

BARCELONA RECERCA I INNOVACIÓ

14/05/2024

The efficacy of contextual therapies in the treatment of depression and anxiety in the perinatal period



Researchers from the Universitat Autònoma de Barcelona, the Hospital Clínic, and the Institut d'Investigacions Biomèdiques August Pi i Sunyer have published a systematic review and meta-analysis in the *Journal of Psychiatric Research* on the effectiveness of contextual therapies in treating depression and anxiety in women during pregnancy and postpartum

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The problems of mental health during the perinatal period (pregnancy to twelve months postpartum) are very common, affecting up to 1 in 5 women. The most common disorders during this stage are depression and anxiety, often occurring together. Both disorders have been extensively studied, and the impact and negative consequences they can have on both the mother and the fetus or baby have been demonstrated.

Multiple treatments and interventions that can be useful in reducing symptoms associated with depression and anxiety, thereby improving the well-being of the mother and infant, have been studied. Currently, therapies known as third-generation or contextual therapies are gaining relevance. They focus on the well-being of the individual, not only considering their symptoms, but also emphasizing their context. Some of these interventions have analyzed in our study, such as mindfulness, acceptance and commitment therap behavioral activation (BA), and metacognitive therapy.

Considering the rise of these interventions and the lack of studies on their effectiveness in the perinatal period, we thought it was relevant to conduct a systematic review and metaanalysis on the effectiveness of contextual treatments for treating depression and anxiety during pregnancy and postpartum.

In our review, we analyzed 34 studies, 27 of which studied the effectiveness of mindfulness-based interventions, 2 of metacognitive therapy, 2 of ACT, and 3 of BA. The included studies ranged from 2008 to 2021, and all were randomized clinical trials published in English or Spanish. We have analyzed the results of these articles both quantitatively and qualitatively.

The results indicate that contextual therapies are effective in improving emotional disorders (depression and anxiety) in the perinatal period, with moderate effect sizes in reducing symptoms associated with these disorders. Treatments that show greater efficacy are metacognitive therapy and ACT, especially about the reduction of depressive symptoms. However, these data should be interpreted with caution, as more published studies on these therapies are needed to obtain more grounded results. Regarding mindfulness-based interventions, mindfulness-based cognitive therapy (MBCT) has shown greater efficacy in both the prevention and treatment of depressive disorders.

We have also observed that contextual interventions have shown greater efficacy in countries with low or middle-income levels, possibly due to lower accessibility to perinatal mental health treatments and greater severity of symptoms in women participating in these studies. Nevertheless, the lower efficacy of intervention programs designed specifically for the perinatal period has been an unexpected finding. We believe that it is possibly related to the extent to which a psychological treatment program deviates from well-established standard protocols.

In conclusion, our results suggest that contextual therapies, in general, are effective in improving anxiety and depression. The effectiveness of mindfulness-based interventions is clear, but we believe that further studies on the efficacy of other contextual therapies are needed.

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References

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