NEW YORK (Reuters Health) - A type of therapy developed to treat victims of military trauma can help ease distress and depression among mothers of babies born prematurely, a new study finds.

"Having a premature birth is an extremely traumatic event for the parents of that child and it's really important that their emotional issues be recognized and addressed in some format or another," said lead author Dr. Richard Shaw of the Stanford University School of Medicine in Palo Alto, California.

"It's possible to offer parents of premature babies a very short, cost-effective but helpful intervention that can really reduce their emotional distress," he told Reuters Health.

Up to 40 percent of mothers of premature infants have symptoms of post-traumatic stress (PTSD), which can have long-term consequences for both mother and child, Shaw said. For example, parents of preemies may be overly protective and so reluctant to set limits that the child can wind up with behavioral problems, according to Shaw.

The new intervention included elements of the COPE (Creating Opportunities for Parent Empowerment) neonatal intensive care unit (NICU) program, which has been shown in clinical trials to ease parents' anxiety, depression, and stress, while building their confidence and parenting skills.
Shaw and his team added trauma-focused cognitive behavioral therapy techniques to the COPE elements. The new program consisted of six sessions.

The researchers randomly assigned 105 mothers of babies born at 25 to 34 weeks' gestation to receive the intervention, or enrolled them in an active control group, which consisted of parent education and training on how to negotiate the NICU environment.

Trauma-focused elements of the program included having a mother describe in detail her experience of having a premature infant and being in the NICU. Her account is tape-recorded and transcribed, and then at a subsequent session the mother reads the transcript to the therapist.

"The work with trauma-focused cognitive behavioral therapy suggests that if you're able to go through the story of your trauma with a therapist and process the very highly emotional parts of the story, that actually helps put the story into context and helps diminish symptoms of PTSD," Shaw said.

The COPE-based elements included helping mothers to touch and hold their infant when he or she is lying in the incubator, and helping to change the mother's view of her infant as being very vulnerable. Mothers were also taught how to see when their baby is stressed, and how to interact with their baby in a healthy way.

Mothers in the intervention group had a significant reduction in symptoms of trauma and depression, and the mothers who reported the most stress at the study's outset showed the most benefit, Shaw's group reports in the journal Pediatrics.

PTSD symptoms, measured on a scale from 0 to 136, with higher scores representing worse symptoms, dropped by about 13 points for the women in the intervention group, versus a 5.5 point drop for the women in the control group. The women had started out with an average score of about 50.

Depression symptoms measured on a scale of 0 to 63 dropped by 9 points for the intervention group and 5 points for the control group, from an initial score of about 20.

Anxiety decreased by the same amount for both the mothers in the intervention group and those in the control group.

While the current study did not include fathers, the program could easily be expanded to include them, Shaw said.

"A lot of fathers expressed interest in being involved in the study, and a lot of mothers told us they felt their partners would benefit from the interventions," he added. "The mothers themselves described it as being a very helpful intervention that they really enjoyed doing. They really thought it should be offered as a routine part of care."
Given that the program is manual-based, he added, it would be easy and inexpensive to offer it more broadly.

"Manualized interventions are great because they can be scaled a lot easier," Dr. Bernadette Melnyk, a professor of pediatrics and psychiatry at Ohio State's College of Medicine, told Reuters Health.

Melnyk developed the COPE program, which is currently being offered to parents at 20 NICUs across the United States. She did not take part in the new study.

"Moms who have even higher stress scores benefited from the intervention even more, so this trauma-focused piece might be a good addition to COPE for the very most vulnerable parents of preemies," she said.

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