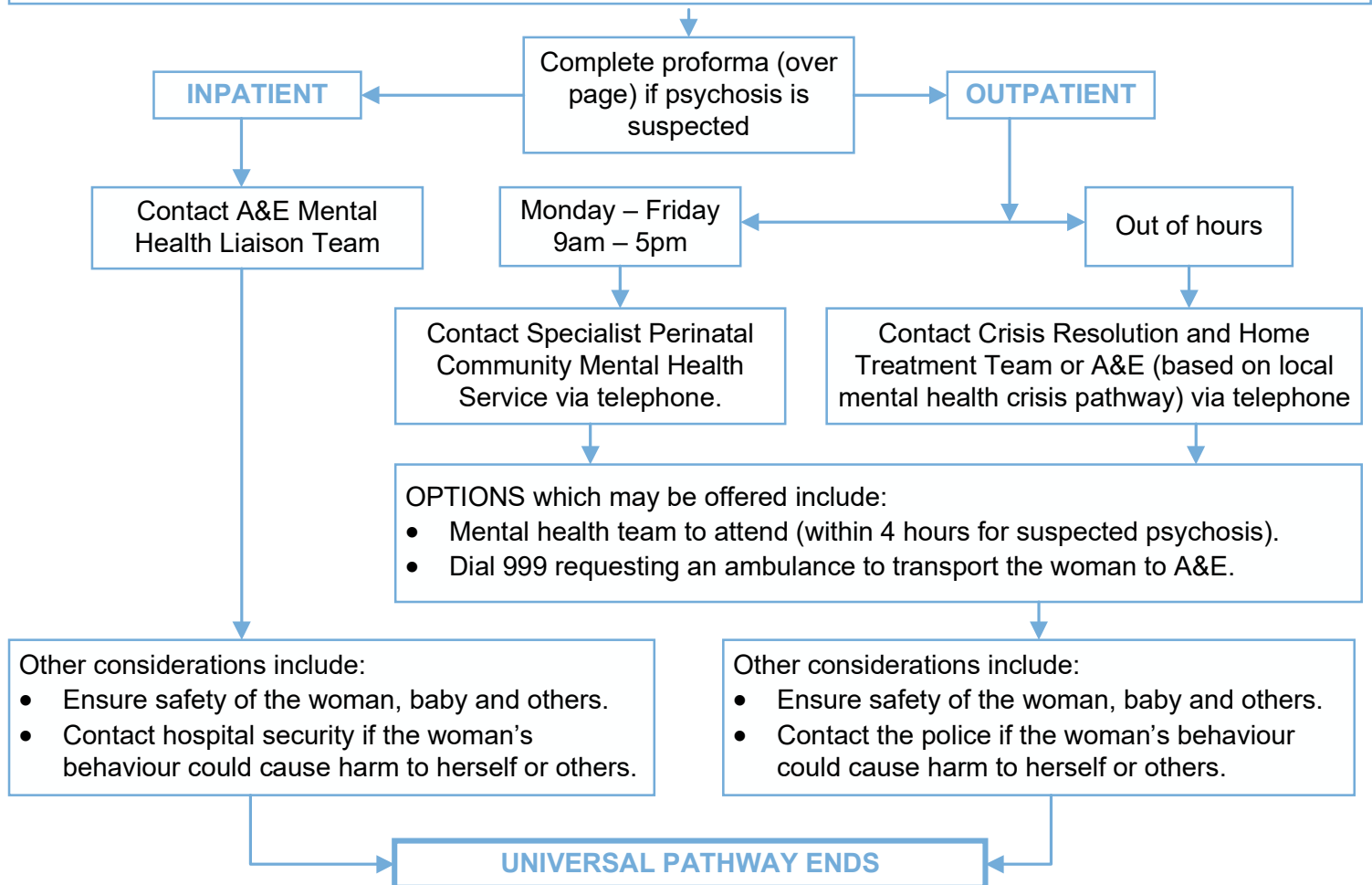


North West Coast
Clinical Networks

Note: health professionals are advised to consider calling 999 to request an ambulance in the event of concern for the safety of the woman, baby or others.

Mental Health emergency identified during the perinatal period.

An emergency is an unexpected, time-critical situation that may threaten the life, long-term health or safety of an individual or others and requires an immediate response (NHS England and NHS Improvement, 2018).



NOTES FOR MENTAL HEALTH SERVICES

For suspected post partum psychosis (PPP):

- Discuss completed proforma over page
- Review most recent routine observations (BP / temp / pulse / resps / bloods) to assist diagnosis
- Seek admission to Mother and Baby Unit / Acute where clinically indicated and safe
- Aim to keep mum and baby together unless risks posed to baby's safety
- Do not leave patient unaccompanied
- Consider commencing antipsychotic medication

Regularly Review diagnosis in light of physical health/blood results etc.

Conduct Emergency Assessment or start Mental Health Assessment within 4 hours of referral. If there is any suggestion that this presentation is a suspected or emerging PPP: **Treat as if it is PPP, until proven otherwise, whilst excluding differentials** (differential diagnoses may include; sepsis/infection/delirium/hyponatraemia)

NB: If there is a history of Bipolar affective disorder/PPP the risk of this presentation being PPP is increased.

Mother and Baby Inpatient Unit referral:

Where admission required: download Universal MBU Referral Form (<https://www.nhswebbeds.co.uk/login>) and send to preferred MBU. Inform Specialist Perinatal Community Mental Health Service of outcome as soon as possible. MBU beds are centrally commissioned and funded by NHS-England, so **permission is not required** to seek funding for out of area placements if no local MBU bed is available.



Proforma for suspected Postpartum Psychosis

Write patient's details or affix identification label

Hospital number:

Name:

Address:

Postcode:

Date of birth:

NHS number:

Postpartum psychosis (or puerperal psychosis) is a severe mental illness. It starts suddenly during the final trimester of pregnancy or in the days or weeks after having a baby. Symptoms vary, and can change rapidly. They can include high mood (mania), depression, confusion, hallucinations and delusions. It is a psychiatric emergency - you should seek help as quickly as possible.

Do not leave patient unaccompanied. See pathway for relevant agency to contact. Inform family of concerns and note their comments. Family will often report subtle changes: *"She is just not herself"*.

Clinical Presentation (circle)

Recent rapid change in mental state/new symptoms

Thoughts of violent self harm and/or suicidal ideation

Agitation

Confusion

Suspicious of others

Rapid onset marked mood change (up/down)

Over activity

Bizarre ideas or unusual thoughts (including about baby)

Periods of blankness (staring into space)

Responding to something that is not physically present

Marked change in demeanour / personality

Unpredictable or impulsive behaviour

Unable to sleep when baby sleeps / unable to switch off

Very withdrawn, not communicating with family

Other:

Gestation / date of delivery: _____

Current or past history of mental illness Yes/No

Past history of psychosis Yes/No

Personal / family history of postpartum psychosis Yes/No

Current psychotropic medication Yes/No

Traumatic birth experience Yes/No

If perinatal mental care plan in place assess for early warning signs/triggers. Consider engaging with professionals who know the patient.

Concerns of patient and/or family:

Complete investigations (send as urgent)

BP Pulse

Temp Resps

FBC CRP

LFT U&E

Random Glucose TFT

MSSU ECG if possible

Suspected Post Partum Psychosis?

Yes/No

Refer to NWC Perinatal Psychiatric Emergency Pathway (over page)

Does woman recognise the concerns and agree to see a mental health practitioner?
(if no, consider Mental Capacity Act)

Yes/No

Notes

1. The definition of emergency is taken from The Perinatal Mental Health Care Pathways, NHS England and NHS Improvement, 2018:
2. Appreciation and credit are given to the Perinatal Mental Health Team at Wirral University Teaching Hospital and the Bristol Specialist Community Perinatal Mental Health Team for the sharing of documents on which the first draft of this pathway and proforma were based.

Signature:

Print name:

Designation:

Date and time: