

Topics:

Postpartum Blues	2
Postpartum Depression	5
Postpartum Anxiety	9

Mental Health

POSTPARTUM BLUES

Congratulations on giving birth and getting home safely!

You may be feeling a lot of intense emotions, from excitement and happiness to exhaustion and anxiety. Up to 80% of women will experience the “baby blues,” including crying episodes, sadness, and mood swings after the birth of a child or even during pregnancy^{1,2}. Baby blues are a normal adjustment period caused by the sudden changes in your body, environment and hormones after childbirth³.



If you have any of these symptoms below, it may mean that you have the baby blues³⁻⁸.

- Crying for no reason
- Feeling depressed, sad, or lonely
- Feeling anxious or restless
- Unexplained anger or irritability
- Irregular sleeping or eating

Baby blues (also called postpartum blues) symptoms typically show up within a few days after giving birth, they do not impair function, and will go away on their own without professional treatment in 1-2 weeks.

TIPS

- Up to 80% of new moms will experience the baby blues.
- Baby blues goes away within 14 days without treatment.
- Report any feelings of postpartum blues to your doctor at your first checkup.

If you feel you may be suffering from the baby blues, know that it is not your fault and does not make you a bad mother.

Your body is recovering from pregnancy and your hormones are fluctuating. It is normal to feel tired and emotional. If the blues persist longer than 2 weeks or if the symptoms worsen, you may be experiencing postpartum depression or anxiety. [Click here for more information and resources.](#)

WHAT YOU CAN DO?

- *Seek support*
 - Tell your partner, friends, or family about your feeling as soon as possible.
 - Report any feelings of postpartum blues to your doctor at your first checkup.
- *Self-care*
 - **Rest** - Do what you can to get plenty of rest by getting help from others

and sleeping when the baby sleeps. Sleeplessness can make even the smallest emotions intense.

- **Eat healthy** – Make healthy eating a priority. Use choosemyplate.gov to get started.
- **Lean on others** - Get help caring for the baby and other kids (if you have them).
- **Walk** – walking for 15-30 minutes outside can improve your mood. Walking releases

endorphins, which help you feel good and energized.

- **Breathe or meditate** - For breathing and stress management exercises, visit the Stress Reduction lessons.
- **Relax** – Listen to music, read a book, or do something that you like to do.

Get help right away if the baby blues get worse and you cannot function to take care of yourself or the baby.

RESOURCES:

LOS ANGELES 211

Dial: 2-1-1 or 211la.org

POSTPARTUM SUPPORT INTERNATIONAL (PSI)

800.944.4PPD (4773)

postpartum.net

The PSI website has information, resources, and social support for women with mental health issues. PSI's toll-free Help Line, in English and Spanish, refers callers to appropriate local resources including emergency services

MATERNAL MENTAL HEALTH NOW

maternalmentalhealthnow.org/

DIRECTORY, MATERNAL MENTAL HEALTH NOW

directory.maternalmentalhealthla.org/

BABY CENTER

babycenter.com/0_postpartum-depression-and-anxiety_227.bc

HELP GUIDE

helpguide.org/mental/postpartum_depression.htm

NATIONAL INSTITUTE OF MENTAL HEALTH

nimh.nih.gov/health/topics/women-and-mental-health/index.shtml

WEBMD INFORMATION ON BABY BLUES AND POSTPARTUM DEPRESSION

webmd.com/depression/postpartum-depression/postpartum-depression-symptoms

Find support groups and connect with moms:

POSTPARTUM SUPPORT INTERNATIONAL AREA COORDINATORS

postpartum.net/Get-Help/Support-Resources-Map-Area-Coordiators.aspx

CAFE MOM – MEETING PLACE FOR MOMS

cafemom.com

BLOGS:

vanessalachey.com/2013/03/inside-story-my-experience-with-post-pregnancy-baby-blues/

babyzone.com/mom/postpartum-depression/baby-blues-postpartum-depression_67738

APPS:

FIG

Helps enhance emotional strength through goal setting, eating well and relaxation

play.google.com/store/apps/details?id=com.fig.mobile

VIDEOS:

POSTPARTUM EMOTIONS

marchofdimes.com/pregnancy/postpartum-depression.aspx

REFERENCES

1. Toohey, J. (2012). Depression During Pregnancy and Postpartum. *Journal of Clinical Obstetrics & Gynecology*, 55:788-797.
2. Smith, M., & Segal, J. (2014). Help Guide. Postpartum Depression and the Baby Blues. Retrieved from http://www.helpguide.org/mental/postpartum_depression.htm.
3. U.S. Department of Health and Human Services, Office of Women's Health. (2012). Depression during and after pregnancy fact sheet. Retrieved from <http://www.womenshealth.gov/publications/our-publications/fact-sheet/depression-pregnancy.html>.
4. Lusskin, S.I., et al. (2013). Postpartum blues and depression. Retrieved from <http://www.uptodate.com/index>
5. Baby Center. (2014). Postpartum Depression and Anxiety. Retrieved from http://www.babycenter.com/0_postpartum-depression-and-anxiety_227.bc.
6. Beck, C.T. (2006). Postpartum depression: It isn't just the blues. *The American Journal of Nursing*, 106(5), 40-50.
7. Zauderer, C. (2009). Postpartum Depression: How childbirth educators can help break the silence. *J Perinat Educ*, 18(2), 23-31.
8. WebMD. (2014). Postpartum Depression Health Center. Retrieved from <http://www.webmd.com/depression/postpartum-depression/postpartum-depression-symptoms>.

POSTPARTUM DEPRESSION

Depression after pregnancy is called postpartum depression and is one of the most common complications of childbirth. You are not alone. About 1 in 5 new mothers experience symptoms of depression sometime in the first year after delivery. Postpartum Depression (PPD) can affect any new mother regardless of age, race, income, education and/or marital status and seems to be brought on by the changes in your body, environment, and hormones after pregnancy.

Risk factors include prior depression or PPD, family history of depression or bipolar disorder, recent stressful events, illness, and complications in pregnancy, birth, or breastfeeding. Untreated PPD can get in the way of mother-child bonding, breastfeeding, and delay a child's development, so prompt treatment is important for both you and your baby.

If you feel you may be suffering from postpartum depression, know that it is not your fault and does not make you a bad mother.

- The best thing you can do for you and your baby is to get help. The more quickly you seek treatment, the sooner you will recover and the less your baby will be affected. Treatment may include medicine or therapy. Your doctor will tell you what's best for you.

TIPS

- The best thing you can do is seek help
- PPD is temporary and treatable

SIGNS/SYMPTOMS

Any of these symptoms and others, could indicate that you have postpartum depression. Symptoms can occur anytime during pregnancy or within the first 12 months after child birth.

- Crying and sadness
- Feelings of shame, guilt, or helplessness
- Unexplained anger or irritability
- Lack of connection or interest in the baby
- Irregular sleeping or eating
- Sense of worthlessness
- Fear leaving the house or being alone
- Withdrawal from friends and family
- Thoughts of harming the baby or yourself
- Difficulty concentrating or making simple decisions

- No matter how strong the symptoms are, remember that PPD is temporary and you can get better with treatment.

- Important to look out for: Postpartum

Psychosis

- Rare illness that occurs in approximately 1-2 in 1,000 births. Usually occurs suddenly within the first 3 weeks postpartum.
- Symptoms include: Strange and false beliefs (delusions) such as thinking that someone is watching you or reading your mind, thoughts of harming yourself or your baby, drastically changing moods from feeling happy to depressed, hearing and/or seeing things that no one else does or that you know is not there (hallucinations), decreased need or inability to sleep even when your baby is sleeping, confusion and disorientation, or feeling removed from your baby.

WHAT YOU CAN DO

- Call your doctor or get help if your signs/symptoms:
 - Don't go away or get better after 14 days
 - Become more severe
 - Include thoughts of harming yourself or your baby
 - Make it difficult to care for your baby or do everyday tasks
- *Seek support*
 - Tell your partner, friends, or family that you are feeling this way as soon as you can
 - Join a support group to talk with other moms who are dealing with depression
- *Self-care*
 - **Rest** - Do what you can to get plenty of rest by getting help from others and sleeping when the baby sleeps. Sleeplessness can make even the smallest emotions intense.
 - **Eat healthy** – Make healthy eating a priority. Use <http://www.choosemyplate.gov/> to get started
 - **Lean on others** - Get help caring for the baby and other children you may have.
 - **Walk** – Walking for 15-30 minutes outside can help improve your mood. Walking releases endorphins, which help you feel good and energized.
 - **Breathe or meditate** - For breathing exercises and stress management visit the stress reduction module.
 - **Relax** – Listen to music, read a book, or do something that you liked to do before you had your baby.
 - **More tools** - Use the Sad Scale Smartphone App (itunes.apple.com/us/app/sad-scale/id308056730?mt=8) or MoodTune™ (braintracercorp.com) to keep track of your mood and energy.
- *Professional Treatment*
 - Find a healthcare provider, counselor, or therapist who understands postpartum depression.
 - Talk with your healthcare provider about what medications and therapy options are available.

RESOURCES:

If you are thinking about hurting yourself or your baby, please get help right away.

Call a suicide hotline (free):

LOS ANGELES 211

Dial: 2-1-1 or 211la.org

LOS ANGELES COUNTY DEPARTMENT OF MENTAL HEALTH

ACCESS Helpline 24/7: 800-854-7771

SUICIDE PREVENTION CENTER SURVIVOR HOTLINE

Call inside LA County 24/7: 877-727-4747

PPD MOMS

PPDMOMS.org: 1-800-PPDMOMS or 1-800-773-6667

1800ppdmoms.org

NATIONAL STRATEGY FOR SUICIDE PREVENTION (HAS HOTLINES FOR EVERY STATE)

Life line: 1-800-273-8255

samhsa.gov/prevention/suicide.aspx

Learn More & Get Help:

LOS ANGELES 211

Dial: 2-1-1 or 211la.org

POSTPARTUM SUPPORT INTERNATIONAL (PSI)

800.944.4PPD (4773)

postpartum.net

The PSI website has information, resources, and social support for women with mental health issues. PSI's toll-free Help Line, in English and Spanish, refers callers to appropriate local resources including emergency services

MATERNAL MENTAL HEALTH NOW

maternalmentalhealthnow.org/

DIRECTORY, MATERNAL MENTAL HEALTH NOW

directory.maternalmentalhealthla.org/

POSTPARTUM PROGRESS

postpartumprogress.org

BABY CENTER

babycenter.com/0_postpartum-depression-and-anxiety_227.bc

HELP GUIDE

helpguide.org/mental/postpartum_depression.htm

WEBMD INFORMATION ON BABY BLUES AND POSTPARTUM DEPRESSION

webmd.com/depression/postpartum-depression/postpartum-depression-symptoms

Find support groups and connect with moms:

POSTPARTUM SUPPORT INTERNATIONAL AREA COORDINATORS

postpartum.net/Get-Help/Support-Resources-Map-Area-Coordiators.aspx

VIDEOS

WHAT IS POSTPARTUM DEPRESSION

youtube.com/watch?v=C7rrFWqeOSc

HOW TO RECOGNIZE SYMPTOMS OF POSTPARTUM DEPRESSION

dailymotion.com/video/x122vm_how-to-recognize-the-symptoms-of-postpartum-depression_lifestyle

REFERENCES

1. Beck, C.T. (2006). Postpartum depression: It isn't just the blues. *The American Journal of Nursing*, 106(5), 40–50.
2. Mayo Clinic. (2012). Postpartum depression. Retrieved from <http://www.mayoclinic.org/diseases-conditions/postpartum-depression/>.
3. O'Hara, M.W., & Segre, L.S. (2008). Psychologic disorders of pregnancy and the postpartum period. In RS Gibbs et al., eds., *Danforth's Obstetrics and Gynecology*, 10th ed., pp. 504-514. Philadelphia: Lippincott Williams and Wilkins.
4. O'Hara, M.W., & Wisner, K.L. (2014). Perinatal mental illness: Definition, description and aetiology. *Best Pract Res Clin Obstet Gynaecol*, 28(1), 3-12.
5. Pearstein, T., et al. Postpartum depression. (2009). *American Journal of Obstetrics & Gynecology*, 200, 357.
6. Postpartum Support International. (2014). Depression during pregnancy and postpartum. Retrieved from <http://postpartum.net/Get-the-Facts/Depression-During-Pregnancy-Postpartum.aspx>.
7. Spinelli, M.G. (2009). Postpartum psychosis: Detection of risk and management. *American Journal of Psychiatry*, 166(4), 405-408.
8. The American College of Obstetricians and Gynecologists. (2013). Postpartum depression FAQ. Retrieved from <http://www.acog.org/~media/For%20Patients/faq091.pdf?dmc=1&ts=20140127T1514538443>.
9. U.S. Department of Health and Human Services, Office of Women's Health. (2013). Depression during and after pregnancy. Retrieved from <http://www.womenshealth.gov/publications/our-publications/fact-sheet/depression-pregnancy.html>.
10. WebMD. (2014). Postpartum depression health center. Retrieved from <http://www.webmd.com/depression/postpartum-depression/postpartum-depression-symptoms>.

POSTPARTUM ANXIETY

Anxiety after pregnancy is called postpartum anxiety, and it is described as having reoccurring feelings of intense worry or panic. Approximately 1 in 10 women develop postpartum anxiety, and it can affect any new mother regardless of age, race, income, education and marital status.

Risk factors of postpartum anxiety include:

- Personal or family history of anxiety
- Previous perinatal depression or anxiety
- Thyroid imbalance

Symptoms can occur anytime during pregnancy or within the first 12 months after giving birth:

- Constant worry that something is wrong with the baby
- Excessive attention to keep the baby safe
- Feeling that something bad is going to happen to you, your family or the baby
- Trouble falling asleep or not feeling rested after sleep
- Inability to sit still and be calm
- Trouble concentrating or making decisions
- Sweating, dizziness, trembling/shaking, hot flashes, nausea, shortness of breath or trouble breathing

TIPS

- Resting, walking, and deep breathing can help relieve feelings of anxiety.
- Postpartum anxiety can occur up to 12 months after giving birth.
- Postpartum anxiety gets better with treatment from your medical provider.

WHAT TO EXPECT

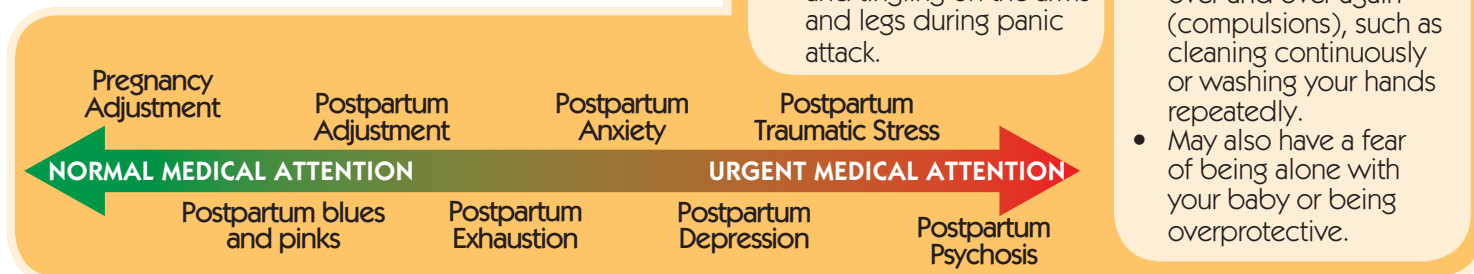
- If you feel you may have postpartum anxiety, know that it is not your fault and it does not make you a bad mother.
- Some new mothers experience the symptoms of anxiety alone or coupled with symptoms of depression.
- Postpartum anxiety can get better with treatment. Talk to your healthcare provider about treatment options.
- In addition to general anxiety, there are other mood disorders¹⁰:

Postpartum Panic Disorder

- Feel very anxious and recurring panic attacks.
- May experience chest pain, claustrophobia, shortness of breath, dizziness, irregular heartbeats, numbness and tingling on the arms and legs during panic attack.

Postpartum Obsessive Compulsive Disorder (OCD)

- Having recurring upsetting or unwanted thoughts or images (obsessions) about your baby and the need to do certain things over and over again (compulsions), such as cleaning continuously or washing your hands repeatedly.
- May also have a fear of being alone with your baby or being overprotective.



WHAT YOU CAN DO

- *Seek support*
 - Tell your partner, friends & family about your feelings
 - Join a support group to connect with other moms
 - Speak with your medical provider to discuss how you are feeling
- *Self-care*
 - **Rest** - Do what you can to get plenty of rest by getting help from others and sleeping when the baby sleeps.
 - **Eat healthy & drink water** – use the resources on choosemyplate.gov for healthy recipes. Avoid alcohol, cigarettes, or coffee, which can make anxiety worse.
- **Walk** – Taking a 15 minute walk outside can help relieve stress
- **Breathe or meditate** – Deep breathing can help your mind and body calm down. Use the Breathe2Relax App for breathing exercises.
- **Break the cycle** – When you feel anxious start doing something that will distract your mind away from your worries.

RESOURCES:

LOS ANGELES 211

Dial: 2-1-1 or 211la.org

LOS ANGELES COUNTY DEPARTMENT OF MENTAL HEALTH

ACCESS Helpline 24/7: 800-854-7771

SUICIDE PREVENTION CENTER SURVIVOR HOTLINE

Call inside LA County 24/7: 877-727-4747

PPD MOMS

1-800-PPDMOMS or 1-800-773- 6667

ppdmoms.org

NATIONAL STRATEGY FOR SUICIDE PREVENTION

Life line: 1-800-273-8255

SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION

samhsa.gov/prevention/suicide.aspx

POSTPARTUM SUPPORT INTERNATIONAL (PSI)

800.944.4PPD (4773)

postpartum.net

MATERNAL MENTAL HEALTH NOW

maternalmentalhealthnow.org/

DIRECTORY, LOS ANGELES COUNTY PERINATAL MENTAL HEALTH TASK FORCE

directory.maternalmentalhealthla.org/

PERINATAL MOOD DISORDERS

ahvna.org/tiny_uploads/forms/Perinatal%20Mood%20Disorders%20-%20A%20continuum%20of%20symptoms.pdf

Find support groups and connect with moms:

POSTPARTUM SUPPORT INTERNATIONAL AREA COORDINATORS

postpartum.net/Get-Help/Support-Resources-Map-Area-Coordinators.aspx

VIDEOS

SIGNS OF POSTPARTUM ANXIETY

cbsnews.com/videos/knowning-the-signs-of-postpartum-anxiety/

HOW TO MANAGE POSTPARTUM ANXIETY

youtube.com/watch?v=lt4K2oRahQE

REFERENCES

1. Baby Center. (2014). Postpartum Depression and Anxiety. Retrieved from http://www.babycenter.com/0_postpartum-depression-and-anxiety_227.bc.
2. Brandes, M., Soares, C.N., & Cohen, L.S. (2004). Postpartum onset obsessive-compulsive disorder: diagnosis and management. *Arch Womens Mental Health, 7*, 99–110.
3. Chaudron, L.H., & Nirodi, N. (2010). The obsessive-compulsive spectrum in the perinatal period: a prospective pilot study. *Arch Womens Ment Health, 13*(5), 403-10.
4. Postpartum Support International. (2014). Anxiety during pregnancy and postpartum. Retrieved from <http://www.postpartum.net/Get-the-Facts/Anxiety-During-Pregnancy-Postpartum.aspx>.
5. O'Connor, T.G., Heron, J., Golding, J., et al. (2002). Maternal antenatal anxiety and children's behavioural/emotional problems at 4 years. Report from the Avon Longitudinal Study of Parents and Children. *Br J Psychiatry, 180*, 502–508.
6. O'Hara, M.W., & Segre, L.S. (2008). Psychologic disorders of pregnancy and the postpartum period. In RS Gibbs et al., eds., *Danforth's Obstetrics and Gynecology*, 10th ed., pp. 504-514. Philadelphia: Lippincott Williams and Wilkins.
7. O'Hara, M.W., & Wisner, K.L. (2014). Perinatal mental illness: Definition, description and aetiology. *Best Pract Res Clin Obstet Gynaecol, 28*(1), 3-12.
8. Ross, L.E., & McLean, L.M. (2006). Anxiety disorders during pregnancy and the postpartum period. A systematic review. *J Clin Psychiatry, 67*(8), 1285-98.
9. Uguz, F., Akman, C., Kaya, N., et al. (2007). Postpartum-onset obsessive-compulsive disorder: incidence, clinical features, and related factors. *J Clin Psychiatry, 68*, 132–138.
10. Alberta Home Visitation Network Association (2012). Perinatal mood disorders: a continuum of symptoms.