



Information for Health Professionals

KEMH Perinatal Mental Health Services for Women with Severe Mental Illness

One in five women will suffer some form of mental illness within pregnancy and the postnatal period. For women with a severe mental illness (SMI) such as schizophrenia, bipolar affective disorder type 1 or postpartum psychosis, this can be especially concerning when thinking about pregnancy.

The Perinatal Mental Health Service (PMHS) at King Edward Memorial Hospital (KEMH) is an integrated pregnancy, postnatal and mental health service for women with SMI. This is a state wide service available to all women, not just those planning to birth at KEMH.

Women with SMI have unique needs. These may include:

- increased risk of psychiatric relapse during pregnancy and after the birth of the baby
- need for specialist monitoring of prescribed medications during pregnancy
- greater risk of pregnancy and birth complications
- increased need for support around parenting

Criteria:

- Low prevalence psychotic disorders (including schizophrenia and schizoaffective disorders and other psychotic disorders)
- Bipolar Affective Disorders (mainly BPAD type 1)
- Major Depressive Disorders with psychotic features
- Current or past history of significant Eating Disorders
- Previous admission to a Mother and Baby Unit (MBU)
- Other disorders that are in the severe range and would benefit from comprehensive Multidisciplinary team service: e.g. severe Obsessive Compulsive Disorder (OCD)/complex Post Traumatic Stress Disorder (PTSD) etc. and this will be triaged on a case by case basis

Telehealth perinatal psychiatry

The Perinatal Mental Health Service (PMHS) at KEMH offers rural women access to telehealth perinatal psychiatry services. The perinatal psychiatry team offer specialist secondary consultation for women with a history of postpartum psychosis, schizophrenia and bipolar disorder type 1. Using videoconferencing facilities, the team work in partnership with local clinicians to provide assessment and treatment recommendations for patients in the perinatal period (i.e. during pregnancy and up to 12 months postnatally). Preconception consultation is available and encouraged.

Case management and clinical decision making remains with local clinicians and a model of shared care may be applied where appropriate. Face to face appointments on site at KEMH can be arranged, if preferred. Advice about referrals for women with other complex mental health problems can be obtained via the Psychological Medicine duty Triage Officer.

When do I make the referral?

Pre-Conception

Pre-conception secondary consultation through the Department of Psychological Medicine provides your patient and her partner/family/support person the opportunity to meet with a perinatal psychiatrist to discuss their plans for starting, or adding to, their family and the timing of this. The perinatal psychiatrist will discuss risks and benefits of various treatment options, potential strategies to maintain and build her mental health and wellbeing, and ways to reduce the risks during this period with your patient.

As a referrer you will receive written feedback in regards to treatment planning and medication review. Shared care arrangements are encouraged.

Pregnancy

If you have confirmed your patient's pregnancy you can make a referral to the Childbirth and Mental Illness (CAMI) Antenatal Clinic. The CAMI Antenatal Clinic comprises a team of health professionals passionate about providing women and their families with specialised mental health care during this period. The team includes a psychiatrist, GP obstetrician, midwife, social worker and a pharmacist. A full suite of obstetric and allied health services is also available. It is best if a referral can be made as early as possible (from 12 weeks gestation).

Shared care arrangements are encouraged. If a local Community Mental Health Service is already involved, then Shared Care will be put in place. If not and depending on individual needs, patients can be referred to Community Mental Health Services during or post discharge from hospital.

Mother and Baby Unit (MBU)

If your patient needs a mental health admission during pregnancy (from 24 weeks) or after the baby is born, KEMH has a MBU on site. Women will be referred to the MBU by the CAMI Antenatal Team. If your patient has not been a CAMI patient up to this point in her pregnancy, or has attended postpartum within the first year of the baby's life, you can make a referral direct to the [MBU](#) or contact MBU on 6458 1799. www.kemh.health.wa.gov.au/For-health-professionals/GP-referrals/Mother-and-Baby-Unit-Referrals

How do I make a referral?

Department of Psychological Medicine – see website for [further information and Referral forms](#) (www.kemh.health.wa.gov.au/For-health-professionals/GP-referrals/Psychological-Medicine-referrals)

CAMI antenatal clinic - You can complete the standard [KEMH antenatal referral form](#); complete page 5 – Specialist Antenatal Clinic, tick 'Childbirth and Mental Illness Team' and fax it to 6458 1031 (www.kemh.health.wa.gov.au/For-health-professionals/GP-referrals). Alternatively you can call the Triage Officer at the Department of Psychological Medicine for advice.

KEMH – 374 Bagot Road, Subiaco, WA 6008

Phone – 6458 1521 (Dept Psych Med) 6458 1799 (MBU)

Fax – 6458 1111 (Dept Psych Med) 6458 1790 (MBU)

Produced by: Women and Newborn Health Service

Web: www.kemh.health.wa.gov.au

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This document can be made available in alternative formats on request for a person with a disability.