

POSTPARTUM DEPRESSION: NOT ALWAYS WHAT IT LOOKS LIKE

by Karen Kleiman, MSW

Postpartum depression (PPD) is an illness that pierces the soul of the woman who endures it and challenges everything she thought she knew about herself. She may fear that having PPD means she is crazy, weak, does not want her baby or is a bad mother. Most believe PPD only happens to somebody else, but in reality it can strike any woman, either immediately after the birth of her baby or months later.

WHAT CAUSES POSTPARTUM DEPRESSION?

15-20% of all new mothers are thought to have PPD.

Risk factors are:

- previous PPD or depression/anxiety during pregnancy
- family history of anxiety/depression
- unplanned pregnancy
- unsupportive spouse or poor social support
- recent separation or divorce
- major loss in past two years (i.e. death of loved one, move or job change)
- obstetric complications or difficult infant temperament
- environmental stressors
- psychological or psychiatric vulnerability
- sleep deprivation

Some women can have one or even no risk factors and end up with a full blown major depression. But if a woman knows she is at risk, she can reach out to friends, family and medical professionals for support.

HOW CAN I TELL IF I HAVE PPD?

It can be hard to tell if you are experiencing PPD. After all, don't all new mothers cry and feel anxious? Certainly we expect emotional upheaval during the early postpartum weeks. How much is okay and when is it time to seek professional help? Keep in mind that it is not just *what* you are feeling that counts, but how long you've been feeling it, how bad it feels and how much it is interfering with your day.

Symptoms include:

- weepiness
- difficulty concentrating
- feeling sad, hopeless, guilty or inadequate
- unable to enjoy things you previously enjoyed

- insomnia
- increased anxiety or panic
- loss of appetite
- fatigue, lack of energy
- irritability or anger
- thoughts that scare you

TRUST YOUR INSTINCTS

If you think something is wrong, you may be experiencing some symptoms of depression that need attention. It can be hard to ask for help, but PPD responds well to treatment, especially when caught early. Let someone know how you are feeling.

TREATMENT OPTIONS

Most experts agree that PPD is best treated with medications, psychotherapy or both. Complementary or alternative therapies may be attractive due to their relatively low cost and lack of side effects. Because its effectiveness is not yet known, alternative treatment is best suited for mild depression or for use in addition to therapy and medications, whose efficacy has been well documented.

A WORD ABOUT BREASTFEEDING

Breastfeeding women are particularly concerned about safe treatment options. There is much reliable research on the use of medications while nursing. It is important to be evaluated by someone who is familiar with both PPD and breastfeeding and who can help plan the best course of treatment for you and your baby.

Postpartum depression is a very treatable condition and the prognosis is excellent for complete recovery, so ask for help if you need it. If you are a family member or friend of a new mother, support her. Ask and observe how she is feeling and help her seek appropriate medical care. As in pregnancy, a new mother and her baby thrive when both are healthy.

Karen Kleiman, MSW is the author of *This Isn't What I Expected; The Postpartum Husband; What Am I Thinking and Therapy and the Postpartum Woman*. More of Karen's work can be found at www.postpartumstress.com and www.postpartumtherapy.net.