

## **Effects and consequences for mother and child from treatment for depression. A randomize controlled trial with internet-based cognitive behaviour therapy and sertraline or placebo**

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**Background:** Depression is common in pregnant women, approximately 5 % need treatment, usually with selective serotonin reuptake inhibitors (SSRI). Increased risks for preterm birth and neonatal complications in the children are reported. Data on long-term effects on cognitive development in the children are contradictory. Internet-based CBT (I-CBT) is an efficient treatment option for depression. There are no studies on I-CBT treatment in pregnant women.

**Aims:** To study:

- neonatal effects and long-term outcome in children exposed to SSRI treatment during fetal life
- Effects of a combined treatment with SSRI or placebo and I-CBT in pregnant women with depression (mental status, obstetrical complications, haemorrhage).
- Attachment parents and child

**Methods:** Two-hundred women recruited from maternal antenatal health clinics in early pregnancy fulfilling the criteria of a moderately severe depression will receive I-CBT and at the same time be randomized to add-on therapy with sertraline (n=100) or placebo (n=100). The children (n=200) will be assessed for neonatal neurological signs and complications and at 3m of age, for cognitive development at 2 years and 6 years of age. Questionnaires on child behaviour, maternal attachment and psycho-social situation are evaluated at each follow-up.

**Results:** Preliminary results will be presented

**Conclusion:** The challenges and pitfalls of conducting an interdisciplinary study will be discussed.

References: Oberlander 2012, Fetal serotonin signalling: setting pathways for early childhood development and behaviour Journal of Adolescent Health.

Lester et al, Epigenetic basis for the development of depression in children, Clin Obstet Gynecol 2013.