

Postpartum Depression

What is it?

Postpartum depression (PPD) is sometimes called postpartum blues (“baby blues”) or puerperal psychosis. It affects 10-15% of women. Among adolescent mothers it may be more common.

PPD is more likely to occur for women who have previously struggled with depression. In fact, there is little difference between postpartum depression and major depression. Women with relatives who have struggled with depression are also more likely to develop PPD.

What is it NOT?

PDD is not a disease or illness that can be blamed on the mother or on anyone else. It is not a chemical imbalance or simply a hormonal problem. It may occur due to environmental, biological, or behavioral factors. Frequently it is due to a combination of these.

PDD is not incurable or permanent. It usually arises within 6 weeks of childbirth and may last between 3 and 14 months. PPD can lead to other difficulties with one’s spouse, family, social life, job, or health. If untreated PPD may also lead to behavioral and developmental problems in the children of the depressed mother.

PDD is not uncontrollable. If targeted early it can be treated with simple behavioral strategies and skills which a mother can learn quickly and implement in a way that best suits her. There are also antidepressant medications which physicians may prescribe to help mothers feel better.

PPD is not something to be ashamed of – it is pretty common. One out of three women who have a prior history of major depression will experience postpartum depression.

How do I know if I have PPD?

Recognizing PPD early not only makes it easier for the mother to address the symptoms of depression, but it also enables doctors, friends, spouses, and other family members to help. You may have one or more symptoms of PDD. Every woman’s experience of PDD is a little different. The severity of PDD varies. If you have difficulties identifying it, your doctor will be able to help you. Below are a few things to look for.

Common symptoms of PPD

- moodiness
- irritability
- anxiety
- feeling unable to cope
- confusion
- low of motivation
- fatigue
- crying spells

What can I do to get better?

Generally, the treatments that are successful in treating PDD are the same ones used to treat depression. However, the best treatment for PDD is PREVENTION!

When we feel depressed, sometimes we do not feel the energy or interest to do things we typically enjoy. As a result, we stop spending time with others and/or doing fun activities. This leaves us with fewer opportunities to be happy and gain pleasure out of each day, which may make us feel even more depressed.

1. Remain actively engaged in activities

Schedule weekly activities that provide you a sense of pleasure and/or a feeling of accomplishment.

Stick to this schedule! Even if initially you do not begin feeling better, the research shows that the more consistently people engage in such activities, the higher their mood becomes overtime.

You may have to literally force yourself to maintain a schedule of activities, but this is where the momentum starts!

2. Ensure you have a social network

- Ensure that you regularly spend time with family and friends – depressive feelings can often be helped by remaining connected to others.
- Seek support from others. Others you know may have also struggled with PDD. Talk to them - they may have some ideas to help you!
- Contact your friends, family, and doctor if you notice symptoms of depression getting worse.

3. Use problem-solving skills

If you have difficulties carrying out any of these behavioral routines use your resources to make sure they happen.

- Reschedule your activities around obligations
- Reorganize your own daily routine
- Spread out your other responsibilities over a longer period of time to provide yourself periods of time in which you can schedule activities for yourself.
- Ask for help from others

4. Engage in some sort of physical exercise

- Even if you walk on a treadmill at home while watching television. This does count as exercise! Studies show that regular exercise can increase one's mood.

- Start with a manageable exercise routine – do not try to do too much initially.
- Begin slowly, and as your body adjusts to the level of activity, increase the duration or intensity of your workouts gradually.

5. DO NOT GIVE UP!

- Sometimes when people begin to feel better, they stop doing the things that helped them feel better. This results in their mood declining all over again. If what you're doing is helping, do not stop doing it!
- Reward yourself for keeping an exercise routine, activity schedule, and social schedule! It is okay to do things for yourself to maintain your motivation.
- Time is precious. If you are someone who feels guilty about taking time to yourself because this competes with other responsibilities, just remember: if you are not feeling well, your ability to care for others and carry out other responsibilities will decrease.
- Investing a little time for yourself daily or weekly to do the activities mentioned above, can give you the energy and motivation to address all the other responsibilities you may have.

6. Contact your doctor

If you are interested in taking medication to treat these symptoms, there are a few options, even if you are breastfeeding.

7. Stay informed about PPD

Books can be powerful tools to help people learn about depression or PPD. Information you may learn or ideas you may get from books may better help you manage your symptoms.

Suggested books for coping with PPD

- “This Isn’t What I Expected: Overcoming Postpartum Depression” by Karen R. Kleiman, M.S.W. and Valerie D. Raskin, M.D.
- “Conquering Postpartum Depression: A Proven Plan for Recovery” by Rosenberg, Greening, and Windell