



Postnatal Depression

A guide
for mothers,
family and
friends



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

What is it?

After giving birth, most mothers experience some degree of mood swings. There are three main kinds of postnatal mood change:

- » Baby blues
- » Puerperal psychosis
- » Postnatal depression

» Baby blues

The 'baby blues' are so common they are considered normal for new mothers. They usually begin 2 - 4 days after your baby is born. You may have crying spells, increased feelings of vulnerability, irritability, loneliness and weariness. Although you may find it distressing, the baby blues will pass quickly, usually within a few weeks, with support from your partner, family and friends.

» Puerperal psychosis

Puerperal psychosis is the most extreme, and rarest, form of postnatal mood change. It affects 1 in 500 new mothers. Puerperal

means the six weeks after childbirth and psychosis is any form of mental illness in which you lose contact with reality. Symptoms begin soon after the birth, usually with the mother becoming restless, mildly confused and unable to sleep. This form of depression usually requires hospital care.

» Postnatal depression

Postnatal depression falls somewhere between the baby blues and puerperal psychosis. It may affect up to 1 in 6 new mothers, although some experts believe it affects more than this. Symptoms may start as baby blues and then get worse, or they may take some time to develop. It may be most obvious when your baby is 4 - 6 months old.

- » Around 15% of new mothers in Ireland experience postnatal depression.
- » The earlier it is recognised, diagnosed and treated, the faster you will recover.
- » Postnatal depression can last for longer than three months and even years if not treated.
- » Often a family member or friend will notice that there is something wrong before you do.

What causes it?

We do not know the exact cause of postnatal depression but research suggests that there are a number of factors that contribute to it. These include:

» Birth experience

You may find that your birth experience does not match your expectations. This feeling of being 'let down' can contribute to depression. Some women who develop postnatal depression have a traumatic or difficult birth, or a premature or unwell baby.

» Biological factors

A small number of women who develop postnatal depression have a temporary thyroid gland defect, which is linked with mood changes. Some women may be particularly vulnerable to the drop in hormones after giving birth. There is no firm

scientific evidence to support this, but there is ongoing research on the subject.

» Changes in lifestyle

The birth of a baby brings changes to your life. New babies are hard work, with the constant demands of feeding, bathing, crying and putting to sleep. This usually means you lose a lot of sleep. A new mother is suddenly responsible 24 hours a day. You lose the freedom you enjoyed before your baby arrived. This sense of loss can contribute to depression. It may take time for you to find ways to adjust to your changed circumstances.

» Relationships

The birth of a baby can also have a profound impact on your relationships with your partner, family and friends. This can sometimes cause enormous strain.

» Stressful life events

Recent life events, such as bereavement or serious illness, may mean that you are emotionally stressed before the birth of your baby. You may also be affected by unemployment or lack of money. Mothers who do not have a supportive partner or

are isolated from their families may be more likely to suffer depression after birth.

» Personal history

If you have a history of depression, this can be a risk factor for postnatal depression.

» Images of motherhood

Media images of motherhood suggest that new mothers should be attractive, energetic and living in a perfect home with a supportive partner. Many women think mothering is instinctive, not a skill you need to learn. If you find the weeks and months after childbirth difficult, you may feel that you are the only one not coping. This can lead to overwhelming feelings of failure and isolation.

Signs and symptoms

Postnatal depression can have a broad range of symptoms which can vary in how severe they are. These include:

» Irritability

You may feel irritable and angry, sometimes for no reason.

» Anxiety

You may feel inadequate or unable to cope. You may feel worried about things that you normally take for granted. You may not want to leave the house or meet friends. Some mothers are afraid of being left alone with their baby.

» Panic attacks

You may start to have panic attacks. The symptoms include sweating hands, a thumping heart and nausea. They can

happen at any time and are very distressing. You may start to avoid situations where you experience them, such as social activities, shopping, public places.

» Sleep problems

You may find it hard to sleep, even when your baby is sound asleep.

» Tiredness

You may feel constantly exhausted and lethargic, unable to cope with housework, looking after your baby or other tasks. You may have little interest in your appearance, in sex and in your surroundings.

» Concentration

You may have trouble concentrating or feel confused or distracted.

» Appetite

You may not feel like eating or you may comfort eat. As a result you may lose or put on weight.

» Tearfulness

You may cry often and not always for reasons you can understand.

» Obsessive behaviour

Meticulously tidying your home and trying to keep up impossibly high standards is typical of this behaviour. You may have overwhelming fears, for example about dying. Some mothers have recurring thoughts about harming their baby. Very few mothers ever act on this.

Helping yourself

The most important thing you can do is look for help. Talk to your partner, family, GP or public health nurse immediately.

› **Be open about your feelings and worries.**

This will help others understand what you need.

› **Believe that you will get better.**

Postnatal depression is a temporary illness.

› **Take every opportunity to rest.**

Learn to cat-nap. If you are breastfeeding, your partner can give the baby a night feed using expressed breastmilk.

› **Eat well.**

Choose nutritious foods that don't need much cooking.

› **Ask people you trust to help you with practical things such as housework.**

› **Set time aside for relaxing with your partner, family and friends.**

› **Organise a daily treat.**

It could be a walk in the park, a workout or a coffee and chat with friends.

› **Find time to have some fun.**

Accept genuine offers to baby-sit and get out for a meal, the cinema or to visit friends.

› **Be intimate with your partner.**

A kiss and a cuddle can be comforting, even if you don't feel like sex.

Find out what support networks are available in your area - such as mother-to-mother support groups, baby and toddler groups, Cuidiú-Irish Childbirth Trust groups. Mothers in a similar situation can give you emotional and practical support. Your public health nurse may be able to give you details of support groups in your area or you may find details in the local paper or library.

» Don't:

› Try to be superwoman.

You may need to scale back other activities to focus on you and your baby.

› Blame yourself or your partner.

Life is tough for both of you at this time.

› Move house while you are pregnant or for some months after your baby is born (if you can avoid it).

» Counselling

Professional counselling can help. You may need to 'off load' to someone understanding in an uncritical environment. Speak to your family doctor or GP about this.

Around 25% of women with postnatal depression seek psychiatric treatment. This may be part of your recovery plan but you will also need support and practical help from your partner, family and friends.

» Medication

Drug treatment for postnatal depression usually involves anti-depressant medication. If you use them correctly, anti-depressant medications are not addictive. It can take up to two or more weeks for you to feel that the medication is working.

Tell your doctor if you are breastfeeding so they can prescribe medication that is suitable for breastfeeding mothers.

If you feel that you are getting better with the help of medication, talk to your doctor before you change the dose or frequency of medication, as your symptoms may return. You may need to continue taking the medication for up to six months after the depression has lifted.

Remember, postnatal depression is an illness and you need to give yourself time to recover.

» Hospitalisation

Your doctor may feel that you need more intensive help or rest to recover. Very occasionally, you may need a short stay in hospital.

Family and friends

Living with depression can be very difficult and frustrating. Try to be patient and understanding. Give support, encouragement and hope. Your help is invaluable to them at this time. If you need support or information ask your local public health nurse or GP.

If you think your friend, sister or daughter has postnatal depression you can help.

- › **Encourage her to talk to her GP,** public health nurse or counsellor.
- › **Let her express her true feelings.** Listen with empathy, don't criticise her.
- › **Help her to arrange childcare.**
- › **Encourage her to join a support group.**
- › **Find out more about postnatal depression.**

› Especially for partners

- › **Try to do things as a couple,** without the children. But don't force her to do anything she doesn't want to do.
- › **Encourage her to be active,** for example go for a walk together.
- › **Try to make sure she gets enough food and rest.** A massage may help her relax.
- › **Remind her often that the illness is temporary and that she will get well.**

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