

Prenatal Care Visits and Associated Costs for Treatment-seeking Women with Depressive Disorder

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Abstract

OBJECTIVES: This study aimed to determine whether a history of depressive disorders is associated with use and costs of prenatal care among pregnant women in Taiwan. **METHODS:** Participants were mothers with singleton births between 2004 and 2006 (N=23,290), some of whom (N=614) had received care for depression in the year before conception but not during pregnancy. **RESULTS:** The mean number of prenatal care visits was 8.50 and associated costs were \$NT 51,187 for pregnant women with a history of depressive disorders and 9.17 visits and \$NT 27,998, respectively, for those without such a history. After adjustment for age, monthly income, medical conditions, and obstetric complications, mothers with a history of depression were significantly less likely to receive prenatal care (relative risk=.94, 95% confidence interval=.92-.97, $p<.001$). However, women with a history of depression had \$NT 22,494 higher prenatal care costs than mothers without a history of depression. **CONCLUSIONS:** Pregnant women with a history of depressive disorders had fewer prenatal care visits but higher prenatal care costs. Physicians should consider screening to identify pregnant women with a history of depressive disorders.