

Postpartum Depression and other Perinatal Mood & Anxiety Disorders (PMADs)



(402) 489-3834



Baby blues affects 60-80% of mothers during the first 2 weeks after delivery. Symptoms peak on day 3-5 after delivery, and include random crying with widely fluctuating emotions. Moms with baby blues are mostly happy with good self-esteem. Hormone changes, sleep deprivation and exhaustion cause baby blues – not stress. Baby blues can affect women with no history of psychiatric illness. For 1 in 5 moms, baby blues fail to improve by the 14th day after delivery, and thus, it evolves into postpartum depression.

Postpartum depression and anxiety

can trigger some really good moms to have scary thoughts about harm coming to themselves or their baby. Moms become obsessed with these “intrusive” thoughts and want them to stop. They’re upset and scared to tell anyone, because they feel “crazy.” But, the ability to have concern about the “intrusive” thoughts shows clear and rational thinking - NOT “craziness.” Thoughts are not actions. If a mom is aware that “intrusive” thoughts are not normal, it’s very unlikely she would ever act on them.

1 in 5 moms suffer from anxiety and depression during pregnancy and the first year postpartum.

1 in 7 moms suffer from postpartum depression. Symptoms affect mothers and babies, and the ripple effect impacts the entire family. In fact, 1 in 10 dads suffer from postpartum depression, especially if mom is also affected. LGBTQ parents are at increased risk.

If you, or someone you know, suffers from this, help is available.

Perinatal Mood & Anxiety Disorders (PMADs) are likely evolving if baby blues persist more than 14 days after delivery. PMADs includes postpartum depression, bipolar disorder, psychosis, generalized anxiety disorder, panic attacks, obsessive compulsive disorder, and post-traumatic stress disorder. If not addressed PMAD symptoms peak at 12 weeks after delivery.

Although anyone can develop PMADs, some moms are at increased risk. These include women with a personal or family history of mood & anxiety disorders, a history of sexual abuse, a personal history of significant mood reactions to hormonal changes (puberty, premenstrual syndrome, hormonal birth control, abrupt weaning from breastfeeding), endocrine issues (diabetes, thyroid imbalance, infertility), and social struggles (poor support system, stressful or violent relationships, financial stress, childcare stress, a recent loss or move, barriers to care, institutional racism).

A book for moms

https://www.amazon.com/Good-Moms-Have-Scary-Thoughts/dp/1641701307/ref=sr_1_1?gclid=CjwKCAIA4KaRBhBdEi wAZi1zzlvxHJp6XEzm1hvK13K0GID3zEsHVyTkOKl1QiaZ9aLX7ZzOW-73BBoCztQQAvD_BwE&hvadid=295444767997&hvdev=c&hvlocph y=9024746&hvnetw=g&hvqmt=e&hvrnd=9417517688261943625 &hvtargid=kwd-563735239642&hydadcr=16857_9871400&keywords=good+moms +have+scary+thoughts&qid=1646944233&sr=8-1

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Suicide risk peaks 9–12 months after delivery. According to experts, if you say, “My baby will be better off without me,” you are at serious risk of suicide. If you are depressed, hopefully someone will directly ask you if you have a suicide plan. If so, accept help with the next steps needed to stay safe and get treatment.

Mental health medications are almost always safe to take while pregnant and breastfeeding. DON'T stop taking them, as the risk to you and your baby is likely greater without the meds. A mental health professional can help you manage your mental health and medications, while considering what's best for you and your baby.

Postpartum psychosis is very rare. You're at increased risk if you have bipolar disorder. If you have “intrusive” thoughts of harm that DON'T scare you, and you think the thoughts are logical and rational, you need help immediately.

Postpartum Support International (PSI)

promotes awareness, prevention and treatment of mental health issues
related to childbearing.

24 hr Helpline: call or text 1-800-944-4773



www.postpartum.net

PSI has local coordinators who will help you find support wherever you are.

<https://www.postpartum.net/get-help/locations/>

PSI provides perinatal mental health education for professionals.

Here is a directory of providers in your area.

<https://psidirectory.com/>

PSI provides a multitude of weekly online peer support groups for mothers and family members affected by perinatal mental health issues.

www.postpartum.net/get-help/psi-online-support-meetings/

PSI trains volunteers to guide others through this difficult time. Sign up to get trained!

<https://www.postpartum.net/join-us/volunteer/supportcoordinator/>

You're not alone. You're not to blame. There's help available. You'll get better.