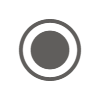
**Transcript**

8 January 2025, 10:05am



**Interviewer** 7:14  
That's absolutely fine. OK, so.  
My first questions are about the pregnancy and your medication history. So can I ask you, I think you mentioned in your emails, but if you could just confirm again which antidepressant it was you were taking and when you were first prescribed the antidepressant. So was it before or during your pregnancy?

**Participant** 7:30  
Yeah.  
Yeah. So I'm on paroxetine and before pregnancy.

**Interviewer** 7:51  
That's fine. And had you been on it for quite a while prior to your pregnancy.

**Participant** 7:55  
Yeah, I've been on it for many years.  
Been on antidepressants for like on and off 13 years now so.

**Interviewer** 8:06  
That's great. Thank you.  
And can you?  
Tell me any more about the antidepressant that you took during pregnancy. Was there any changes in the dose? Did you make any changes to your regime or did you keep everything just the same?

**Participant** 8:26  
No, I kept everything the same.  
There was, yeah. It wasn't really discussed with me about changing anything, so I just kind of kept it as it was until the end when they told me they would have changed it, but yeah.

**Interviewer** 8:42  
OK. Yeah.  
You can. We'll we'll probably come on to. You'll be able to tell me a bit about that so.  
Any other changes or new medicines that you took during your pregnancy so that also includes prescribed medicines over the counter medicines, herbal medicines, any kind of substances or medicines other people gave you?

**Participant** 9:07  
Yeah. So I was, I had gestational diabetes, so I was on metformin and insulin for that. And then I was on aspirin as a preventative.  
That was all.

**Interviewer** 9:18  
And did you take a pregnancy multivitamin vitamin D?

**Participant** 9:21  
Yeah, I did Pregnacare

**Interviewer** 9:24  
Yeah, that's great. And you said your paroxetine stayed the same throughout your pregnancy. What dose were you taking?

**Participant** 9:32  
40mg

**Interviewer** 9:39  
OK. And can you share with me sort of any thoughts or feelings you have about taking antidepressants during pregnancy or anything you may have had at the time?

**Participant** 9:51  
Yeah, I think so. For me, like 'cause, I've, I've got a long standing. I've had long standing mental health since I was a child. To me, it was safer to stay on the medication in my head than come off it. But it wasn't really discussed with anyone apart from before I got pregnant. I spoke to an ANP at the GP surgery and he was like, come off them completely. Just that. And I didn't take that advice just no, the dangers of that. But that's the only kind of interaction I had and I kind of was adamant I was going to stay on it. But I did research it through the bumps website and stuff and saw that the risks and benefits and everything.

**Interviewer** 10:31  
Sure. Yeah. So sorry, you mentioned you saw somebody at the GP surgery. Who was that? Sorry, your GP?

**Participant** 10:37  
I just had a phone call. I had a phone call with an ANP at the GP, and that was before I got pregnant, so I just wanted advice on what I needed to do, but I didn't forward that advice.

**Interviewer** 10:52  
Yeah. So.  
That was the only information. My next question is about any information or advice you received from health care professionals. So you spoke about the interaction you had before the pregnancy, but any further discussions during your pregnancy.  
About your medication.

**Participant** 11:13  
Yeah. So I had seen a mental health team (midwife) and they kind of said, do you want to discuss it further or are you happy with the medication? And I said I was happy to stay on it and then that wasn't really covered. And then at my I had a appointment with a consultant at the end at 36 weeks and that's when they that was the first time like someone had talked to me about it and they said about.  
The risks and that they would have probably put me on a different antidepressant. And then there was possible risk of heart defects and things like that. But that was the first time I'd heard about any of that.

**Interviewer** 11:54  
And had you had any discussion with kind of family friends, you mentioned the BUMPs website.

**Participant** 12:02  
Yeah. So my two best friends are midwives, so I've discussed it with them.  
And looked into some information and stuff.

**Interviewer** 12:15  
Yeah, sure. And.  
How did you sort of perceive that advice?  
How did you find the advice and information that you received from different parties? Did it feel consistent or did you did it feel conflicting?

**Participant** 12:33  
I think so. Looking back on it now like.  
Obviously, no one should be told to stop antidepressants cold turkey from the ANPs point of view. So that's one thing. But then also I feel like someone should have told me things before 36 weeks, like the consultant did. So that to my point of view, like they needed to have conversations like there was risks to the heart and stuff before it felt like it was missed, in my opinion.  
But over all like when I saw the mental health midiwfe and stuff, it was all OK.

**Interviewer** 13:11  
Sure. And.  
Did you create a birth plan?

**Participant** 13:19  
Not really. I just kind of was just gonna give birth.

**Interviewer** 13:23  
OK, so you didn't have a mental health birth plan where the medication was included or anything like that?  
Were you referred?  
Later on during pregnancy to the mental health team.

**Participant** 13:41  
No, it was done at booking because of my history and stuff. So I just it wasn't I was seeing like a couple of times by the mental health team. It wasn't. I was quite well during pregnancy, so it wasn't that required.

**Interviewer** 13:56  
Sure. And.  
Did you? So you you didn't do a birth plan as such, but did you have any discussions with the the midwife or the team of the hospital about?  
How things would be in the first few days after having your antidepressant about maybe staying in a little bit longer or that there'd be any extra observations or anything.

**Participant** 14:20  
No, the first I heard about that was when I was in labour, which, yeah.  
Wasn’t great.

**Interviewer** 14:28  
And.  
During labour.  
Are you able to tell me a little bit more about what was said?

**Participant** 14:39  
So it was just a passing comment about.  
I think my husband said how long after birth would we be in and they were like, oh, but you'll be monitored because you're on your antidepressants. And we were like, what do you mean? And they said you'll be in between three to five days extra. That was the first time we kind of heard about that.  
But then then that I was in Labour, so I didn't explore it any further.

**Interviewer** 15:08  
Sure. OK.  
And I wanted to I get from your emails that you are aware of of of these terms, but I'm just going to mention a few terms to you and see if you're familiar and and what they might mean to you. So neonatal adaptation syndrome, neonatal withdrawal syndrome withdrawal or discontinuation symptoms in babies, were any of those terms used at that time?

**Participant** 15:38  
So again, not until after I gave birth.

**Interviewer** 15:46  
And.  
What do you do? You have any sort of understanding of what of what those terms meant?

**Participant** 15:55  
I do now like from looking into it and the the withdrawal of the medication and the the kind of symptoms that they can get and that they'll need to be monitored and things like that. But that's just from doing my own research. I didn't have anything.  
But no one talked to me about it. No.

**Interviewer** 16:13  
No.  
OK.  
So when they described that some monitoring would need to happen, it was just monitoring because you were on the antidepressants rather than any particular symptoms.

**Participant** 16:27  
Yeah.

**Interviewer** 16:30  
OK.  
So are you able to tell me did the did the midwives or doctors did they observe any symptoms in your baby of these withdrawal symptoms?

**Participant** 16:44  
Observations every I wanna say four to six hours, they did some observations on him. But I just thought that was like normal.  
Baby observations so, but I presume they'll have included the NAS obs as well.

**Interviewer** 17:00  
Yeah. And in those observations, did they notice anything unusual or was there anything notable?

**Participant** 17:08  
No, he was absolutely fine.

**Interviewer** 17:11  
And then can I ask you about your sort of experience of feeding your baby?

**Participant** 17:19  
He wouldn't latch it for the while I was in hospital. And then as soon as I got home then he'd then he'd latched. So actually, so I've breastfed since I've got home, but during it, I was, like pumping. And then it given him via a bottle because he just wouldn't latch on.  
He was just screaming basically.

**Interviewer** 17:40  
And did you get any advice about medication and breastfeeding?

**Participant** 17:46  
No, not really.

**Interviewer** 17:48  
Did you look? Did you look this up yourself or?

**Participant** 17:51  
I just made sure that what I was on was safe. That was all.

**Interviewer** 17:54  
Yeah. And did you use a website on the Internet?

**Participant** 17:58  
Yeah, I think I use the BUMPS website. That was what one of my midwife friends recommended so.

**Interviewer** 18:04  
Yeah. So bump. Yeah. So bumps got the pregnancy information. Perhaps E-lactancia might have been one for breastfeeding. It's OK.

**Participant** 18:11  
I am not sure

**Interviewer** 18:14  
That's all right.

**Participant** 18:15  
Let me just.

**Interviewer** 18:17  
OK.  
So.

**Participant** 18:21  
Sorry

**Interviewer** 18:23  
Are you all right?

**Participant** 18:25  
Yeah, he's just woke up, but he's just settling back down. There we go, OK.

**Interviewer** 18:28  
Oh, OK.  
So so I think from what you said that the the healthcare professionals didn't observe any symptoms that they they mentioned to you and you didn't notice anything that you thought was.

**Participant** 18:44  
Yeah.

**Interviewer** 18:47  
Unusual. So there was no sort of additional care that your baby needed above.

**Participant** 18:52  
There was nothing.

**Interviewer** 18:55  
Observations.

**Participant** 18:56  
Yeah.

**Interviewer** 18:57  
  
And in that period of time when your baby was being observed and having extra observations, are you able to share any of the feelings you had at that time?

**Participant** 19:18  
Yeah. So it was, it wasn't. It was wasn't the greatest time.  
It was quite I had the the.  
Hormone dip at day three, which I wasn't aware was a thing, but.  
There was it was just very no one really told me I had to stay in until we got to like 48 hours and I expected to be discharged. And then someone went, oh, well, you might have to stay until tomorrow. I don't know. It was very no one really told me how long I'd be there for or when the observation period, it wasn't till then that I was like, are we going home tonight? And then they were like, oh, but we need to keep you till tomorrow. And it was all of that. But it was quite it was hard because my partner wasn't staying with me. I was in quite a lot of pain from the birth. And it. I just felt like I'd be better at home. And it was just one of them things, really.  
It was quite hard emotionally, yeah.

**Interviewer** 20:18  
Yeah, yeah. And did you?  
Did you have support from anybody else besides your partner?

**Participant** 20:28  
I was phoning my mum, but that was all. And then my mum came in the day we went home. So my parents came.

**Interviewer** 20:35  
Yeah. And we're we're also just interested other things that people might have found helpful at that time. Were you kind of in contact with people on social media or perhaps talking to mums on the ward?

**Participant** 20:50  
None of that. The only people I was talking to was my two friends who are midwives, was kind of getting their advices as I gained more information of what was happening. But that was the only no. I wasn't talking to anyone on the ward or anything.

**Interviewer** 21:05  
Sure. OK and.  
In terms of when you got home.  
What sort of support systems do you do you have in place? You obviously have a couple of really close friends and you've got your partner.

**Participant** 21:18  
So.  
Yeah. So I've got my husband, and then I've got a close neighbour nearby and then my parents live about an hour and a half away, so they're not close. But they've been up like they came up like, every week for a little bit.

**Interviewer** 21:37

Yeah. And how how do those sort of support systems help?

**Participant** 21:44  
Yeah, my support systems have been have been great. My family and my friends during it all.

**Interviewer** 21:44.

**Participant** 21:52  
Talking's always been a big help for me so.  
Yeah, that's been a massive a massive help, really. And just to talk through what happened and kind of things like that.

**Interviewer** 22:05  
Sure. And so looking back, is there anything that you wish you and you've touched on this, but you might have more to say looking back, is there anything you wish you had known or had done differently with regards to antidepressant use during pregnancy?

**Participant** 22:22  
I still think I would have stayed on antidepressants. I still think that was the right decision for me. I wish I would have known about the NAS obs and that I because I think if in my head if I would have been prepared that I had to stay in for 48 to 72 hours, it would have been better mentally for me.  
The unknown.  
He just wasn't communicated well and I think also at 36 weeks to say there was a link to a heart issue.  
That I'd never been told before with paroxetine. Apparently there's a small percentage small percentage that get heart issues. I think if I would have been told that early, it would have been more beneficial than just before I gave birth kind of thing.

**Interviewer** 23:06  
Yeah. So.  
You've sort of answered my next question, which is how you sort of feel about the information that you were given and the support you received so.

**Participant** 23:17  
Yeah, I think it felt like they'd forgot to mention it to me and then they covered it in that last appointment. It very much felt like they were covering that. They didn't tell me earlier, but and then I was told at birth that he'd need an echo the next day, and then the next day came. And they were like, no, he doesn't need it anymore. So the midwives are incredible. I just felt like the medical team didn't really know. And then.  
The neonatal nurse specialist who came and saw me.  
Said that she'd never been told he even needed NAS obs, so nothing was written in my notes about needing NAS obs either by the consultant or anything. So I think there was a big.  
Misunderstanding and it wasn't documented well and things like that.

**Interviewer** 24:05  
Right.  
OK. Yeah. So the the neonatal nurse was the one that was coming down to do the observations.

**Participant** 24:16  
No, she just came down like to do the well-being check. But at that point didn't know about the NAS obs. But it wasn't until I asked to speak to them about how long I had to be in that. She said we weren't even aware that he was having NAS obs. And then I was like, OK.

**Interviewer** 24:35  
Yeah, so communication, significant communication problems.

**Participant** 24:38  
Patient.  
Yeah.

**Interviewer** 24:42  
What advice would you give to other women and birthing people who are considering taking or are taking an antidepressant during pregnancy?

**Participant** 24:54  
I think I’d tell them to, like, do their own research and look into it and get advice from healthcare professionals.  
But also do what's best for them, because if you've been on medication and had mental health issues for a long period of time, you know yourself so weighing up the risks and benefits. To me, the risks was it was safer for me. I felt to stay on them. So just kind of like, get the information they need and kind of ask the questions.

**Interviewer** 25:29  
And based on your experience, do you have any recommendations for healthcare providers so.  
You know all the people that you encountered regarding the management of antidepressant use during pregnancy and that so if you could, you know, tell the people that were going to be looking after you.

**Participant** 25:48  
Yeah.  
I think that the big thing is a communication you need to communicate. If people are having to stay in post birth, communicate that well and explain the reasons why and how long it's likely to be like. Even things like I didn't have enough baby grows or nappies that to cover me the length of time because I didn't believe I was going to be in that long. And so I think communicating that and then.  
Early on, going the risks and the benefits and what's going to happen after birth, I feel like.  
Because of my gestational diabetes, that was a big focus and that this then came to the back of the burner because I was induced. So I think maybe because of the other health things taking priority.  
This kind of got missed and I think they need to make sure that they're covering all aspects, especially with mental health it proper. It wasn't a good few days because of the communication and it did it affect me quite a lot mentally. So I think it would have been much more positive just to know what was going on.  
Huh.

**Interviewer** 26:59  
Can I just double check with you? Were you?  
Under was it the perinatal mental health midwives.

**Participant** 27:07  
So they offered me that, but I we kind of decided to stay with the Community midwives in the end.

**Interviewer** 27:13  
Right. And were you under a perinatal mental health team?

**Participant** 27:18  
Yeah. So there was, I it was like a consultant with an interest in mental health. So they're like, the mental health obstetrics.

**Interviewer** 27:26  
Oh, so it was the obstetrician at the hospital. Yeah. So some of the obstetricians? Yes, have got a special interest in perinatal mental health.

**Participant** 27:37  
Yeah.

**Interviewer** 27:37  
Yeah.  
And it was.  
Was that obstetrician that you saw at 36 weeks? Who gave you the information about paroxetine?

**Participant** 27:48  
Yeah.  
But I've been. I've had two appointments prior to that and nothing was ever mentioned. So yeah.

**Interviewer** 27:58  
With a medic at the hospital?

**Participant**: Yeah  
**Interviewer**: OK.  
So and then just to confirm.  
You weren't seen by a secondary care mental health team.

**Participant**: No  
**Interviewer**: great.  
Is there actually the end comes to the end of my questions really. It's been really helpful to hear your insight. Is there anything else that you sort of had in mind that you'd like to you'd like to have this opportunity to say and be recorded given your recent experience?

**Participant** 28:44  
No, I think I think that kind of covers the main bit from the mental health point of view and it it's I did there was what? Yeah, actually there was one instance where. So I actually ended up self discharging.  
Six hours before the 72 hour thing because I just wanted to go home.  
And.  
When I went to, I went to a shower which was behind the nurses station, the midwife station, and I heard.  
The midwife on the phone talking to the consultant because I was right behind and they were saying stuff like, oh, well, we don't know what a mental health like is like. We don't know if she's unstable. It wasn't nice for me to hear them talking about me in that way and then kind of that lost my trust even more from everything. So that kind of made my decision of that I was going to be better at home kind of thing. So.  
I think people just need to be aware that if people are in the bathroom behind the station, they can hear everything.

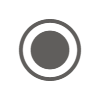
**Interviewer** 29:49  
Yeah, that's a really tough experience.

**Participant** 29:52  
Yeah. So at that point, I was like, I'm gonna get more support at home, kind of, but yeah.

**Interviewer** 29:59  
Yeah. OK.  
Yeah, that's a really tough experience, OK.  
I'll just stop the recording now.  
I stopped that. Yeah.

**Participant** 30:21  
I'm shocked he slept through the whole of this, but it's worked out well.

**Interviewer** 30:24  
Oh, well done, him. It's not pretty good.

 **Interviewer** stopped transcription