

POSTPARTUM DEPRESSION

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What is postpartum depression?

Becoming a new mom causes a great deal of change, and it's perfectly normal to be filled with joy at some moments and sad and irritable at others. Most women (approximately 80%) experience what is referred to as the "baby blues" soon after their baby is born. This condition causes changes in mood and temporary bouts of sadness that can start a few days after childbirth, and last anywhere from several days to two weeks. The "baby blues" are transitory and go away on their own.

Postpartum depression is a much more serious disorder that appears approximately three weeks after delivery. The symptoms can last from a few weeks to a few months, or even longer. Postpartum depression can appear as many as 12 months after giving birth, though in most cases, it starts sooner. It manifests as anxiety, insomnia, and depression.

Postpartum depression affects approximately 8% to 15% of new mothers, along with 5% of new fathers, who also have to adjust to major life changes.

Postpartum psychosis is a much less common condition that affects 0.1% of new mothers. Symptoms appear within hours or days after childbirth, and include but are not

limited to delusions, hallucinations, and losing contact with reality, which can increase the chances of a new mother killing herself or someone else – especially the newborn.

Warning signs

It takes time to adjust to being a new parent. It is completely normal to feel more exhausted and irritable during the first few days. It only becomes worrisome if these symptoms last more than two weeks and cause serious distress or have a significant impact on daily life.

The warning signs for postpartum depression can be very hard to detect, because in the beginning, they are hard to distinguish from the "baby blues". The key factors are the severity and duration of the symptoms. For example, severe irritability that lasts several days and that is not interrupted by calmer moments or a woman feeling so unhappy that she thinks about killing herself are signs that should cause concern.

Certain factors can put a woman at greater risk of suffering from postpartum depression. Here are the most significant factors:

- Having experienced depression in the past;

- A family history of mood disorders (the risk is even higher if there is a history of postpartum depression);
- Having experienced depression or anxiety during the pregnancy.

The risk of postpartum depression is also increased by stressful situations or events during pregnancy or after childbirth, including the following:

- Lack of social support;
- A difficult marriage or relationship;
- Being the victim of abuse or violence;
- A particularly difficult delivery;
- Feeling too much pressure to be a perfect parent;
- Unrealistic expectations with respect to the birth.

Symptoms

A new mother may feel sad and feel like crying a lot. She may also have digestive problems and appetite changes, problems sleeping that show up as insomnia, or trouble concentrating and carrying out daily activities. She may be listless and have no interest in activities that normally give her pleasure, or on the contrary, she may be very agitated. She may also feel very anxious, which can sometimes lead to panic attacks.



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In addition, she may feel irritable around the infant, not enjoy contact with the baby, and have trouble taking care of him. She may have disturbing thoughts about the baby and be afraid of hurting him. All of this can lead to strong feelings of guilt and inadequacy. A mother who is experiencing postpartum depression often feels exhausted, desperate, and overwhelmed by the situation. In more severe cases, she may obsess about death, suicide, and hurting or even killing the baby. Although these are irrational thoughts that do not actually lead to such behaviours in the vast majority of cases, they still cause a lot of stress.

Treatment

If left untreated, postpartum depression can have a significant impact on the psychological development of the baby, who is very sensitive to the quality of the interaction with his mother early in life. In addition, if postpartum depression is treated early, it will have less of an effect on the life of the new mother, and she will be able to recover more quickly.

Treatment options for postpartum depression include medication, psychotherapy, and social support.

In terms of medication, a doctor may prescribe antidepressants, which can often result in better sleep, increased appetite, more energy, more positive thoughts, less anxiety, and improved concentration. However, many new mothers are reluctant to take antidepressants, because doing so may mean that they cannot breastfeed if they so desire, among other things. In such cases, there are other options.

Psychotherapy is a good option. It can provide a mother with invaluable support and tools for adjusting to her new life. It can help her to work on the thoughts, emotions, and behaviours associated with her depression. The bond of trust with the psychotherapist is the most important factor. There are a variety of approaches that can help, but research supports the value of the cognitive-behavioural approach in particular. By working on the negative thought processes that feed the depression, it replaces them with a more accurate view of reality. This can help a woman to increase her self-esteem, restore her confidence in her ability to be a good mother, and find hope again. Cognitive-behavioural therapy also introduces behaviours that can be adopted gradually in order to make things easier.

Social support can also be a major factor in getting through postpartum depression. Getting help with the housework, having

someone else look after the baby from time to time in order to take a break, calling a help line, visiting organizations for new mothers, and taking part in online discussion forums and self-help groups are some other ways to break the isolation and lighten the load that new mothers feel.

Where to go for help

If you think you have postpartum depression and you want to know more about the available treatments, the first step may be to talk to your regular doctor or nurse. For psychological help, you can consult a psychotherapist who is recognized by a professional association, such as a psychologist or a social worker.

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