

Perinatal mood issues: *an overview*

Depression during and after pregnancy occurs more often than most people realize. Depression during pregnancy is also called antepartum or prenatal depression, and depression after pregnancy is called postpartum depression. Approximately 15 percent of women experience significant depression following childbirth. Ten percent of women experience depression in pregnancy. In fact, perinatal depression is the most common complication of childbirth.

Symptoms can start anytime during pregnancy or the first year postpartum. They differ for everyone, and might include the following:

- Feelings of being excessively overwhelmed
- Feelings of anger or irritability
- Appetite and sleep disturbances
- Uncontrollable tearfulness and sadness
- Lack of interest in the baby
- Feelings of guilt, shame or hopelessness
- Loss of interest, joy or pleasure in things you used to enjoy
- Possible thoughts of harming the baby or oneself

Anxiety affects approximately six percent of pregnant women and 10 percent of postpartum women. Sometimes mothers experience anxiety alone and sometimes they experience anxiety in addition to depression. Symptoms of anxiety during pregnancy or postpartum might include:

- Constant worry
- Feeling that something bad is going to happen
- Racing thoughts
- Disturbances of sleep and appetite
- Inability to sit still or get rest
- Physical symptoms like dizziness, hot flashes, and nausea

In addition to generalized anxiety, there are some specific forms of anxiety women can experience during pregnancy or in the postpartum period:

- **Panic disorder** is a form of anxiety with which a woman feels very nervous and has recurring panic attacks. During a panic attack, a woman may experience shortness of breath, chest pain, claustrophobia, dizziness, heart palpitations, and numbness and tingling in the extremities.
- **Obsessive compulsive disorder (OCD)** involves persistent, unwanted, repetitive thoughts or mental images called obsessions, and actions in which mom may engage repeatedly, called compulsions, in order to reduce the obsessions. This may include things like needing to clean constantly, check things many times, count or reorder things. Moms with Postpartum OCD know that their thoughts are strange and are very unlikely to ever act on them.

Postpartum stress syndrome, or adjustment disorder, is an emotional reaction which falls between the typical baby blues and postpartum depression. Unlike baby blues, in which feelings of sadness are interspersed with periods of happiness, postpartum stress syndrome is characterized by a sadness, anxiety and feelings of self-doubt. The woman may want to be the perfect mother and wife, but at the same time she

may feel exhausted and overwhelmed. Women experiencing postpartum stress syndrome usually function fairly well and get through their day, though they feel awful inside.

Postpartum post-traumatic stress disorder (PTSD) affects approximately one to six percent of women following childbirth. Most often, this illness is caused by a real or perceived trauma during delivery or postpartum. Symptoms of postpartum PTSD might include:

- Intrusive re-experiencing of a past traumatic event (which in this case may have been the childbirth itself)
- Flashbacks or nightmares
- Avoidance of stimuli associated with the event, including thoughts, feelings, people, places and details of the event
- Persistent increased arousal (irritability, difficulty sleeping, hypervigilance, exaggerated startle response)
- Anxiety and panic attacks
- Feeling a sense of unreality and detachment

Postpartum psychosis is a rare illness, compared to the rates of postpartum depression or anxiety. It occurs in approximately one to two out of every 1,000 deliveries, or approximately 0.1 percent of births. The onset is usually sudden, most often within the first four weeks postpartum. The most significant risk factors for postpartum psychosis are a personal or family history of bipolar disorder, or a previous psychotic episode. Symptoms of postpartum psychosis can include:

- Delusions or strange beliefs
- Hallucinations (seeing or hearing things that aren't there)
- Feeling very irritated
- Hyperactivity
- Decreased need for or inability to sleep
- Paranoia and suspiciousness
- Rapid mood swings
- Difficulty communicating at times

Perinatal mood issues are generally temporary and very treatable with professional assistance. If you are experiencing difficulties, please contact a professional—asking for help is the first step towards feeling better.

Women's Emotional Wellness Center of Main Line Health
Main Line Health Center in Newtown Square
3855 West Chester Pike, Suite 160 (ground floor)
Newtown Square, PA 19073
484.337.6300

Clinical Director: Liz Bland, MSW, LCSW • Medical Director: Linda Ryan, MD

Treatment at The Women's Emotional Wellness Center is covered by most commercial insurance plans and Medicare