



Leaflet

APrON's Team Lead, Dr. Bonnie Kaplan, Steps Toward Retirement



Dear APrON Participants and Colleagues,

My work on APrON began in 2007, and it is with full confidence that I now share the reins with Dr. Nicole Letourneau this month. As we developed our ideas, applied and succeeded in attracting funds, and then found such a wonderful reception from Alberta's pregnant women, these six years could be described in many ways. I could say that my work with APrON has

been an honour, a thrill, a challenge, and a cause for fatigue --- all are true! But the fact that I am staying on the team as an APrON Co-Lead should tell you that the honour and challenge far exceed the fatigue. I know that we have established something worthwhile, all of us together. I often describe APrON as an Alberta treasure. I hope everyone will continue, as I will, to learn as much as possible about nutrition, pregnancy, gestational stress, and parenting, so that we can contribute to the future health of Alberta's families. A big thank you to all APrON participants, colleagues, and trainees for all your contributions over these past several years!

Bonnie J. Kaplan, PhD

May 6-12 was Mental Health Awareness week!

The Canadian Mental Health Association is running it's 62nd annual Mental Health Week from May 6-12, 2013. This year, the focus is on youth mental health (age 15-24 years). Visit www.mentalhealthweek.ca to learn about ways that you can help bring awareness to mental health and mental illness.

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Welcome Dr. Nicole Letourneau - APrON's New Co-Lead



In 1991, Nicole Letourneau became a Registered Nurse. She completed her PhD in nursing from the University of Alberta in 1998 before moving on to finish post-doctoral training in social support interventions for families. Much of Nicole's past research has focused on parenting and child development. Letourneau joined the APrON team three years ago as a Co-Investigator and is now a Professor in the Faculty of Nursing at the University of Calgary. Letourneau joins Drs. Catherine Field and Deborah Dewey who have been co-leads since APrON began.

When asked about what motivates her research, Letourneau replied, "I have always been interested in parenting and child development". When she went into public health

nursing, it was very much focused on family support, and this is something Letourneau thinks is very important.

A mother herself, Letourneau knows how important our research is. "APrON really plans to connect government decision makers with the facts they need to improve the lives of Alberta's families," she said, stressing the need for our government to truly value how precious a resource our children are. "If research does not set out to make an impact, I'm not interested in it," she added.

School readiness, lowering children's need for economically and socially costly remedial support, improving family functioning: these are key factors that Letourneau feels need to be more valued by both the public and government alike. She quotes John Bowlby who said, "If a society values its children, it must cherish their parents."

Looking back to when Letourneau first joined APrON, she had first been drawn by the focus on women's and family health. She is also interested in how mothers relate to their babies, a behaviour that may affect child development.

Becoming a new APrON Co-Lead is, to Letourneau, a great opportunity. "I feel honoured and humbled by it, especially helping to lead a team with so much expertise," she said. "With such a diverse background, ranging from nutrition, child development, and mental health to cutting edge epigenetics and metabolomics, the APrON team will be able to explore and understand pathways to healthy child development from many angles."

"I really want to make sure that all the expertise of the team is being used. I personally want to focus on the parenting component. It's a hard concept to study, and how parent-child relationships affect human development in all the areas that APrON will explore, has just not been done." She added that APrON is a treasure trove—an opportunity to use evidence to better the lives of children and families. To change policy, she stated that you really have to have a full body of persuasive data. She believes that APrON will offer just that opportunity.

Welcome Dr. Nicole Letourneau! We look forward to your continued leadership and support!

RESULTS

This section is an opportunity for us to showcase some exciting APrON results. This time, we would like to present the results of a project done by PhD student, Brenda Leung, from the University of Calgary.

Study Title: Prenatal Micronutrient Supplementation & Postpartum Depressive Symptoms in a Pregnancy Cohort

What did we want to know?

- 1) Is taking micronutrient supplements, like pre -natal multivitamins, while pregnant related to a lower risk of postpartum depression?
- 2) What other factors may protect against or worsen the risk for symptoms of postpartum depression?



What did we do?

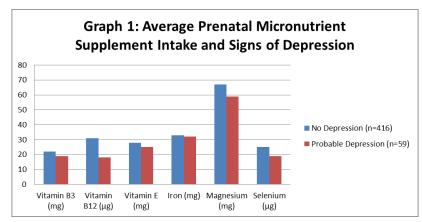
- We looked at data from the first 600 participants of the APrON study. All data were collected in each trimester of pregnancy and 12 weeks after baby was born.
- We used the Edinburgh Postnatal Depression Scale (EPDS) to look at symptoms of depression and a Supplement Intake Questionnaire (SIQ) to understand the types and amounts of supplements women were taking while pregnant.
- We gathered information on demographic background (for example, mother's education, ethnicity, etc.) and risk factors such as stressful life events and social support.

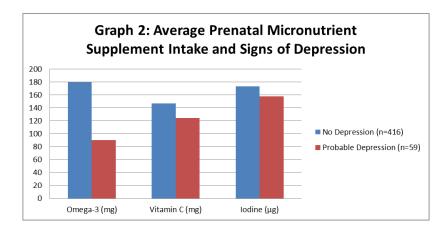
What did we find?

- 12% of women had "at least probable minor depression" 3 months after baby was born. This is what we would expect in a community sample.
- Almost all women (99%) took some type of nutrient supplement (for example, a prenatal multivitamin) when they were pregnant.

RESULTS (CONTINUED)

- On average, women who showed signs of depression 3 months after baby was born took less nutrients from supplements while they were pregnant compared to women who did not show signs of depression (examples of nutrients were
 - vitamins C, E, B3 and B12, iron, iodine, magnesium, selenium and omega-3). See Graphs 1 &2
- Taking a supplement with 10µg of selenium during pregnancy lowered the risk of showing signs of depression after delivery by 25%. Nuts, red meats, fish, grains, mushrooms and eggs are all good sources of selenium in the diet.
- Every unit of social support, such as having someone to





talk to, count on, or having someone to love and care for you, also lowered the risk of showing signs of depression after delivery by 15%.

Take home message: In general, women who showed signs of depression after delivery took fewer prenatal supplements than women without postpartum depressive symptoms. Having social support and taking a nutrient supplement during pregnancy, in particular selenium, were shown to be protective against the risk of developing depressive symptoms after delivery. More research is needed to look at the effects of dietary supplementation in pregnancy, with special attention to selenium, to better understand how it might affect the risk of developing postpartum depression.

Authors: Brenda MY Leung, Bonnie J Kaplan, Catherine Field, Suzanne Tough, Misha Eliasziw, Mariel Fajer Gomez, Linda McCargar, Lisa Gagnon, and the APrON Study Team

Interested in Joining the APrON Participant Advisory Committee?

The APrON Participant Advisory Committee (PAC) is very important to the entire APrON team and APrON families because participant feedback is the best way for us to learn how we might make the APrON experience more convenient and rewarding for all participants.



The first APrON PAC focus group was a great success, and we are excited to announce that the second focus group meeting will take place at the Alberta Children's Hospital on *Thursday*, *June 13*, *from 12:30 PM-2:00 PM*. If you are interested in attending in person or over the phone, we'd love to hear from you!

Members of the APrON PAC help us in many ways—they attend focus groups when they are able to and give feedback on written documents (like this one!) by email if they wish to. By signing up as a member of the PAC, you will be able to pick and choose which activities you wish to be a part of.

If you would like to sign up as a member of the PAC (whether it be to attend the June 13 focus group or to receive email notifications about other chances to provide feedback), or if you'd simply like to learn more about the APrON Participant Advisory Committee, please contact Julia at julia.poole@albertahealthservices.ca. We would love to hear from you!



Wishing all APrON parents a Happy Mother's and Happy Father's Day!

Sunday, May 12th was Mother's Day and Sunday, June 16th is Father's Day. We hope you get treated well on your special day!



Stay in Touch - Help Keep Our Files up to Date!

Because APrON is a long term study, staying in touch with our participants is a key part of our work. When we lose touch with people we lose some of our ability to answer important health questions. If you move, change your phone number or get a new email address, please take a moment to inform us of these changes. Keep in mind that we can send you questionnaires and keep you up-to-date with participant newsletters no matter where you live, even if you are outside of Alberta or Canada.





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If you have any suggestions, questions or comments, please send them in. We truly appreciate your feedback!











