

## Special Issue

# Pregnancy and Bipolar Disorder

### Message from the Guest Editor

Bipolar disorder in pregnancy may be difficult to treat. One dilemma is whether women should continue medication throughout pregnancy, and maybe accept a minor risk to harm their unborn child, or lower the dose or discontinue medication and increase the risk of recurrence, which can lead to maternal morbidity, thereby endangering themselves and their fetus. What is the best procedure when treating a pregnant bipolar woman? How should therapeutic drug monitoring be done? Who is responsible? What are the potential obstetric, fetal, and neonatal risks associated with pharmacotherapy? Is there any long-term side-effect on the fetus? Is electroconvulsive treatment safe in pregnancy? The choice of medication may be influenced by the woman's choice of breastfeeding her child. What should we recommend? How do we treat sleeping problems in pregnancy and during the postpartum period? Are there any risk factors of relapse that must be taken care of during pregnancy and postpartum? How should other family members be involved? When should bipolarity be considered during pregnancy? What is the risk of transferring a bipolar disorder to the fetus?

### Guest Editor

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