

Baby Blues: Postpartum Depression and Postpartum Psychosis



It is supposed to be one of the most exciting and miraculous times in a woman's life, becoming a mother and experiencing the joys of motherhood. However, for many women this time is a time of stress, anxiety, uncontrollable dangerous thoughts and depression. It is a disorder that is becoming more and more talked about thanks to brave women like Brooke Shields who openly talk about their experiences. It's called postpartum depression a more severe, lasting depression than the baby blues and is experienced by up to 12% of women after delivery. Symptoms may include hopelessness, guilt, difficulty concentrating, poor appetite, and thoughts of suicide, or even thoughts of hurting your own child.

During the postpartum period up to 85% of women experience some type of mood disturbance, however, 10-15% of women experience a more disabling and persistent form of mood disturbance called postpartum depression or psychosis. So what is the difference between just the baby blues and depression or psychosis?

Baby Blues:

- The baby blues should only last about two weeks, the symptoms should peak at the fourth or fifth day and last for several days but then start to remit.
- Rapidly fluctuating mood, tearfulness, irritability, and anxiety are common symptoms.
- Symptoms do not interfere with a mother's ability to function and to care for her child.

Postpartum Depression (PPD):

- Postpartum depression occurs in 10-15% of women in the general population.
- Depressed mood—tearfulness, hopelessness, and feeling empty inside, with or without severe anxiety.
- Anxiety is high, including worries or obsessions about the infant's health and well-being.
- Those with a personal history of depression, previous episode of postpartum depression, or depression during pregnancy are at the highest risk.
- Loss of pleasure in either all or almost all of your daily activities.
- The mother may have negative feelings toward the infant. She may also have intrusive and unpleasant fears or thoughts about harming the infant, these tend to be fearful thoughts, rather than urges to harm..
- Thoughts about death or suicide.
- Noticeable change in how you walk and talk—usually restlessness, but sometimes sluggishness.

- Feelings of worthlessness or guilt, with no reasonable cause.
- Usually trouble with sleeping, even when your baby is sleeping.

Postpartum Psychosis:

- Although the symptoms can occur at anytime within the first three months after giving birth, women who have postpartum psychosis usually develop symptoms within the first two to three weeks after delivery.
- Postpartum psychosis symptoms usually appear quite suddenly; in 80% of cases, the psychosis occurs three to 14 days after a symptom-free period.
- Hallucinations
- Delusions
- Illogical thoughts
- Insomnia
- Refusing to eat
- Extreme feelings of anxiety and agitation
- Periods of delirium or mania
- Suicidal or homicidal thoughts
- Women with a personal history of psychosis, bipolar disorder or schizophrenia have an increased risk of developing postpartum psychosis.
- Women with postpartum psychosis are not always able to speak about it or get help on their own so it may be necessary for a partner or friend to get them the medical attention they need.

The key to preventing postpartum depression from taking over you life is to asses it as early as possible and get treatment. If you think that you may be suffering from postpartum depression or psychosis call your doctor immediately and start getting help so you can enjoy you baby and your life.