UW Medicine

Baby Blues and More

Recognizing and coping with postpartum mood disorders

Some women have baby blues or more serious postpartum mood disorders. It helps to know about these issues in advance. This chapter gives ideas for things you can do to feel better, and for how partners, families, and friends can help. Many local resources are listed on pages 103 and 104.

For most women, a baby's birth is unlike any other experience in life. Exhilaration, joy, anxiety, confusion, love, and fear are some of the emotions women and their partners feel after their baby is born.

If this is your first baby, your world will change as it never has before. Even if you have children, the birth of each new baby brings many emotions and adjustments for the family.

In the months before your baby is born, most of the focus is on you, your changing body, and your baby growing inside of you. You and your partner may spend hours planning for your labor and birth. You may notice new mothers and fathers with their babies and dream of being a parent yourself someday soon.

Knowing About This in Advance Can Help

But most women and their partners do not know that for some, the love and happy emotions may be overshadowed by feelings of despair such as sadness, fear, anxiety, and being overwhelmed.

Many providers do not say much about the signs and symptoms of postpartum adjustment problems. They do not scare the parents-to-be. But, 50% to 80% of new parents (50 to 80 out of 100) have baby blues, and 20% of new mothers (20 out of 100) have a more serious form of



For some new mothers, the joy of having a new baby may be replaced by sadness, fear, anxiety, and feelings of being overwhelmed.



Baby blues are common. They affect about 50% to 80% of new mothers.

postpartum mood disorder. Women who have had anxiety, depression, or other mood disorders in the past are at higher risk for having postpartum mood disorders.

The more you and your partner know about postpartum adjustment **before** you have your baby, the better you will be able to recognize when something doesn't feel right.

The best thing you can do for yourself is to speak up and share your concerns with someone you trust and who can get you help. This may be your partner, a close friend, your healthcare provider, nurse, or social worker. Holding in scary or negative thoughts and feelings may lead to a more serious situation.

This chapter explains baby blues and other postpartum mood problems that may need attention. Your healthcare provider is the best person to listen to your symptoms, determine what condition you may have, and find the best way to treat it. **Most important, postpartum mood disorders can be treated.** With help, you will soon feel better.

Baby Blues

Baby blues can occur anytime from birth through the first 2 weeks after giving birth. Most symptoms are caused by the sudden change in the mother's hormones. She may also feel overwhelmed about being a new parent of a baby who is fully dependent on her.

This is a common condition. It is not considered a postpartum adjustment disorder. Symptoms of baby blues may include:

- Mood swings
- Crying
- Trouble concentrating
- Difficulty sleeping
- Fatigue
- Not eating

Symptoms of baby blues may last a few hours or as long as 2 weeks. With good health care, strong emotional support, and knowing about this condition, symptoms usually go away on their own.

If your symptoms continue or increase 2 weeks after your baby's birth, something more serious may be going on. Call your healthcare provider if this happens for you.



Women with postpartum depression may have low energy and other symptoms of depression.

Postpartum Depression

Postpartum depression is a more serious postpartum condition with a group of symptoms. It can start anytime after delivery, but most often it occurs from 2 weeks up to 1 year after the baby's birth. This and some of the other disorders can affect 20% of new parents (20 out of 100), including fathers and parents who have adopted a baby.

If you are worried that you or someone you know may have a postpartum mood disorder, call your healthcare provider or a mental health specialist.

The most common description by women with postpartum depression is "feeling overwhelmed." Women with postpartum depression usually have many of the symptoms listed under baby blues. They may have low energy and depression symptoms, or they may be hyperactive and irritable. They may also say things like:

- I can't stop feeling depressed, no matter what I do.
- I cry at least once a day and sometimes I can't stop.
- I feel sad most or all of the time.
- I can't concentrate.
- I don't enjoy the things I used to enjoy.
- I have frightening thoughts about the baby or other family members.
- I can't sleep, even when my baby sleeps.
- I feel like a failure all of the time.
- I have no energy. I feel tired all of the time.
- I have no appetite and no enjoyment of food.
- I am having sugar and carbohydrate cravings and compulsively eating all the time.
- I can't remember the last time I laughed.
- Every little thing gets on my nerves lately. I am even furious with my baby. I am often angry with my partner.
- The future seems hopeless.
- It seems like I will feel this way forever.
- There are times when I feel I would be better off dead than to feel this way.



Postpartum depression can start anytime up until about a year after your baby's birth.

Postpartum Anxiety

Postpartum anxiety can occur at the same time as postpartum depression (usually 2 weeks to 1 year after the birth of your baby). These symptoms may occur along with symptoms of depression:

- Anxiety
- Unable to concentrate
- Afraid to go out
- Fear of being alone
- Feeling trapped
- Guilt
- Irritability
- Unable to sleep
- Constant fears for baby's health
- Anger or rage
- Rapid heartbeat
- Dizziness
- *Hyperventilating* (breathing very fast, not able to stop)
- Tingling or numbness
- Nausea or vomiting
- Muscle tension
- Diarrhea

Scary or Intrusive Thoughts

A mother with a postpartum mood disorder may have scary thoughts. She may be flooded with thoughts about harm coming to her baby, such as, "What if I drop her out of the window" or "put her in the microwave." "Maybe there is something seriously wrong with my baby." "I am a terrible mother. My baby should have a different mother."

Sometimes these thoughts are constant. They may go along with a ritual such as:

• Constantly checking and re-checking the baby



Let your partner know how you are feeling.

- Checking to make sure no knives are missing or getting rid of all the knives in the house
- Doing safety checks on the house and locks

These behaviors are often disruptive to how a family functions. Most women will realize these thoughts and behaviors are due to their situation, and are not real. But a small number of women may believe their thoughts, or believe that someone outside of herself is telling her to do things. If this happens, it is much more serious. Call your healthcare provider **right away** if this happens.

The most important thing to do is to share your thoughts and feelings with someone you trust, such as your partner, close friend, or healthcare provider, so they can get you the help you need. Call mental health services if you have any of these symptoms.

Things You Can Do to Feel Better

Below is a list of things you can do to lessen the baby blues or symptoms of depression and anxiety. You may not feel well enough to do many or any of these things. But, it may be a reminder that you do hold the power to get help and to help yourself.

- If possible, rest when your baby sleeps.
- Let your partner know how you are feeling.
- Make your needs a priority.
- Ask for help.
- Avoid strict or rigid schedules.
- Give yourself permission to have negative feelings.
- Screen phone calls. Don't answer calls from people you don't want to talk to.
- Do not expect too much from yourself right now.
- Avoid overdoing anything.
- Be careful about asking too many people for advice.
- Trust your instincts.
- Set limits with visitors.
- Avoid spending time with people who make you feel bad.
- Set boundaries with people you cannot avoid.
- Eat well.

- Avoid caffeine and alcohol.
- Take a walk.
- Take a bath, once your healthcare provider says it's OK.
- Set small goals for yourself.
- Stay on all medicines your healthcare provider has prescribed.
- Get out of the house.
- Decide what needs to be done and what can wait.
- Try not to compare yourself to others.
- Thank your partner for helping you.
- Do not blame yourself.
- Ask family members to do household tasks you usually do.
- Do the best you can. Even if it doesn't feel like enough, it's enough for now.
- Encourage your partner to seek support from friends and outside activities.
- Confide in someone you trust.
- Remind yourself that all adjustments take time.

Other things that may help include supportive counseling, medicine, or both. Talk with your healthcare provider, nurse, or social worker about these options.

Helpful Tips for Partners, Families, and Friends

Here are examples of helpful things to say to a mother who is struggling with a postpartum mood disorder. They can help her know you care and that you understand what she is going through. After the list of things to say is a list of things NOT to say.

DO tell her:

- You know she feels terrible.
- She will get better.
- She is doing all the right things to get better (such as counseling or medicines).
- She still can be a good mother *and* feel terrible.
- It's OK to make mistakes. Things don't need to be done perfectly.



There are many helpful resources for women and their partners who are dealing with postpartum mood disorders.

- You know how hard she's working at this right now.
- You will help with the baby and chores. Let her know she can ask for your help when she needs it.
- You know she's doing the best she can.
- You love her.
- Her baby will be fine.

Do NOT tell her:

- She should get over this.
- You are tired of her feeling this way.
- This should be the happiest time of her life.
- You liked her better the way she was before.
- She'll snap out of this.
- She would feel better if only: she were working or not working, got out of the house more or stayed home more, etc.
- She should lose weight, color her hair, buy new clothes, etc.
- All new mothers feel this way.
- This is just a phase.
- Since she wanted a baby, this is what she has to go through.
- You know she's strong enough to get through this on her own and she doesn't need help.

There Is a Lot of Help Out There

There are many helpful resources for women and their partners who are dealing with postpartum mood disorders.

- **Postpartum Mood Disorder Support** (Seattle) 888.404.7763 (PPMD) *www.ppmdsupport.com* Support groups, newsletter, and phone support.
- **24-Hour Crisis Clinic** 866.427.4747
- Northwest Association for Postpartum Support (NAPS)
 206.956.1955
 www.napsdoulas.com

 This Is Not What I Expected! Emotional Care for New Families Support Group

425.899.1000

Evergreen Hospital, 12040 N.E. 128th, Kirkland, WA 98034

Free postpartum mood disorder support group for mothers, partners, and their families. Infants welcome (mother's choice). Call for time and date.

 Understanding the Moods of Motherhood 206.551.4824
 801 Broadway #718, Seattle, WA 98101

Free postpartum mood disorder support group for mothers. Call for time and date.

- **Beyond the Birth: What No One Ever Talks About** Book by Dawn Gruen, MSW, and Rex Gentry, MD. To order, call 206.283.9278 or visit *www.ppmdsupport.com*.
- Family Services "Beyond the Baby Blues" 425.453.7890, ext. 268 www.family-services.org

Provides clinical interventions for women and their families, including psychotherapy for individuals and couples, or ongoing psychotherapy groups.

• Depression During and After Pregnancy: A Resource for Women, Their Families and Friends

Booklet by U.S. Department of Health and Human Services, Health Resources and Services Administration. To download and print the pdf, visit *www.mchb.hrsa.gov/pregnancyandbeyond/depression*. It is also available in Spanish.

Individual Counseling

Many patients who have mood disorders after giving birth find it helpful to talk with a counselor. Please contact your healthcare provider, nurse, or social worker for a referral.

Questions?

Your questions are important. If you have questions about postpartum mood disorders, talk with your healthcare provider.

The resources in this chapter may also be helpful.