



Postpartum Depression

The Baby Blues

Expecting a baby is supposed to be one of the happiest times of our life. What we may be less prepared for are the enormous physical, hormonal, emotional and situational changes which accompany childbirth. Research has shown that up to 80% of all moms will experience the “baby blues” which includes symptoms of feeling overly emotional, crying occasionally, feeling impatient, irritable or even mildly anxious. The baby blues come on quickly, generally peaking around the third to fifth day postpartum and disappear just as quickly in 1—2 weeks. Here are some hints to get you through the early days:

Here are some tips to remember each day:

- Start every day with a positive thought
- Eat healthy meals
- Sleep when your baby sleeps
- Smile—it can help you feel better
- Accept offers of help from family, friends, and neighbors

Risk for Postpartum Depression

Postpartum Mood Disorder (PPMD) can affect 15-20% of new mothers and is different and more serious than the “baby blues.” As with other illnesses, some women will have greater risk for developing a Postpartum Mood Disorder. Symptoms can occur within a few days of delivery or any time in the first year postpartum. It is critical that risks and symptoms are recognized so that mother and baby can have a happier and healthier first year.

It is important to recognize the warning symptoms of postpartum depression and postpartum anxiety. Talk to your healthcare provider about any symptoms you experience, especially if the symptoms have been present for two or more weeks.

Symptoms may include:

- Feeling depressed, sad or empty most of the day, nearly every day
- Crying easily and often
- Feeling hopeless
- Decreased interest or pleasure in activities that used to be interesting or pleasurable
- Lack of interest in the baby
- Wanting to be alone most or all of the time
- Significant appetite change
- Difficulty sleeping or sleeping too much
- Irritability, anger or feeling incredibly restless



- Having little or no energy
- Feeling guilty or as if you are a “bad mother”
- Unable to make decisions or focus
- Thoughts of harming yourself
- Persistent frightening or disturbing thoughts about baby
- Thoughts of harming baby
- Nervousness/anxiety
- Panic attacks (racing heart, shortness of breath, nausea, chest discomfort, dizziness, numbness)
- Being very overprotective or watchful of baby

Risk Factors Checklist

Postpartum mood disorders can affect any childbearing woman regardless of age, income, culture or education. Knowing the risk factors can help you prevent or decrease the likelihood of developing a serious problem.

Please let your healthcare provider know if you have any of these risk factors:

- Prior episode of postpartum mood disorder
- Mental health problems during pregnancy
- Family history of postpartum mood disorder or mental health problems
- Miscarriage or death of a baby
- Stressful life situations during pregnancy or within the first year after delivery (relocation, job change, significant losses, change in financial status, etc.)
- Isolation
- Inadequate or no family/social support
- Dissatisfaction with spouse/partner relationship
- Infertility issues or treatment
- Personal history of trauma or abuse
- Difficult or high risk pregnancy
- Prior traumatic birth experience
- Thyroid problems

A Resource for new mothers

Mother to Mother: A phone support organization

314-991-5666, Ext. 4

www.mothersupport.org