

BREASTFEEDING AND POSTNATAL DEPRESSION

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CURRENT BREASTFEEDING ASSOCIATED WITH LOWER POSTNATAL DEPRESSIVE SYMPTOMS

INTRODUCTION

- Breastfeeding is recommended during the first year of life due to benefits for both mother and infant¹.
- Maternal mental health may influence breastfeeding initiation and continuation².
- Postnatal depression affects a significant portion of new mothers and may impact feeding decisions and relationship dynamics².
- This study examines how depressive symptoms and relationship satisfaction are associated with breastfeeding status.

METHODS

- Mothers who gave birth within the past year completed self report questionnaires.
- Measures assessed depressive symptoms, relationship satisfaction, breastfeeding status, and intended breastfeeding duration.
- Mothers who gave birth within the past year (N = 96) completed self report questionnaires.

Measures

- Edinburgh Postnatal Depression Scale (EPDS) assessed depressive symptoms.
- Revised Dyadic Adjustment Scale (RDAS) assessed relationship satisfaction.

Missing Data

- 11 participants missing EPDS responses.
- 14 participants missing RDAS responses.

ANALYSIS

Statistical Analysis

- Independent sample t tests were used to compare mean EPDS and RDAS scores by current breastfeeding status.
- Independent sample t tests were also used to compare EPDS and RDAS scores by ethnicity.
- One way ANOVA examined differences in depressive symptoms and relationship satisfaction across breastfeeding intention groups.
- Linear regression was performed to control for weeks since birth.
- Statistical significance was defined as $p < 0.05$.

RESULTS

Breastfeeding Status

- Among mothers who reported ever breastfeeding (N = 90), those currently breastfeeding had lower mean EPDS scores (7.9) compared to those not currently breastfeeding (11.2).
- This difference was statistically significant ($p = 0.05$).
- RDAS scores did not significantly differ between groups (51.5 vs 50.5, $p = 0.74$).
- Results remained consistent after controlling for weeks since birth..

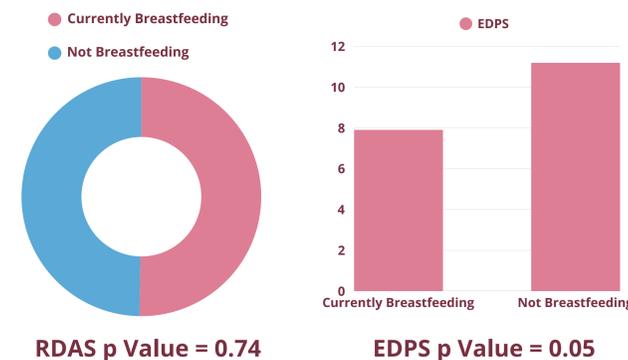
Ethnicity Differences

- Among participants who reported ethnicity (N = 96), Hispanic mothers reported higher mean EPDS scores (10.4) compared to non Hispanic mothers (7.9).
- This difference did not reach statistical significance ($p = 0.08$).
- RDAS scores did not significantly differ by ethnicity ($p = 0.30$).

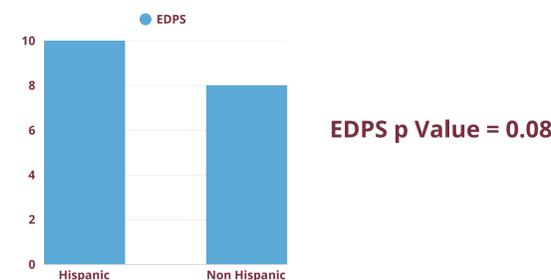
Table 1. Demographic characteristics (n = 96)

Variable	M	Range
Maternal age	30	18 – 43
Baby age in weeks	12.4	1 – 63
EPDS	8.4	0 – 23
RDAS	51.6	11 – 69
Variable	N	%
Breastfeeding		
Yes	75	83.30%
No	15	16.70%
Race		
White	65	70.70%
Black	21	22.80%
Other	6	6.50%
Hispanic, yes	18	18.80%
Maternity Care Access		
Full	78	80.40%
Desert/Low	19	19.60%
Rural, yes	19	19.60%
Poverty, yes	18	19.10%

MEAN EPDS AND RDAS SCORES BY CURRENT BREASTFEEDING STATUS



MEAN EPDS SCORES BY ETHNICITY



LIMITATIONS

- Data were self reported, which may introduce recall or reporting bias.
- Sample size was relatively small and from one geographic area, which may limit generalizability.
- Missing EPDS and RDAS responses may have influenced results.
- Breastfeeding and depression may have a bidirectional relationship that cannot be fully examined in this study.

REFERENCES

- FISHER, J. O., BIRCH, L. L., SMICKLAS-WRIGHT, H., & PICCIANO, M. F. (2000). BREAST-FEEDING THROUGH THE FIRST YEAR PREDICTS MATERNAL CONTROL IN FEEDING AND SUBSEQUENT TODDLER ENERGY INTAKES. JOURNAL OF THE AMERICAN DIETETIC ASSOCIATION, 100(6), 641–646. [HTTPS://DOI.ORG/10.1016/S0002-8223\(00\)00190-5](https://doi.org/10.1016/S0002-8223(00)00190-5)
- SAHAROV, R., POTDUKHE, A., WANJARI, M., & TAKSANDE, A. B. (2023). POSTPARTUM DEPRESSION AND MATERNAL CARE: EXPLORING THE COMPLEX EFFECTS ON MOTHERS AND INFANTS. CUREUS, 15(7), E41381. [HTTPS://DOI.ORG/10.7759/CUREUS.41381](https://doi.org/10.7759/CUREUS.41381)

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DISCUSSION

Breastfeeding and Depressive Symptoms

- Mothers with lower EPDS scores were more likely to be currently breastfeeding.
- This may reflect emotional bonding, increased maternal confidence, or greater perceived support.
- The relationship may be bidirectional, as higher depressive symptoms may make breastfeeding more difficult to sustain.

Relationship Satisfaction

- RDAS scores were not significantly associated with breastfeeding status or intention.
- Depressive symptoms may play a more direct role in breastfeeding continuation in this sample.

Ethnic Differences

- Hispanic mothers showed a trend toward higher depressive symptoms.
- Although not statistically significant, this finding highlights the importance of culturally responsive maternal mental health support.
- Larger studies are needed to further examine potential disparities.

CONCLUSION

Current breastfeeding was associated with lower depressive symptoms, though causality cannot be determined. Relationship satisfaction was not significantly related to breastfeeding outcomes. These findings highlight the complex relationship between maternal mental health and breastfeeding and the need for further research on potential disparities.

