

What you need to know about

Postpartum Depression

What are postpartum mood disorders and how prevalent are they?

Postpartum mood disorders encompass a wide range of conditions which differ in scope, symptoms, duration, and severity ranging from the well-known “baby or maternity blues”, which affects an estimated 85% of women, to the most severe form, postpartum psychosis, which affects an estimated 0.1% to 0.2% of women.

The “baby or maternity blues”

They typically begin on the third or fourth day after delivery and may include such symptoms as tearfulness, anxiety, irritability, insomnia, poor concentration, fearfulness, and emotional instability. This condition is often transient and disappears by about one to two weeks. For a few women, however, the condition may last longer and become a more serious mood or anxiety disorder.

Postpartum Depression (major depressive disorder with postpartum onset)

This condition is estimated to affect approximately 10 to 15% of women and often begins within two weeks to six months after delivery. In addition to some of the classic symptoms of depression or anxiety, women might also exhibit extreme irritability, panic attacks, obsessive-compulsive symptoms, and intrusive thoughts about harming the baby. This condition is more common in women who have previously experienced depression but many women experience first episodes after pregnancy. This condition responds well to treatment.

The most serious of the postpartum disorders, this condition affects about 1 to 2 in 1,000 new mothers. Onset is rapid, sudden, and very dramatic, often within days to weeks of delivery. It can be characterized by psychotic depression, mania, hallucinations (hearing or

seeing things that other people cannot), delusions (fixed, false beliefs), extreme confusion and suicidal thoughts. It is a serious condition that requires rapid treatment for the safety of the mother and her baby. This condition is more common in women with bipolar disorder.

What are the risk factors/triggers?

Postpartum mood disorders can develop after the birth of any child. Women may be a greater risk of developing a postpartum mood disorder if:

- They have a history of depression
- They have had postpartum depression following a previous pregnancy
- They have experienced stressful events during the previous year
- They have a weak support system
- Women living with bipolar disorder are at greater risk of developing postpartum psychosis.

What are the symptoms?

- Feeling restless or slowed down
- Feeling sad most of the day
- Loss of interest or pleasure in all or most things, including the baby
- Extreme irritability, frustration, or anger
- Feelings of hopelessness
- Trouble sleeping even when the baby is sleeping
- Loss of appetite or eating too much
- Difficulty thinking, concentrating or making decisions
- Crying for no reason
- Overwhelming feelings of guilt, worthlessness or inadequacy
- Scary thoughts about harming your baby
- Anxiety or panic attacks
- No desire to be with friends or family
- Excessive worrying about your baby’s health
- Suicidal thoughts or frequent thoughts of death
- Postpartum Psychosis:
- Hallucinations and delusions
- Paranoia
- Confusion and disorientation
- Attempts to harm yourself or the baby

If you are experiencing some of these symptoms, and they have lasted for more than two weeks, you may be experiencing a postpartum mood disorder and should seek prompt professional help.

What do I need to tell my doctor?

- Write down any symptoms you've had, and for how long
- Write down key personal information
- Make a list of all medications you are taking, and any previous mood disorders you have had
- Write down questions to ask your doctor
- Take a family member or friend along

Discuss all of your symptoms with your doctor and describe how they are affecting your life (e.g. inability to care for the baby). Your doctor can suggest or provide appropriate therapy. Make sure to discuss all of the available treatments and medications and their benefits and side effects before making any decisions.

What are the treatment options?

There are a variety of very effective treatments for postpartum mood disorders including:

- Psychotherapy (individual or family)
- Participation in postpartum support groups
- Antidepressant medications

The most important step to take is to become more knowledgeable about PPD and seek help.

What are the things I need to do to get well?

- **Stick to your treatment plan.** Don't skip psychotherapy sessions. Even if you're feeling well, continue to take medication as prescribed.
- **Set realistic expectations.** Be kind to yourself. Don't pressure yourself to do everything. Ask for help when you need it.

- **Learn about postpartum mood disorders.** Empower yourself by learning about your condition.
- **Pay attention to the warning signs.** Find out what may make your depression worse. Make a plan so that you know what to do if your symptoms get worse. Contact your doctor or therapist if you notice any changes. Ask friends or family to watch out for warning signs.
- **Get exercise.** Physical activity may help reduce symptoms.
- **Maintain an adequate diet.** The Canada Food Guide is a useful reference in helping you choose how to eat well.
- **Avoid alcohol and illicit drugs.** It may seem like they lessen your problems, but in the long run, they generally worsen symptoms and make the depression harder to treat.
- **Get adequate sleep.** This is especially important. Talk to your doctor if you are having trouble sleeping.

Where can I learn more?

Postpartum Progress
www.postpartumprogress.com

Postpartum Support International
(information for moms, their partners and link to chat room)
www.postpartum.net

Online Postpartum Depression Support Group
www.ppdsupportpage.com

Pacific Postpartum Support Society
www.postpartum.org

Postpartum Depression
www.psycom.net/depression.central.post-partum.html



Take a load off
your mind.
Get the checkup.

It's a simple on-line test, and it can be the best thing you do all day. Just a few questions can help tell you whether your moody moments are okay, or if a doctor should know about them. Go to:

Checkupfromtheneckup.us



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