



Mood Disorders During and After Pregnancy

Postpartum depression (also called PPD) is a kind of depression that some women get after having a baby. PPD is strong feelings of sadness that last for a long time. These feelings can make it hard for you to take care of your baby.

About 1 out of every 8 women has postpartum depression after giving birth. PPD is the most common complication for women who have just had a baby.

PPD can happen any time after childbirth. It often starts within 1 to 3 weeks of having a baby. It's a medical condition that needs treatment to get better.

Here's what you need to know about PPD:

- It's not your fault. You didn't do anything to cause PPD. It doesn't make you a bad person or a bad mother.
- You are not alone. Many women have PPD. In fact, it's the most common problem for new moms.
- You can get help, and your depression can go away.

Talk to your health care provider if you think you have PPD. There are lots of treatments that can help you feel better to let you enjoy being a mom.

Is PPD the same as the baby blues?

No. PPD lasts longer and is more serious than baby blues. Baby blues are feelings of sadness you may have 3 to 5 days after having a baby. You may have trouble sleeping, be moody or cranky, and cry a lot. These feelings go away about 10 days after your baby's birth. If they don't, tell your provider. She can check to see if you may have PPD.

What causes PPD?

We're not exactly sure what causes PPD. It can happen to any woman after having a baby.

Changing hormone levels after pregnancy may lead to PPD. Hormones are chemicals in your body. Some help control your emotions and mood. During pregnancy, your body has higher levels of the hormones estrogen and progesterone. But in the first 24 hours after giving birth, these hormones quickly go back to their normal levels. This rapid drop in hormone levels may lead to PPD.

Low levels of thyroid hormones also may lead to depression. The thyroid is a gland in your neck that helps your body use and store energy from food.

Here are some things that may make you more likely than other women to have PPD:

- You're younger than 20.
- You've had PPD, major depression or other mood disorders in the past. You may have been treated for these conditions. Or you may have had signs of them, but never saw a health care provider for treatment.
- You have a family history of depression. This means that one or more people in your family has had depression.
- You've recently had stressful events in your life.

Stressful life events can include:

- A difficult pregnancy or childbirth, or your baby was born with a health problem
- The death of a loved one
- Illness in you or a loved one
- Problems with your partner, including being abused by your partner
- Little support from family or friends
- Money problems
- An unplanned or unwanted pregnancy
- Trouble adjusting to life as a mom
- Smoking, drinking alcohol or using street drugs

Having negative thoughts and feelings about being a mom also can lead to PPD. Being a new mom can be overwhelming. Tell your health care provider if you:

- Have doubts that you can be a good mom
- Put too much pressure on yourself to be a perfect mom
- Feel that you're no longer the person you were before you had your baby
- Feel that you're less attractive after having your baby
- Have no free time for yourself
- Aren't sleeping well or getting enough sleep

Don't be afraid to talk to your provider. She's there to help you and your baby be healthy.

What are the signs of PPD?

You may have PPD if you have five or more signs of PPD that last longer than 2 weeks. These are the signs to look for:

Changes in your feelings:

- Feeling depressed most of the day every day
- Feeling shame, guilt or like a failure
- Feeling panicky or scared a lot of the time
- Having severe mood swings

Changes in your everyday life:

- Having little interest in things you normally like to do
- Feeling tired all the time
- Eating a lot more or a lot less than is normal for you
- Gaining or losing weight
- Having trouble sleeping or sleeping too much
- Having trouble concentrating or making decisions

Changes in how you think about yourself or your baby:

- Having trouble bonding with your baby
- Thinking about hurting yourself or your baby
- Thinking about killing yourself

If you think you may have PPD, call your health care provider right away. There are things you and your provider can do to help you feel better. If you're worried about hurting yourself or your baby, call emergency services at 911.

Can PPD affect your baby?

Yes. PPD can make it hard for you to take care of your baby. If you have PPD, your baby may:

- Have problems bonding with you
- Cry a lot
- Be slow in learning to talk
- Have behavior problems

If you see these signs in your baby, tell your pediatrician. Getting treatment early can help both you and your baby.

How is PPD treated?

If you think you may have PPD, see a health care provider right away. Your provider can be the person who delivered your baby, like an obstetrician, family practice doctor or certified nurse-midwife. Or she could be your primary care provider or your baby's provider. Or she can be a mental health professional, like a social worker, psychologist, psychiatrist or psychiatric nurse practitioner.

To find out if you have PPD, your health care provider asks you questions about how you're feeling. He wants to know if your feelings are causing problems in how you care for yourself and your baby. He may ask you to fill out a form called a depression screening questionnaire. Your answers on the form can help him find out if you have PPD.

Your provider may do tests to see if you have other health problems that may lead to PPD. For example, he may check your thyroid hormones. Low levels of thyroid hormones may lead to PPD.

The sooner you see your provider about PPD, the better. You can get started on treatment to make you feel better so you can take good care of yourself and your baby. These are treatments your provider may suggest:

- **Counseling.** This also is called therapy. It's when you talk about your feelings and concerns with a mental health professional. She helps you understand your feelings, solve problems and cope with things in your everyday life.
- **Support groups.** These are groups of people who meet together or go online to share their feelings and experiences about certain topics. Being part of a support group may help you feel better. Your provider can help you find a PPD support group near you or tell you about online groups.
- **Medicine.** PPD often is treated with medicine.

Medicines to treat PPD include:

- **Antidepressants.** These are medicines used to treat many kinds of depression, including PPD. Some have side effects, like having a dry mouth or gaining weight. And some are not safe to take if you're breastfeeding. Talk to your provider to find out about these medicines and decide if one is right for you.
- **Estrogen.** This hormone plays an important role in your menstrual cycle and pregnancy. During childbirth, the amount of estrogen in your body drops quickly. To help with PPD, your provider may suggest you wear an estrogen patch on your skin to replace the estrogen your body lost. If you are breastfeeding, check with your provider to see if the patch is safe for you to use. You can pass estrogen to your baby through breast milk.

If you're taking medicine for PPD:

- Don't stop taking any medicines for PPD without your provider's OK. It's important that you take all your medicine for as long as your provider prescribes it. Some medicines used to treat depression have side effects if you stop taking them too soon. Follow your provider's instructions about how to take your medicine.
- Some medicines used to treat PPD aren't safe for your baby if you're breastfeeding. Talk to your provider to make sure what you're taking is best for you and your baby.
- Some people use an herb called St. John's wort to treat depression. We don't know how safe this herb is for women with PPD. More research is needed. Until we know more about it, don't take St. John's wort for PPD.

Postpartum Anxiety & OCD

You may have **postpartum anxiety** or **postpartum OCD** if you have had a baby within the last 12 months and are experiencing *some* of these symptoms:

- Your thoughts are racing. You can't quiet your mind. You can't settle down. You can't relax.
- You feel like you have to be doing something at all times. Cleaning bottles. Cleaning baby clothes. Cleaning the house. Doing work. Entertaining the baby. Checking on the baby.
- You are worried. Really worried. All. The. Time. Am I doing this right? Will my husband come home from his trip? Will the baby wake up? Is the baby eating enough? Is there something wrong with my baby that I'm missing? No matter what anyone says to reassure you it doesn't help.
- You may be having disturbing thoughts. Thoughts that you've never had before. Scary thoughts that make you wonder whether you aren't the person you thought you were. They fly into your head unwanted and you know they aren't right, that this isn't the real you, but they terrify you and they won't go away. These thoughts may start with the words "What if ..."
- You are afraid to be alone with your baby because of scary thoughts or worries. You are also afraid of things in your house that could potentially cause harm, like kitchen knives or stairs, and you avoid them like the plague.
- You may feel the need to check things constantly. Did I lock the door? Did I lock the car? Did I turn off the oven? Is the baby breathing?
- You may be having physical symptoms like stomach cramps or headaches, shakiness or nausea. You might even have panic attacks.
- You feel like a captive animal, pacing back and forth in a cage. Restless. On edge.
- You can't eat. You have no appetite.
- You're having trouble sleeping. You are so, so tired, but you can't sleep.
- You feel a sense of dread, like something terrible is going to happen.
- You know something is wrong. You may not know you have a perinatal mood or anxiety disorder, but you know the way you are feeling is NOT right. You think you've "gone crazy".
- You are afraid that this is your new reality and that you've lost the "old you" forever.
- You are afraid that if you reach out for help people will judge you. Or that your baby will be taken away.

Now that you've gone through these lists are you thinking "How the heck does this lady know me? Is there a hidden camera in here?" Nope. What this should tell you is that you are not alone and you are not a freak and you are not highly unusual. If you are having these feelings and symptoms then it is possible you are experiencing common illnesses that 15 to 20% of new mothers have, and they are completely treatable. We're happy to be here to support you.

What can you do to help you feel better?

Here's what you can do to help the treatment from your provider work better:

Stay healthy and fit.

- Do something active every day. Go for a walk or get back to the gym.
- Eat healthy foods. These include fruits, vegetables, whole-grain breads and lean meats. Try to eat fewer sweets and salty snacks.
- Get as much rest as you can. Try to sleep when your baby sleeps.
- Don't drink alcohol. This includes beer, wine, wine coolers and liquor. Alcohol is a depressant, which means it can slow your body down and make you feel more depressed. It also can interact with the medicine you're taking for PPD. It's never a good idea to drink alcohol if you're breastfeeding. This is because you can pass alcohol to your baby through your breast milk.
- Don't take street drugs. These affect the way your body works and can cause problems with the medicine you're taking for PPD. You also can pass street drugs to your baby through breast milk.

Ask for and accept help.

- Keep in touch with people you care about and who care about you. Tell your partner, family and friends how you're feeling.
- Take time for yourself. Ask someone you trust to watch the baby so you can get out of the house. Visit a friend, get outside or do something you enjoy. Plan for some time alone with your partner.
- Let others help around the house. Ask your friends and family to watch the baby, help with housekeeping or go grocery shopping. Don't be afraid to tell them what you need.

Lower your stress.

- Do the things you liked to do before you had your baby. Listen to music, read a good book or take a class.
- Do the things that used to make you feel good about yourself before you got pregnant.
- Try not to make any major changes in your life right after having your baby. These include moving or changing jobs. Major changes can add stress to your life that you don't need right now.
- Talk to your boss about going back to work. Maybe you can work at home or part-time when you first go back to work