

perinatal mood and anxiety disorders

MENTAL HEALTH DURING AND AFTER PREGNANCY



SHARP

What Are Perinatal Mood and Anxiety Disorders?

Mental health conditions during pregnancy and the first year after giving birth are known as perinatal mood and anxiety disorders (PMADs), commonly called postpartum depression. Conditions that fall under this category include perinatal and postpartum depression, bipolar disorder, anxiety, obsessive-compulsive disorder (OCD), post-traumatic stress disorder (PTSD) and psychosis.

What Are the Risk Factors?

PMADs are the number one complication of pregnancy and childbirth, with up to 1 in 5 women (and 1 in 10 partners) experiencing them. PMADs can affect anyone regardless of background, age, education, income level or race. There is no one single cause.

The following may be risk factors for PMADs:

- Change in hormone levels
- Lack of social support
- Breastfeeding challenges
- Individual or family history of mental health conditions
- Difficult or unexpected pregnancy, labor or birth
- Lack of sleep
- A baby who cries or is fussy for long periods of time

What Are the Symptoms?

Symptoms may appear during pregnancy, right after birth or within the baby's first year. PMADs should not be confused with the baby blues — crying, exhaustion, irritability and feeling overwhelmed — which typically begins a few days after birth and is common, affecting up to 80% of women. **Baby blues last approximately one to three weeks and go away on their own.**

However, you may have a PMAD if these symptoms don't go away after three weeks:

- Feelings of sadness
- Mood swings
- Trouble sleeping



- Excessive crying
- Difficulty concentrating and coping with daily tasks
- Fear of leaving the house or being alone
- A sense of panic, nervousness or anxiety
- Unexplained anger or irritability
- Fear of harming yourself or your baby
- Lack of interest in things you used to enjoy

Therapy

Research indicates that individual therapy is an integral part of treatment. Counseling may help you understand the connection between your thoughts, moods and behaviors. It can also help identify ways to reduce symptoms of stress.

Mental health providers who specialize in pregnancy are skilled in meeting the specific needs of women who have PMADs. To adequately address the mental health needs of new mothers, a holistic approach is often most effective. This includes family support, group support, individual counseling and medication.

To locate a mental health provider who specializes in pregnancy, contact your insurance company or visit postpartumhealthalliance.org.

Medications

Antidepressant medications are an important part of treatment. They work by balancing chemicals in your brain that affect mood and emotions.

Antidepressants are not addictive, and some can be taken safely while pregnant or breastfeeding. They are most effective when taken in combination with individual or group counseling. It is important to see a doctor who is trained in prescribing medication to women who have PMADs, are pregnant or are breastfeeding.

For information about taking medication during pregnancy or while breastfeeding, visit mothertobaby.org.

Ask for Help

Reaching out for support or talking to others may not be easy while feeling this way, but symptoms often continue or worsen if left untreated.

A comprehensive approach may help you. Consider getting information and help from organizations, mental health professionals, support groups and a psychiatrist that specializes in PMADs.

Social support is an essential piece of physical and emotional recovery. Attending support groups with other women who are also having trouble after having a baby can be beneficial to recovery.

Postpartum Health Alliance

619-254-0023

postpartumhealthalliance.org

Talk to a trained volunteer, or get a local directory of mental health providers, support groups and resource referrals.

Postpartum Support International (PSI)

1-800-944-4773

postpartum.net

Find support for moms and partners, informational articles, online support groups, web resources and more.

Vista Hill Smartcare Behavioral Health Consultation Services

858-956-5900

smartcarebhcs.org

Get free consultation services to help connect you and your family to community resources to address mental health concerns.

San Diego Access and Crisis Line

1-888-724-7240

Call the Access and Crisis Line, or visit an emergency department, if you are experiencing fear of being alone and are concerned about your safety or the safety of your baby or other children. The Access and Crisis Line is free, confidential and available seven days a week, 24 hours a day. A compassionate counselor can provide hope, encouragement and help with accessing mental health services.

Sharp Postpartum Support Groups

Sharp offers free support groups at the following locations. Walk-ins and babies under 1 year old are welcome.

Sharp Memorial Outpatient Pavilion

858-939-4133

- **Mothers' Group:** Tuesdays, 9:30 to 11 a.m.
- **Couples' Group:** Last Wednesday of each month, 6 to 7:30 p.m.

Offered by Sharp Mary Birch Hospital

Sharp Grossmont Hospital Women's Health Center

619-740-3483

Mondays, 9 to 10 a.m.

Offered by Sharp Grossmont Hospital

Visit **sharp.com/classes** and search for "Postpartum Support Group" for details.

Self-Assessment Tool for Postpartum Depression

Edinburgh Postnatal Depression Scale (EPDS)

Use this self-assessment as a guide to help you determine if you may have postpartum depression. Read the statements and check the box next to the choice that comes closest to how you have felt in the past seven days — not just how you feel today. After you are finished, add up the corresponding point values for your answers.

1. I have been able to laugh and see the funny side of things.

- 0 ☐ As much as I could
1 ☐ Not quite so much now
2 ☐ Definitely not so much now
3 ☐ Not at all

2. I have looked forward with enjoyment to things.

- 0 ☐ As much as I ever did
1 ☐ Rather less than I used to
2 ☐ Definitely less than I used to do
3 ☐ Hardly at all

3. I have blamed myself unnecessarily when things went wrong.

- 3 ☐ Yes, most of the time
2 ☐ Yes, sometimes
1 ☐ Hardly ever
0 ☐ No, not at all

4. I have been anxious or worried for no good reason.

- 3 ☐ Yes, very often
2 ☐ Yes, sometimes
1 ☐ Hardly ever
0 ☐ No, not at all

5. I have felt scared or panicky for no very good reason.

- 3 ☐ Yes, quite a lot
2 ☐ Yes, sometimes
1 ☐ No, not much
0 ☐ No, not at all

6. Things have been getting on top of me.

- 3 ☐ Yes, most of the time I haven't been able to cope at all
2 ☐ Yes, sometimes I haven't been coping as well as usual
1 ☐ No, most of the time I have coped quite well
0 ☐ No, I have been coping as well as ever

7. I have been so unhappy that I have had difficulty sleeping.

- 3 ☐ Yes, most of the time
2 ☐ Yes, sometimes
1 ☐ Not very often
0 ☐ No, not at all

8. I have felt sad or miserable.

- 3 ☐ Yes, most of the time
2 ☐ Yes, quite often
1 ☐ Not very often
0 ☐ No, not at all

9. I have been so unhappy that I have been crying.

- 3 ☐ Yes, most of the time
2 ☐ Yes, quite often
1 ☐ Only occasionally
0 ☐ No, never

10. The thought of harming myself has occurred to me.

- 3 ☐ Yes, quite often
2 ☐ Sometimes
1 ☐ Hardly ever
0 ☐ Never

Total score _____

If your score is 10 or greater, you may have postpartum depression or anxiety.

Cox, J.L., et al. "Detection of Postnatal Depression: Development of the 10-item Edinburgh Postnatal Depression Scale." *British Journal of Psychiatry*, 1987; 150: 782-786. Reprinted with permission.



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