

A Common Problem  
Too Serious to Ignore

# Postpartum Depression

By Christine Cardellino



**A** new baby usually brings exhilaration and joy to a family. Well, not so for L.M.\*, who felt fine the week after giving birth to her daughter, but soon after was overwhelmed by feelings of despair and desperation.

“I was tense and on edge, and had difficulty sleeping for more than two hours a night. I felt so isolated and was afraid to talk with my husband about the thoughts I was having and the emotions I was feeling,” L.M. recalls.

Following a visit to her OB/GYN, L.M. sought help from a psychologist, who diagnosed her with postpartum depression, a potentially serious illness that affects about one in 10 women. Frequently, the warning signs of postpartum depression go unrecognized and untreated because many women believe they are part of caring for a new baby.

“A woman should not feel ashamed to seek help if she feels she might be experiencing a mood disorder, either during pregnancy or in the weeks and months following delivery,” says Diana Barnes, Psy.D., MFT, director of the Center for Postpartum Health in Woodland Hills, CA. “There are a lot of myths associated with new motherhood. Women have been led to believe that it is supposed to be the happiest time in their life, but as many as four out of five women who give birth will experience some change in their mental health in the early weeks following the birth of their baby.”

Thanks to stars like Brooke Shields and Marie Osmond, who have bravely shared their personal battles with postpartum depression, we have learned there is hope for women who may be experiencing this serious and debilitating condition.

## Beyond the “Baby Blues”

Postpartum blues are very common, occurring in up to 80 percent of new mothers. Characterized by mild anxiety, tearfulness, fatigue and mood swings, postpartum blues—

“baby blues”—are normal reactions many mothers experience following childbirth. The onset of postpartum blues usually occurs three to five days after delivery, and should subside as hormonal levels begin to stabilize. Symptoms generally do not last for more than a few weeks.

“If a new mother’s symptoms continue beyond two weeks or begin to intensify within the first two weeks after childbirth, the problem may be more serious, and she should talk with her doctor, her pediatrician, or a therapist knowledgeable about perinatal mood disorders,” suggests Dr. Barnes. “It is also critical that women who know they are at risk (see “Causes and Risk Factors” on the next page) for postpartum depression be monitored by their physician during the early weeks. In fact, postpartum depression can occur at any time during the first year following childbirth.”

## Distinctive Symptoms

Symptoms of postpartum depression tend to mirror those of clinical depression; however, certain symptoms of postpartum depression can be unique, such as the inability to sleep despite exhaustion, a sense of disorientation, and, in some cases, a feeling of disconnection or emotional detachment from the infant. Women who have postpartum depression with obsessive-compulsive features may have specific fears, such as preoccupation with their child’s health or intrusive thoughts of harming the baby.

“Given the stressful demands of caring for a newborn, it is understandable that mothers may be more tired, irritable and anxious. But when a new mother is feeling overwhelmed, not sure she can cope, and experiences significant changes in appetite, sleep or mood, she should seek the help of a mental health professional,” says Dr. Barnes.

*\*Initials used for privacy.*

## Causes and Risk Factors

Although it's difficult to predict who will experience postpartum depression, experts have identified some factors that increase a woman's risk. Women with a personal or family history of bipolar disorder are at increased risk for postpartum psychosis, a condition that usually occurs in the first two or three weeks after giving birth. Symptoms, according to the National Mental Health Association, include delusions and hallucinations, frantic energy, refusal to eat, confusion, incoherence, memory loss, making irrational statements, paranoia and being preoccupied with trivial things.

Also, mothers who developed postpartum depression after a previous pregnancy are more likely to develop it again.

According to Diane Sanford, Ph.D., postpartum depression is not strictly hormonal.

"Many factors can bring on the condition, and when a brain is already chemically challenged, other pressures can lead to postpartum depression," explains Dr. Sanford, president of the Women's Health Partnership, a multidisciplinary group specializing in health services for pregnant and postpartum women in St. Louis, MO, and adjunct professor in the School of Public Health at St. Louis University. "Stressful situations that include marital tension, a complicated pregnancy or delivery, a lack of social support and the mother's age all play a major role in the onset of postpartum depression."

## A Treatable Condition

Some women keep their symptoms secret because they are embarrassed, ashamed or guilty about feeling depressed when they are supposed to be happy, or because they worry others will view them as an unfit parent. But, with proper diagnosis and treatment, mom and baby don't have to suffer.

"There is a myth that good moms should never ask for help," comments Dr. Barnes. "Even prior to delivery, a woman and her family should put together a strategic plan to help make life easier when baby arrives. This could mean support during the delivery, help around the house when baby comes home, or whatever the couple feels might be needed. This can help so much."

One of the most common treatments for postpartum depression is talk therapy. This involves speaking with a medical professional—a therapist, psychologist or social worker—to learn how to cope with postpartum changes and reduce the symptoms of depression. Support groups and phone support also may be effective.

Antidepressant medications may be used independently or in combination with talk therapy to relieve the symptoms of postpartum depression.

"My first choice is to try psychotherapy if the depression is not severe, and if that doesn't work, to try medications," advises Nada Stotland, M.D., professor of Psychiatry and Obstetrics and Gynecology at Rush Medical College in Chicago, and vice president of the American Psychiatric Association. "Postpartum depression is treated with the same types of antidepressants that are used for other types of depression. The best overall treatment is a combination of medication, psychotherapy and family support."

Dr. Stotland adds that if a mother is breastfeeding but needs to take an antidepressant, it is important to choose a medication that is least likely to get into the breast milk.

"Women who are breastfeeding should speak with their doctors about the side effects of taking antidepressant medicines. The risks of taking medicine have to be weighed against the risks of depression," she says. "Depression poses risks to the baby if a mom is depressed, so all options need to be addressed."

Another important part of a woman's treatment and recovery is involving her support system. Talking to her husband, partner, family and friends about how she is feeling can be very helpful—she may even want to join a support group. In addition, the woman should also try to rest as much as possible, only do as much as she can, and ask for help when she needs it. Being reassured that she is not alone goes a long way toward recovery.

## A Family Affair

Postpartum depression affects not just the mother who is struggling with symptoms, but also the entire family. It can affect a mother's ability to parent.

"She may lack energy, have trouble concentrating, be irritable, and not be able to meet her child's need for love and affection," says Dr. Sanford. "As a result, she may feel guilty and lose confidence in herself as a mother, which can worsen the depression."

Talk therapy with a psychologist and joining a support group helped L.M. overcome her struggle with postpartum depression. Her daughter is now 9 months old, and L.M. is savoring every moment with her active toddler.

"All children deserve the chance to have a healthy start in life, and all moms deserve the chance to enjoy their newborns. You don't have to suffer alone," she says.

If you or someone you know is experiencing symptoms of postpartum depression, contact your health care professional right away. ●

## WEB RESOURCES FOR MORE INFORMATION

**National Mental Health Association**  
[www.nmha.org](http://www.nmha.org)

**National Institute of Mental Health**  
[www.nimh.nih.gov](http://www.nimh.nih.gov)

**National Mental Health Information Center**  
[www.mentalhealth.org](http://www.mentalhealth.org)

**American Psychological Association**  
[www.apa.org](http://www.apa.org)

**Postpartum Education for Parents**  
[www.sbpep.org](http://www.sbpep.org)

**Depression After Delivery, Inc.**  
[www.depressionafterdelivery.com](http://www.depressionafterdelivery.com)