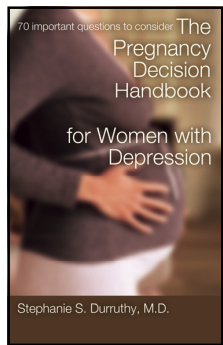


Available for interview:

Contact Dr. Durruthy:
877-646-3778
info@MindSupport.com
(Media Only)

The Pregnancy Decision Handbook for Women with Depression



Depression and pregnancy are a volatile mix...one which may have devastating consequences, not only for those women experiencing it but also for their children,

families and communities. In her practice, Dr. Durruthy recognizes the special needs of women with depression who are considering having children. She has written a new hand-book *The Pregnancy Decision Handbook for Women with Depression* to address the needs and answer many of the questions and concerns women and their families have. Members of your audience – both men and women – who want children, need to hear this relevant, timely message. Parents, family and friends will be interested to learn what role they can play. Communities, shocked by all-too-frequent headlines, want to understand. To schedule Durruthy as a guest speaker on your show, call her at 877-646-3788 or email her at info @Mindsupport.com.

Cost of depression estimated at \$75 billion—In the U.S., major depression has been found to be the leading cause of disability among adults. The associated cost is high. During 1996 alone, lost productivity and disability insurance payments due to illness or premature death accounted for almost \$75 billion.

Major depression affects twice as many women as men.—Enhanced detection, psychotherapy and antidepressants may all improve quality of care. Women considering pregnancy while suffering with depression need to be aware of the potential risks.

According to the Agency for Healthcare Research and Quality, depression is as common in women during pregnancy as it is after giving birth. Estimates are that 13% of women suffer from depression and approximately 1 in 20 women who are either pregnant or have given birth in the past 12 months suffer from major depression.

The problems of depression during pregnancy may be even more serious simply because most people, believing that depression is a problem for women only following childbirth, don't recognize it.

Given this alarming data, women who suffer from depression should carefully consider having a baby. That's why this handbook is so important.

Stephanie Durruthy, MD, a board certified psychiatrist in private practice, mother, and expert in the field, is a strong voice on behalf of women and their mental health. A former Medical Director of John Hopkins' Bayview Psychiatric Day Hospital and currently a faculty member at John Hopkins School of Medicine, Dr. Durruthy is a frequent lecturer on and advocate for, women's health issues. You will find her to be a knowledgeable, articulate and compassionate speaker.

Written in a question and answer format, *The Pregnancy Decision Handbook for Women with Depression* is an important resource, frankly exploring the many issues surrounding pregnancy and depression.



Dr. Durruthy has extensive knowledge of and experience with this issue, and has created the handbook in response to the need expressed by

many women who suffer with depression yet want to have a baby. She is a passionate, informed authority on the topic.

You can reach Dr. Durruthy at 877-646-3778 or info@Mindsupport.com.

Some of the topics your audience may be interested in discussing include:

- The pregnancy journey
- The differences between depression and a bad hair day
- Risk factors for depressive illness
- Disability and money issues
- Treatment and medication options
- Getting support from friends and family

This handbook is not intended to dictate clinical decision making.

The Pregnancy Decision Handbook for Women with Depression
is available for purchase by visiting www.MindSupport.com

Sample Interview Questions

1. Why should women with depressive illness plan their pregnancies?
2. Why is *The Pregnancy Decision Handbook for Women with Depression* different from the many available books about depression and pregnancy?
3. Why is it a good resource for patients and their families?
4. What have you found to be the biggest misconception about pregnancy and depression?
5. What is the difference between clinical depression and sadness?
6. What are some of the active depressive symptoms that can interfere with pregnancy and parenting?
7. Who is at risk for depressive illness during pregnancy?
8. Can one assume if both parents have clinical depression the child will also have this illness?
9. What is the prevalence of depression in pregnancy?
10. Why is there such a need for recognition and treatment of clinical depression in pregnancy?
11. Does the happiness often associated with a wanted pregnancy cure depression in a female predisposed to illness?
12. Are there signs that one can use to physically identify depressive illness in pregnancy?
13. Can you take a blood test to determine if you have depression during pregnancy?
14. What are the parameters to determine the severity of illness from mild, moderate and severe?
15. What are some of the treatments available for depression during pregnancy?
16. How do you determine what treatment to recommend during pregnancy?
17. Which antidepressants are considered mild especially for pregnancy?
18. How does the recent Federal Drug Administration (FDA) medication warning of possible third term preterm delivery and withdrawal symptoms in infants impact upon your prescribing patterns with pregnant females?
19. How and why did you get involved with women issues?
20. Besides *The Pregnancy Decision Handbook for Women with Depression*, what other resources should women with depressive illness and their families seek?
21. Where can we find more information about your book?