

Postnatal Anxiety STRESS & DEPRESSION



WOMEN'S HEALTH INFORMATION SERIES

POSTNATAL ANXIETY, STRESS & DEPRESSION

Childbirth is one of the most dramatic events in a women's life. For many women, pregnancy and the period following birth brings the most significant physical, emotional and social upheaval they have ever experienced.

Childbirth also marks a transition for both women and men, from being someone's child, to being someone's parent. In becoming parents, women and men experience major adjustments to their roles, their relationship and their relationships with others.

This time is traditionally associated with positive emotions of joy and fulfilment for the new mother and her family. However, many women experience some degree of distress or dejection following childbirth. Sometimes there are overwhelming feelings of anger, guilt, inadequacy, sadness and depression.

The changes and demands that occur are a great deal for anyone to take on. Women are more likely to develop psychological problems during this period than at any other time in their lives. Men can also experience psychological problems, especially if their partner is depressed.

It is important to treat these conditions to limit the impact on the individual as well as the baby, other children, friends and family.

POSTNATAL ANXIETY

A reasonable level of anxiety might be considered normal for women following childbirth. The postnatal period is also a time of increased risk of the onset of anxiety disorders for women.

Feelings of anxiety can interfere with your ability to cope with daily activities or how you feel about being a mother, it may also stop you enjoying and achieving what you want.

Persistent heightened feelings of anxiety or panic, are characteristic of an anxiety disorder that requires assessment and treatment.

BABY BLUES

In the first week after the birth, up to 80 percent of mothers will experience the 'baby blues'. This is a time of extra sensitivity and women may feel tearful, irritable or low. Symptoms tend to peak three to five days after birth and usually disappear within two weeks without any specific treatment.

If symptoms continue and increase in severity, discuss this with your doctor or child health nurse.

POSTPARTUM PSYCHOSIS

Postpartum psychosis is the least common postnatal mood disorder. This condition usually appears within the first month following childbirth and occurs in mothers with a personal or family history of schizophrenia or bipolar-disorder.

POSTNATAL DEPRESSION (PND)

PND is depression occurring in the months following childbirth. The onset of PND tends to be gradual and may persist for many months. If left untreated, it may develop into chronic depression or recur after a subsequent pregnancy. It is generally accepted that PND affects at least fifteen to twenty percent of all childbearing women. Mild to moderate cases of PND are sometimes unrecognised by women themselves. Many feel ashamed if they are not coping and so sufferers can conceal their difficulties. PND is a serious problem that disrupts women's lives and can have effects on the baby, other children, the partner and other relationships.

SIGNS OF DEPRESSION

Experiences vary considerably but usually include several of the following symptoms:

Feelings

- Persistent low mood
- Hopelessness, inadequacy, failure, exhaustion, tearfulness, guilt, shame, worthlessness confusion, anxiety, panic
- Fear for the baby and of the baby
- Fear of being alone or going out.

Behaviours

- Lack of interest or pleasure in usual activities (including sex)
- Insomnia or excessive sleep, nightmares
- Not eating or overeating
- Decreased energy and motivation
- Withdrawal from social contact
- Poor self-care
- Inability to cope with routine tasks.

Thoughts

- Inability to think clearly and make decisions
- Lack of concentration and poor memory
- Wanting to run away from everything
- Being rejected by partner
- Worry about harm or death to partner or baby
- Ideas about suicide.

Some symptoms may not indicate a severe problem. A persistent low mood or loss of interest or pleasure in activities for longer than two weeks, along with other symptoms occurring together, can indicate clinical depression and require treatment.

There are several important factors which, can increase your risk of PND, including:

- personal or family history of depression
- depression during pregnancy
- difficulties in relationship with partner or no partner
- lack of practical and emotional support
- an accumulation of stressful life events
- complications during the pregnancy or delivery
- 'high-need' baby (temperament, feeding, sleeping, settling difficulties).

TREATMENT OPTIONS

There are several treatment options for women experiencing depression and anxiety following childbirth. The most effective treatment for PND is antidepressant medication and psychotherapy. Medication alone is never sufficient and should always be accompanied by counselling or other support services. Some medications can not be given when breastfeeding, a GP will advise the best options to suit your individual needs.

DEPRESSION AND FATHERS

Fathers may also be prone to PND. Estimates range between three to nine percent of fathers' experience PND. The risk increases for men if they have a partner who is depressed or they have had previous episodes of depression.

HELPING YOURSELF

Remember that this time of stress does not last forever and there are useful things you can do for yourself, including:

- value your own health and wellbeing and your role as a mother. Trust your own judgement, as you know your baby best
- make each day as simple as possible and accept reasonable offers of help
- if you have a partner, discuss with them how care of the baby and household chores can be shared
- find someone you feel comfortable with to share your feelings and concerns
- allow yourself some 'time-out' to pursue activities that give you pleasure
- find out resources for families in your area, including meeting other mothers.

Partners can also help:

- be patient, accept her feelings are genuine, and try not to take her criticisms or negative feelings personally
- encourage your partner to talk about her feelings, asking how you can help, and encourage her to seek professional advice if the depression or anxiety continues
- nurture your relationship with your infant, whilst at the same time providing your partner with a much needed break
- plan some time together as a couple.

Further information and assistance

Your GP

Your nearest Women's Health Centre

Your Child Health Nurse

Your Community Health Centre

Postnatal Depression Support Association

Telephone: (08) 9340 1622

Mental HealthDirect

Freecall: 1800 220 400

HealthDirect

Freecall: 1800 022 222

Parenting Line

Freecall: 1800 654 432

NGALA Family Resource Centre

Telephone: (08) 9368 9368

Country Callers Freecall: 1800 111 546

Hey Dad

Telephone: (08) 9368 9379

Country Callers Freecall: 1800 111 545

Nursing Mothers Association

Telephone: (08) 9309 5393

Other brochures within the
Women's Health Information Series include:

Pelvic Floor Muscle Exercises

Menopause

Osteoporosis

Premenstrual Syndrome

Sexuality After Your Baby

Physiotherapy Before and After Childbirth

To order any of the resources
contact **HealthInfo** on

1300 135 030

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