

Abstract Template

Instructions: Please use the following template when writing your abstract for the Missouri Resident Research Conference. Please do not exceed 300 words and use font: Times New Roman and font size: 11.

Title: Impact on pharmacist intervention on psychiatric conditions in pregnancy

Author(s) and Institution(s): Emily B. Henningsen, Pharm.D.^{1,2}; 1st Alicia Forinash, Pharm.D., FCCP, BCPS, BCACP^{1,2}; Abigail Yancey, Pharm.D., FCCP, BCPS^{1,2}, Katherine Mathews, MD, MPH, MBA^{2,3}

1. St. Louis College of Pharmacy, St. Louis, MO; 2. SSM Health St. Mary's, St. Louis, MO; 3. Saint Louis University School of Medicine, St. Louis, MO

Introduction: Uncontrolled psychiatric conditions during pregnancy are associated with adverse outcomes including preterm birth, low birth weight, increased neonatal intensive care unit admissions, poor postnatal care and impaired bonding. The impact of clinical pharmacists in the management of psychiatric conditions in pregnant patients is unknown.

Methods: A prospective pilot study enrolled eligible pregnant patients with psychiatric conditions and evaluated data if two visits with the pharmacy team occurred. Primary outcome was composite number of pharmacist interventions, change in Edinburgh Postnatal Depression Scale (EPDS) from baseline to follow up, and percentage of patients who experienced clinically significant change in EPDS scores. Patient satisfaction with clinical pharmacy services was also assessed.

Results: Although 10 patients were enrolled, six completed follow-up and are included in this analysis. Mean gestational age was 17 weeks 2 days. Patients had an average of 2.5 psychiatric diagnoses and 3 patients were on psychiatric medications at baseline. Throughout the study time frame, 106 total interventions were recommended by the pharmacy team, 75 interventions (70.8%) at the initial visit and 54 (29.2%) at follow-up. Twenty (18.9%) were related to psychiatric condition management. EPDS scores improved between visits (13.1 vs 10.7, $p = 0.34$). Of patients classified as uncontrolled ($n=4$), 50% experienced a clinically significant change in EPDS scores. Patients were satisfied with clinical pharmacy services (median 4 on all 11 items on 4 point Likert scale with 4 meaning strongly agree). Patients agreed

or strongly agreed the pharmacy team helped with understanding of mood disorders, safety of medications and comfort.

Conclusions: The pharmacy team recommended many interventions to provide comprehensive care to patients. Although not significant, there was a trend towards improved EPDS scores and control of obstetrics patients with psychiatric conditions with pharmacist intervention. Patients were satisfied by the care provided.