What You Should Know About Postpartum Depression

You’ve heard or read about celebrities who suffered with it. You’ve seen the stories on the evening news about women who harmed themselves and their babies because of it. But if you, a friend, or a loved one had postpartum depression (PPD), would you recognize it? And would you know how to get help?

The Level of the Problem

Every year, more than 500,000 women—about 13 of every 100 who give birth—experience the anxiety, hopelessness, desolation, and fatigue that accompany PPD during the first 3 to 12 months of their children’s lives. About half of them still have symptoms by their child’s first birthday.

It is normal to experience some mood swings or anxiety about becoming a mother; it happens to eight out of 10 new moms. Commonly termed “baby blues,” these problems begin within hours or days of the birth, come and go, and disappear by the time the baby is about 4 weeks old. Unlike PPD, the baby blues do not seriously interfere with taking care of the baby and usual activities.

Women with PPD have unpleasant feelings—sadness, loss, anger, and/or frustration—that last for weeks to months after birth and interfere with their ability to complete daily tasks. The symptoms persist throughout the day, every day or most days, for 2 weeks or more. If you or a loved one think you might have PPD, the following is a list of some of the symptoms:

- Strong feelings of sadness, anxiety, or irritability; crying for no reason
- Feeling unable to take care of yourself or your family
- Change in appetite—either no interest in food or overeating
- Loss of interest in appearance; not getting dressed, bathing, or combing hair
- Inability to fall asleep, waking up early (even if the baby isn’t crying), or sleeping too much
- Difficulty with concentrating, making decisions, and remembering
- Loss of pleasure in formerly enjoyable activities
- Lack of interest in, unjustified worries about, or fear of harming the new baby
- Feeling worthless and that your family would be better off without you; thoughts of self-harm or suicide.

With the exception of the specific negative feelings about the baby, PPD is similar to the illness of major depression. Since the number of women between the ages of 20 and 40 years who have major depression is the same as those who have PPD, researchers question whether PPD is a condition, or whether the stresses of new motherhood make the symptoms of depression appear at this time. However, if you are suffering from PPD, it doesn’t matter whether major depression and PPD are the same or different. What is important is getting help.

Identifying Postpartum Depression

Women with PPD have a variety of different symptoms. They may believe their feelings represent the baby blues, and that every new mother feels the same way. The may feel like they are “bad mothers,” and that they must hide these feelings so no one will know. Or they may feel so hopeless...
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that they have no energy to speak up or take any action at all.

It is important to recognize and treat PPD early for the benefit of both mother and baby. First, of course, it is essential to ease the mother's suffering and to prevent her from harming herself or her infant. A baby's first year is one of huge growth and development. If the mother is unable to interact with her baby, the child can miss the opportunity for bonding, and experience slower brain development.

Health care providers (doctors, nurse practitioners, midwives, and physician assistants) may be the first to identify PPD. Women are scheduled to return to their provider for a checkup about 6 weeks after the birth. The baby is often scheduled to see a pediatrician even sooner. It is important to keep these appointments, as they provide health care providers with the opportunity to assess the new mother's emotional, mental, and physical health.

Sometimes women with PPD don’t have the energy to make or keep appointments. Even if they do, they may not volunteer information about how they are feeling, and unfortunately, their health care providers may not ask. Friends and family members may be the first to notice symptoms of PPD and can offer help in a gentle and supportive manner.

Treating Postpartum Depression

Postpartum depression is a medical condition that is treatable with medication and/or counseling. Some health care providers treat PPD themselves; others refer patients to mental health professionals. Most antidepressant medications help PPD; for women who are breast-feeding, the health care provider should discuss the risks (possible unwanted effects) and benefits (good effects) of available medications. For women whose health insurance excludes mental health coverage, or women without insurance, many communities have public mental health facilities that are free of charge according to income. The Maternal Child Health Bureau (see Resources, below) can help you locate one. You can also find self-help information at the organizations found in the resource box.

In Conclusion

If you have any of the symptoms discussed above, act now. Call your health care provider for an appointment, and make it clear you need to be seen right away. If you don’t have the energy or the will to make the phone call, tell someone close to you that you need help. If you are even thinking of harming yourself or your baby, go to the emergency room or call 1-800-273-TALK (8255).

If your friend or relative is the one with symptoms, don’t be afraid to raise the subject, make the appointment, and accompany her there. Be supportive, not accusatory. You can say something like, “You seem really down, and I’m concerned about you. You might have postpartum depression. You don’t have to feel this way. Let me help you make an appointment with your health care provider, okay?” The sooner women with PPD get help, the sooner they will feel better.

Resources

- The National Women’s Health Information Center http://4women.gov/faq/postpartum.htm
- The March of Dimes http://www.marchofdimes.com/pnhec/188_15755.asp
- Maternal Child Health Bureau Hotline: (800) 311-2229 (BABY); (800) 504-7081 (Spanish) http://www.mchlibrary.info/KnowledgePaths/kp_postpartum.html
- American Academy of Family Physicians http://familydoctor.org/379.xml

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