

# Selective Serotonin Reuptake Inhibitor (SSRI)

## Neonatal Behavioural Syndrome

### What is an SSRI and why are they prescribed?

SSRIs are the most widely used antidepressant medications. They are prescribed by a regulated health care practitioner to treat depression. Approximately 8% to 20% of all women will develop symptoms of depression, and women in their childbearing years are at higher risk. If you are pregnant or planning to become pregnant and are currently taking an SSRI, you and your caregiver will discuss the risk and benefits of continuing or stopping your treatment. Many women and their caregivers decide to continue treatment during their pregnancy.

### Why is it important to take my SSRI as prescribed?

It is very important that you discuss any changes of dose, or stopping your SSRI with your care provider. Women with a history of depression are at high risk of relapse when they stop taking their antidepressant medication during pregnancy. Untreated depression has been shown to make maternal-child bonding difficult, and has cognitive, emotional and behavioral consequences for the child.

### What is SSRI Neonatal Behavioural Syndrome?

SSRI neonatal behavioural syndrome affects approximately 10% to 30% of newborn infants whose mothers are treated with SSRIs during their pregnancy. Symptoms most often appear between birth and 3 days of age, and can last up to 2 weeks. These symptoms are often mild, stop on their own, and include:

- Difficulties with feeding
- Jitteriness
- Irritability
- Sleep problems
- Tremors
- Shivering
- Restlessness

Newborn infants exposed to SSRIs during pregnancy may have difficulty controlling their blood sugar, temperature and may be at more risk of jaundice. Your nurse will be assessing your newborn infant frequently for these signs and symptoms. Very rarely, your newborn infant may have difficulty breathing or have seizure activity. If these symptoms occur, your newborn infant will be cared for in our Neonatal Intensive Care Unit.

Newborn infants who were exposed to an SSRI during the first trimester of pregnancy have a very slight increased risk (a 1% risk with SSRI treatment compared to 0.7% without SSRI treatment) of a heart defect. All newborn infants receive screening that measures blood oxygen levels to help detect heart defects.

## How can I support my newborn infant?

SSRIs are safe to use while breastfeeding and breastfeeding every 3 hours is encouraged. The following activities can help your newborn infant:

- Provide a quiet, low-light environment
- Frequent skin-to-skin contact
- Talk softly and slowly to your newborn infant
- Hold your baby often
- Gently rock or sway your baby
- Introduce white noise

The Period of PURPLE Crying™ is an excellent resource for consoling your baby. You can visit their website here: <http://www.purplecrying.info/>

## When should I get help?

Please seek medical attention if your baby experiences:

- Weight loss
- Difficulty feeding
- Decreased pees or poops
- Yellowing of the skin or eyes

Please seek immediate medical attention if you or your baby experience:

- Seizure activity
- Difficulty breathing
- Blue skin colour
- Thoughts of harming yourself or your baby.