Fathers and Postnatal Depression
Research Results from the Project:
Men’s Psychological Transition to Fatherhood
– Mood Disorders in Men Becoming Fathers

Overall Findings:
The study, which involved 600 men, indicates that around 7 percent of fathers suffer from postnatal depression.

This is the equivalent of around 225-250 fathers - of babies born at Rigshospitalet - who are suffering from postnatal depression on a yearly basis. Around 3.400 births take place at Rigshospitalet annually.

The current annual no. of births in Denmark is around 65.000. Hence on a national level the numbers indicate that roughly 4-4.500 fathers suffer from postnatal depression.

About the study:
The study used two different scales to detect depression: 1) the ‘Edinburgh Postnatal Depression Scale’ (EPDS), traditionally used to screen for postnatal depression, and 2) the ‘Gotland Male Depression Scale’, normally used to assess so-called masculine states of depression.

The two scales list the following conditions as possible indicators of depression:

<table>
<thead>
<tr>
<th>EPDS (‘Traditional’ depression)</th>
<th>Gotland Scale (‘Male’ depression)</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Unable to laugh or be humorous</td>
<td>• Lowered stress threshold/more stressed out</td>
</tr>
<tr>
<td>• Unable to look forward to things</td>
<td>• More aggressive, outward-reacting, difficulties keeping self-control</td>
</tr>
<tr>
<td>• Blaming myself unnecessarily when things go wrong</td>
<td>• Feeling of being burned out and empty</td>
</tr>
<tr>
<td>• Feeling anxious or worried for no good reason</td>
<td>• Constant, inexplicable tiredness</td>
</tr>
<tr>
<td>• Feeling scared or panicky for no good reason</td>
<td>• More irritable, restless and frustrated</td>
</tr>
<tr>
<td>• Things get on top of me</td>
<td>• Difficulty making ordinary everyday decisions</td>
</tr>
<tr>
<td>• Have been so unhappy that I have had difficulty sleeping</td>
<td>• Sleeping too much/too little/restlessly, difficulty falling asleep/waking up early</td>
</tr>
<tr>
<td>• Feeling sad or miserable</td>
<td>• In the morning especially having a feeling of quiet/anxiety/uneasiness</td>
</tr>
<tr>
<td>• Feeling so unhappy that I have been crying</td>
<td>• Ocerconsumption of alcohol and pills</td>
</tr>
<tr>
<td>• The thought of harming myself has occurred to me</td>
<td>• Excessive activity/working hard and incessantly, jogging etc.</td>
</tr>
<tr>
<td></td>
<td>• Altered behaviour makes me difficult to deal with</td>
</tr>
<tr>
<td></td>
<td>• Feeling/or being perceived by others as being gloomy, negative, hopeless</td>
</tr>
<tr>
<td></td>
<td>• Feeling/or being perceived by others as having a greater tendency to self-pity, to be complaining or to seem &quot;pathetic&quot;</td>
</tr>
</tbody>
</table>
The 600 men who participated in the study were recruited through antenatal classes and midwife consultations at Rigshospitalet. The response rate among the men who received the questionnaire was 91%.

The study was carried out from February to December of 2005 and included 600 fathers whose child was born at Rigshospitalet. The men’s condition was assessed by asking them to fill out a questionnaire roughly 6 weeks after the birth of their child.

Up to this point the Fædreforskningsprogrammet - the Paternal Research Programme at Rigshospitalet has received about 70 fathers for psychotherapeutic treatment for postnatal depression. In the course of this work it has become apparent that postnatal depressions may arise both before the birth and for a significant period afterwards.

The project receives funding from the EU-Comission under 'Community Framework Strategy on Gender Equality 2001–2005'.

The Project has been carried out by a research group consisting of Head of Department Psychologist Svend Aage Madsen, Ph.D., Psychologist Tina Juhl and Midwife Ann Louise Vestergaard – all members of Rigshospitalet’s Psychological and Psychosocial Research Unit.

Further Details:
When we used the questionnaire traditionally used to identify postnatal depression in women –EPDS – it was estimated that 5,0 % of men examined suffer from postnatal depression. Using a specific scale for ‘Male depression’ – the Gotland Scale – an estimated 3,4 % of men were found to be suffering from postnatal depression.

Making use of both scales the results show roughly 7% of fathers to be suffering from postnatal depression (the fathers who register as depressive according to both scales are counted only once). The number includes both first-time fathers and some who have previously had children.

The numbers show the following distribution amongst the 544 fathers who responded:

- EPDS 27 (5,0%)\(^1\)
- Gotland 18 (3,4%)\(^2\)
- Postnatal Depression including EPDS + Gotland 34 (6,5 %)\(^3\)

Valid answers: \(^1\)537, \(^2\)524, \(^3\)520

In comparison, international research shows that 10-14% of women suffer from postnatal depression as registered by the EPDS about 6 weeks after the birth.

Comparing postnatal depression with other forms of depression, recent Danish research shows that 3,5% of 20 to 50-year-old men suffer from moderate to severe depression at any given time. Twice as many women as men are diagnosed as suffering from some form of depression.

There are a number of indicators that men’s psychiatric problems are generally under-diagnosed and that they hence receive insufficient treatment in this area.
Perspectives:
The fact that men do suffer from postnatal depression was demonstrated from the results of the research project ‘Fathers’ Bonding with their Infants’ (2) and was first publicly announced in Denmark in 2002. Since then work has been going on at Rigshospitalet to investigate this phenomenon, including i.a. psychological treatment of men suffering from this condition.

The current survey indicates the necessity of training health-care staff -who come into contact with families during pregnancy, birth and infancy - to also be aware of the psychological state of fathers and to identify those suffering from postnatal depression.

Furthermore the method utilized here to identify postnatal depression in men will also be useful in developing tools to improve general diagnosis of depression in men.

It appears that for now Rigshospitalet is the only place in Denmark offering specific treatment – and the therapy we have been able to offer here at Rigshospitalet is underwritten by EU project-funds for a limited period of time only.

Thus the survey also implies a need to procure treatment for the roughly 4-4.500 men a year who are estimated to suffer from this condition nationwide

This finally indicates a need for training therapists providing treatment for men suffering from postnatal depression.


*****
For further information and details, please contact:

Head of Department Psychologist Svend Aage Madsen
Tel.: +45 35 45 47 67/+45 26 21 28 51 - email: svaam@rh.dk

Psychologist Tina Juhl
Tel.: +45 35 45 73 19 - email: tina.juhl@rh.hosp.dk

Midwife Ann Louise Vestergaard
Tel.: +45 35 45 50 22 - email: ann.louise.vestergaard@rh.hosp.dk

Kind regards

Svend Aage Madsen