



POSTPARTUM DEPRESSION

Postpartum, or post-natal, depression is **different than “baby blues”** — and it is a more severe problem. Affecting **10% of new mothers**, it usually begins **2 to 8 weeks** after delivery (although it can begin up to a year later).

Postpartum Depression: How It’s Different

The difference between postpartum depression and the baby blues is that postpartum depression often affects a woman’s well-being and keeps her from functioning well for a longer period of time.

- Postpartum depression needs **immediate assessment and treatment** to prevent the many negative impacts on the child both short term and long term, including neglect, decreased developmental stimulation and subsequent delays, decreased interaction and poor attachment, etc.
- The presence of feelings or thoughts about neglecting or not wanting a baby — or feelings or thoughts about wanting to hurt a baby — needs **emergency care**.

If you suspect you have postpartum depression, talk to your partner, a family member, a member of your healthcare team, or a support group member, and get help. If necessary, your health professional may refer you to a specialist for treatment. The treatment is often managed by nurse practitioners specializing in pregnancy, postpartum care, and mental health.

- A **family history** of depression, hormonal changes, or emotional and physical stress may all play a part.
- **Symptoms** of postpartum depression may include:
 - Feeling restless or irritable
 - Feeling sad, hopeless, and overwhelmed
 - Crying a lot
 - Having no energy or motivation
 - Eating too little or too much
 - Sleeping too little or too much
 - Trouble focusing, remembering, or making decisions
 - Feeling worthless and guilty
 - Loss of interest or pleasure in activities
 - Withdrawal from friends and family
 - Having headaches, chest pains, heart palpitations (the heart beating fast and feeling like it is skipping beats), or hyperventilation (fast and shallow breathing)
 - Being afraid of hurting the baby or yourself, or having no interest in the baby

Managing Postpartum Depression

Postpartum depression needs to be **treated by a health professional**. Counseling, support groups, and medicines can help. For example:

- **Medication:** Many effective, well-tolerated antidepressant medications are safe for use during breastfeeding. Antidepressant medications are an essential part of treatment for women who are moderately to severely depressed.
- **Therapy:** This involves talking with a trained professional (psychologist, psychiatrist, clinical nurse, or social worker) on a short-term (12 to 20 weeks) or long-term basis and can take many forms. Two that are particularly effective for depression are Cognitive Behavioral Therapy, which targets negative thoughts and behaviors, and Interpersonal Therapy (IPT), which helps a person deal with changing roles and other stressors.
- **Alternative medicine, herbal remedies, and dietary supplements:** Scientific studies of these alternative forms of treatment have so far been short-term and not well controlled; in addition, dietary supplements are not regulated by the Food and Drug Administration. Be sure to tell your healthcare provider if you are taking an herbal or dietary supplement, as some of them may negatively interact with antidepressant medication or other medications you are taking. For more information, visit www.cfsan.fda.gov.

Postpartum Blues or “**Baby Blues**” tend to be temporary blue moods that last only part of some days.

Postpartum depression includes symptoms that occur every day for most or all of the day, and last two weeks or more.

Postpartum depression is not the same as “baby blues.” It needs to be treated by a health professional.

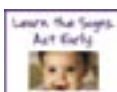
- **Support:** It is very important that you get support for yourself and communicate your needs to others. Ask for help!
 - If you are breastfeeding, **consider pumping** for the nighttime feedings and have your partner do at least some of the nighttime feedings so you can sleep.
 - **Friends and family members** often want to help during the postpartum period. Ask for help with housekeeping and preparing meals. Many people feel honored to be asked to care for the baby for short periods of time. Let them rock or walk the baby, give a feeding, or even change a diaper. Don't feel you have to do it all yourself.
- **Exercise:** Exercise helps treat depression. It reduces the depression hormone in the blood, provides perspective and a feeling of accomplishment, and enhances self-esteem. Even exercising as little as 10 minutes a day has been found to have beneficial effects! Try to do something physical for 20 to 30 minutes, three times a week or more. Walking is perhaps the most accessible form of exercise because it costs nothing and you can start it immediately — and you can even take your baby along in a carriage. Check with your healthcare provider about the type and length of exercise that's best for you.
- **Stress Management:** Stress can make depression worse, and a newborn adds new stresses to a woman's life. Learning to deal more effectively with stress may reduce depression. Identify the main sources of stress in your life, and find the most effective way to cope with them (such as avoiding them or using relaxation techniques). Don't forget to identify stressors that you are putting on yourself (trying to be "perfect," or doing too much), and reduce them by setting priorities and letting less-urgent tasks wait.
- **Promote sleep:** Inadequate sleep can make depression worse. Take care to keep your sleep cycle regular by going to bed and waking around the same time; also try relaxing bedtime rituals such as reading or a warm bath.
- **Dietary changes:** Eating a well-balanced diet and having regularly scheduled meals is important in reducing depression. The use of calcium and B vitamins (B6) may help; in addition, decreasing refined sugar, caffeine, alcohol, and chocolate may help promote better sleep.
- **Spend time with others:** Depressed women often withdraw from others because they mistakenly feel they would not be good company. Being with others is another way to gain perspective, which helps with the symptoms of depression. Consider joining a support group for new mothers or even a support group for others experiencing problems with depression.
- **Make time to do what you enjoy:** Depressed women sometimes temporarily lose the ability to enjoy themselves. Avoiding enjoyable activities only makes this worse. Continue doing pleasurable activities even if you don't feel like it. You will soon find that you have come to enjoy yourself again, at least for short periods.
- **Give yourself a break!** The initial demands on a new mother are both exciting and daunting. Feeling better takes time — but you *will* feel like yourself again, and feel better able to handle the everyday pressures as well as the demands of motherhood. In the meantime, remember to be realistic about the demands and expectations you place on yourself.

Support is Critical

If you are experiencing symptoms of depression, get support for yourself and communicate your needs to others. Ask for help!

➔ *For More Information . . .*

Postpartum Depression: www.womenshealth.gov/faq/postpartum.htm



The Centers for Disease Control and Prevention's
"Learn the Signs. Act Early." Campaign

