

## Postnatal Depression - Top Tips

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Most mothers have days when they feel really down. This is perfectly normal. Looking after a baby, being constantly on call and coping with the daily demands of life is not easy. However, mothers who feel miserable most of the time may be suffering from postnatal depression, a debilitating illness that can spoil the experience of motherhood, interfere with the development of the mother-baby bond and put an immense strain on adult relationships.

The postpartum period is a critical time for the health of the mother. In some cultures, it is not uncommon for other women to look after the mother in the first few weeks after the birth. However, many mothers find themselves without support and with little or no experience in the practice of baby care. This puts the sole responsibility of looking after the baby and the household on the mother long before she is ready.

Postnatal depression is a serious condition that can result in a great deal of suffering. It can take a long time to recover from the illness, but early treatment can reduce its severity.

### Causes

To get the mother through the birth, endorphins, adrenaline and natural chemicals course through her body. The rapid decline in hormone levels after the birth can leave the mother with a strong sense of anticlimax or the 'Baby blues'. However, the condition usually sorts itself out within a few days and does not require treatment other than reassurance and support from family and friends.

Postnatal depression is much more serious and can occur anytime within the first year after the birth. It can develop suddenly, it can be mild or severe, and it can happen to mothers with their first, second or last child. Although no one is really sure what triggers the illness, it seems likely that a number of different factors may lead up to it. These may include problems with a previous pregnancy, anxiety during pregnancy, bereavement, moving house, marital conflict, financial problems, ill health, poor diet, isolation or loneliness. Even so, postnatal depression can start without any of these stresses.

### Symptoms

The symptoms of postnatal depression are very similar to those seen in 'ordinary' depression and may include:

- Fatigue - even a simple task such as getting dressed may seem an impossible one.
- Sleep disturbances - although the mother feels tired, she may find it hard to get to sleep and may wake up very early in the morning.

- Feelings of worthlessness - the mother may be unable to organise a routine or work out what her baby needs or wants. She may also fail to take care of herself and how she looks.
- Anxiety - the mother may be obsessed with the baby's health and concerned that the baby will come to harm if left alone.
- Despair - feeling unhappy and wretched can be worse at particular times of the day. Good days may be followed by bad days which can make the mother feel tearful for much of the time.
- Irritability - feelings of irritability are common and may be aimed at her partner or family members, who may not understand what is happening.
- Reduced libido - postnatal depression can take away the desire for sex. If the mother's partner does not understand this, he may feel rejected.
- Guilt - even though the mother has really looked forward to motherhood, she may find it hard to love the baby, which increases her sense of guilt.
- Appetite changes - although the mother needs all the energy she can get, she may lose her appetite. Some mothers may eat for comfort and then feel bad about putting on weight.
- Panic attacks - headaches, stomach pains or heart palpitations can make the mother fear that she is going to have a heart attack or a stroke.
- Social withdrawal - the mother may lose interest in activities that she enjoyed before the birth and may not want to go out at all.
- Delayed attachment - the mother may be unable to respond to her baby's need for love and affection. This is an important concern because emotional availability in the first six months of life is crucial to the baby's overall health and future development.
- Thoughts of suicide - the mother may feel that suicide is the only way out of her problems. This should be taken extremely seriously and help should be sought straight away.

## **Treatment**

The first stage in treatment includes good nutrition, plenty of rest, and regular exercise. All are important for emotional and physical health. Regular meals, adequate intake of protein from meat and eggs together with omega 3 fatty acids from fish and vegetables can make a real difference. Hydration is also important. The recommended daily intake is about ten tall glasses of water. Massage, yoga, aromatherapy, acupuncture, walking, swimming, jogging, cycling, getting out and about and having fun can also play an important part in the mother's recovery.

If the depression is severe, or has gone on for a long time, antidepressant drugs can be used safely while breast feeding. However, antidepressants can take up to four weeks to start working, so it is important that the mother keeps on taking them or the depression may return. About 60 percent of women with moderate to severe

postnatal depression feel better within a few weeks of starting medication, but they are not an effective method for everyone.

Evidence suggests that sharing experiences, anxieties and feelings with others is one of the best cures for postnatal depression. For mothers that do not have anyone to confide in, self-help groups and supportive networks such as the Association for Postnatal Illnesses ([www.apni.org](http://www.apni.org)), Parentline Plus ([www.parentlineplus.org.uk](http://www.parentlineplus.org.uk)) and the National Childbirth Trust ([www.nct.org.uk](http://www.nct.org.uk)) can provide the help, support and reassurance that the mother needs.

Parent and baby classes, such as *Baby Sensory*, also provide a social setting where mothers can share their experiences with others who have gone through the same experience, and spend quality time with their babies.