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About Postpartum Depression



Reality vs. Myth

Having the symptoms of postpartum depression does not mean you are a bad mother or that you are not meant to be a mother. **Postpartum depression is a health problem that can affect any new mother, and it can be treated.**

Everyone expects new mothers to feel happy and fulfilled. This myth makes it hard for a new mother to admit that she is sad, anxious, or upset with her new baby. It is important that new mothers talk about their feelings with family, friends and health care providers. You should bring up your feelings even if the doctor does not ask. Routine checkups with your doctor or your baby's doctor are a good time to discuss concerns you may have.

Getting treatment for postpartum depression means that you are looking out for yourself and your family.



Conclusion

Depression after having a baby happens to many new mothers. Postpartum depression is very treatable. Without treatment, it can affect the health and well-being of mother, baby, and other family members. Getting treatment right away can prevent more serious problems later.

Resources

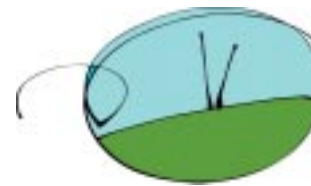
Depression After Delivery, Inc.
91 East Somerset Street
Raritan, NJ 08809
(908) 575-9121 or
(800) 944-4773
Web site: www.depressionafterdelivery.com

Postpartum Support International
927 North Kellogg Avenue
Santa Barbara, CA 93111
(805) 967-7636
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Could I have postpartum depression?

About 10 percent of new mothers have symptoms of major depression that last longer than two weeks. These women have postpartum depression. Most of these mothers first notice their symptoms by six weeks after the baby is born. However, postpartum depression may develop from four weeks to 12 months after delivery.

New mothers should seek help if they have any of the following signs:

- **Feeling very sad**, anxious or cranky
- **Emotional stress** that interferes with caring for self or family
- **Frequent crying**
- **Not feeling up to doing everyday tasks**
- **Loss of interest in food, or overeating**
- **Loss of interest in grooming** (dressing, bathing, fixing hair)
- **Trouble sleeping** when tired, or sleeping too much
- **Loss of pleasure or interest** in things that used to be fun or interesting
- **Trouble concentrating and remembering things**
- **Trouble making decisions**
- **Overly worried** about the new baby or lack of interest in the new baby
- **Fear of harming the baby**
- **Thoughts of self-harm or suicide**

Risk factors for Postpartum Depression

The risk of postpartum depression is higher in women who:

- had **postpartum depression** with past pregnancies
- had **depression or bipolar disorder** before or during pregnancy
- had **severe PMS** (premenstrual syndrome)
- have **family members with depression or bipolar disorder**
- **have had a recent stressful event**, such as marital or partner troubles, death of a loved one, or family illness



Getting Screened for Thyroid Problems

Thyroid hormone levels may be very low after giving birth. Women with low thyroid hormone levels have many of the same symptoms as postpartum depression. These include feeling tired, mood swings, appetite or weight changes, sleep changes and feeling sad. If you have these symptoms, ask your doctor about thyroid testing.

Causes of Postpartum Depression

Many factors may work together to cause postpartum depression. Some women may be sensitive to the extreme change in hormones after childbirth. Others may be sensitive to changes in their lifestyle as a result of becoming a parent. Often the exact cause is not known.

Treatment for Postpartum Depression

Family, friends and support groups can help you deal with postpartum depression. Counseling also helps, and may be all that is needed in milder cases.

Antidepressant drugs (such as Paxil and Zoloft) work very well as a treatment for postpartum depression. Many mothers continue to breastfeed while they are taking antidepressants. More studies are needed, but the risk to breastfed infants appears to be very low.

Find a doctor who has treated women with postpartum depression. He or she can decide on the best treatment plan for you.

Postpartum Psychosis: A More Serious Problem

Postpartum psychosis is a more serious illness than postpartum depression. Only one or two new mothers out of every thousand develop this condition. Symptoms include loss of touch with reality and hallucinations. The mother is unable to take care of her new baby, and may harm her baby or herself. This illness can be life-threatening and needs immediate treatment from a psychiatrist.

Who gets postpartum depression?

One out of every ten new mothers suffers from *postpartum depression*. Sadly, half of these women never get the help they need. Untreated postpartum depression may threaten the health and safety of mother and child. Mothers may become unable to deal with daily life and family stress. As a result, they may not bond with their babies as well as they should. Their babies may develop learning or behavior problems.



Is postpartum depression the same as the “baby blues”?

Many women experience the “*baby blues*”, after delivery. This is not the same as postpartum depression. About 70 percent of new mothers have some symptoms of the “baby blues”. These symptoms include trouble sleeping, crying, sadness, anxiety, poor concentration, irritability and mood changes.

The “baby blues” usually begins within three to five days after delivery. It may last for a just a few days or up to about two weeks. The symptoms can come and go during this time, and finally disappear on their own. The “baby blues” needs no treatment except reassurance and support from family and friends.