



Research in the Works



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PRogram In Support of Moms (PRISM) Research Study

Upwards of 1 in 7 women suffer from perinatal depression, which is defined as depression during pregnancy or in the year after delivery. Maternal perinatal depression can have profound negative effects on the mother, fetus, child and family.¹⁻¹¹ Despite these recognized negative effects, perinatal depression remains under-diagnosed and undertreated.¹²⁻¹⁶ Women who are pregnant or who have just had a baby have regular contact with obstetric providers. Helping front-line obstetric providers serving pregnant and postpartum women to address depression may provide a solution to this critical public health issue. Massachusetts is fortunate to have MCPAP for Moms^{17, 18}, a first in the nation statewide program that helps obstetric care providers address depression through training, consultation, and care coordination.



The University of Massachusetts Medical School was awarded a 5 year grant from the Centers for Disease Control and Prevention (CDC) to study how to reach this underserved population. Building on the work of MCPAP for Moms, investigators will test an innovative new approach as a potential model to address perinatal depression. This new approach, the PRogram In Support of Moms (PRISM), is a more proactive approach than MCPAP for Moms that will empower Ob/Gyn practitioners to develop processes to treat their patients' psychiatric needs in their own practices, ensuring that their patients do not fall through cracks in the depression care pathway.

An ongoing pilot study of PRISM suggests that while both MCPAP for Moms and PRISM improve depression symptoms, there is a greater decrease in depression severity with the additional intervention components included in PRISM. Over the next 5 years, investigators will run a randomized control trial that compares a set of 6 Massachusetts practices using MCPAP for Moms to a set of 6 practices using MCPAP for Moms plus PRISM.

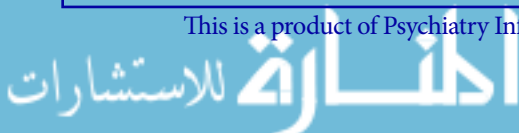
Practices using PRISM will receive:

- Provider access to immediate resources, referrals, and psychiatric telephone consultation for patients through MCPAP for Moms;
- Clinic-specific implementation of stepped care depression treatment, that is care that is delivered and/or adjusted in stages or steps, including training support and toolkits; and
- Assistance with implementation of proactive treatment engagement, monitoring, and stepped treatment response to depression screening and assessment for patients.

This study will provide data to further determine whether one approach is more effective than the other. The goal is to share study findings and materials in order to address this critical issue on a national level.

Research Team: Principal Investigators: Nancy Byatt, DO, MS, MBA, Tiffany A. Moore Simas, MD, MPH, MEd, and Jeroan Allison, MD, MS; **Co-Investigators:** Kathleen Biebel, PhD, and Linda Weinreb MD; **Statistical/Data Management/Database Experts:** Sharina Person, PhD, Dane Netherton, PhD, and Peter Lazar, BS; **Health Economy Consultant:** Robin Clark, PhD; **Operations:** Linda Brenckle, MS, RD, PMP, and Padma Sankaran, MA. **Funding & Time Frame:** Centers for Disease Control and Prevention (Grant #1U01DP006093-01); 2015-2020; **Study Contact:** Linda.Brenckle@umassmed.edu

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