S2-3

Bonding Disorders and Postpartum Depression: A Representative Study of a Community Sample
Daniela Noe, Corinne Reck
University of Heidelberg, Germany

Bonding describes the relationship a mother develops with her child. This connection comprises the feelings and the special behaviour of a mother towards her own child: the so called “maternal bonding”. This presentation discusses the topic Bonding and its inhibition caused by depression during the postpartum period. Comparison was made between the occurrence of a depressive postpartum disorder (Minor, Major Depression and Dysthymia) and a disturbed maternal bonding with the infant during the two weeks following birth. Furthermore, the significance of the severity of depression influencing bonding was examined. From December 2003 to May 2005, 1028 women were recruited for the study, all of whom gave birth in two clinics in Darmstadt and in four clinics in Heidelberg. Recruitment was carried out bi-weekly from various clinics, thereby creating a random sampling of women giving birth in these clinics. Whenever clinically relevant scores appeared during screening the Structured Clinical Interview for DSM-IV-criteria (SCID) was administered. Data from a total of 829 women regarding bonding—behaviour was available. Bonding was examined using the Postpartum Bonding Inventory (PBI). In this study, representative for Germany, a significant relation between disturbed motherly bonding and postpartum depression was proven. Clinical implication and intervention strategies will be discussed.

S2-4

Bonding Disorder among Postnatal Mothers—Three Cases “Without” Postnatal Depression
Keiko Yoshida
Department of Neuropsychiatry, Kyushu University Hospital

Maternal negative feeling and attitudes toward their babies and infants are observed among mothers with and without postnatal depression. Brockington proposed a clinical identity as “bonding disorder” for this.

We have set up the psychiatric service with obstetric staff for women through late pregnancy to postnatal months, where we assess maternal mental state, mother-infant relationship, infant development, and give treatment if necessary. Through our clinical service we have experienced three cases of “bonding disorder” based on Brockington’s criteria.

All three mothers were married. Case one is a mother who was reluctant to carry out baby care shortly after delivery. The married couple abruptly asked a child guidance centre to take care of their baby. The second case tried to kill the foetus, and after delivery she did not even touch her baby. The third case who was the mother of two children showed anger only to her first child and abused the boy. None of them suffered from postnatal depression. The etiology and intervention for these cases will be discussed.