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## when mama gets blue

By Mona Gable

illustration: Jordin Isip

You've just had your baby. This is supposed to be a happy time, so why are you feeling so down? Sure, you're exhausted and crying a lot, but don't all new mothers go through this?

Most mothers do experience feelings of sadness and loss after childbirth—a condition typically known as the “baby blues.” But if these feelings intensify and persist, you could be suffering from something more serious: postpartum depression, or PPD. This disorder, which can range from mild to severe depression, is an insidious illness. Because negative thinking is a hallmark of PPD, you may not even realize that you're in a depression and need help.

Shortly after the birth of her seventh child, entertainer Marie Osmond fell into a deep depression. “How could I be so selfish?” she recalls in her book, *Behind the Smile: My Journey out of Postpartum Depression* (Warner Books, 2001). “Here I had seven beautiful children, a 13-year marriage and a long-lasting career, so many things that other people would love to have. Why am I such a failure?” Like most women with PPD, Osmond had no idea there were thousands of women just like her.

Postpartum depression is extremely common, affecting about one in eight new mothers. It is also, fortunately, very treatable. That's why it's important to be alert to the signs of PPD so you can get help before it becomes debilitating.

**What it looks like>** Postpartum depression typically comes on three to four weeks after delivery and, depending on the stress in a woman's life, can last from three months to a year. It looks just like a regular depression, with intense feelings of sadness and hopelessness, loss of appetite, weight loss and difficulty sleeping. (Experts believe that Andrea Yates, who allegedly killed her five children, most likely did not suffer from postpartum depression, but postpartum psychosis, a rare and far more serious psychotic disorder that surfaces almost immediately after childbirth.) Women with PPD can suffer intense anxiety about harm coming to the baby, or they may feel detached from the baby. Yet because many new mothers experience these problems, PPD can be easily overlooked. “One of the things that's tricky in making the diagnosis is that a lot of symptoms of depression are the same as when a woman is in the postpartum period,” says Victoria Hendrick, M.D., director of the UCLA Pregnancy and Postpartum Mood Disorders Program.

Donna Freed, a stay-at-home mother of three in Goleta, Calif., is a textbook example of that dilemma. Two months after the birth of her youngest child, she suddenly couldn't eat and sleep. Even more disturbing, she also began having thoughts that something was going to hurt her daughter. “I was afraid of doing anything with my baby,” she says. “I was afraid if I picked her up, I would drop her. I was afraid I would lose control and hurt her.”

But when Freed called her obstetrician and told him she was having thoughts about inadvertently injuring her child, he reportedly said, “If you don't think about those thoughts, they'll go away.” Freed eventually was able to find a psychiatrist who properly diagnosed her depression and put her on antidepressants.

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**What causes PPD?>** Hendrick says the stresses of being a new mother and assuming new responsibilities appear to be more significant than hormonal shifts in causing PPD. Women with a history of depression are the most susceptible, followed by single moms who are isolated or who lack social support. If you have a high-needs baby, you may also be vulnerable.

One of the most potent risk factors for postpartum depression is conflict with the father. “That's one reason I like to see the couple together when I do an assessment,” Hendrick says.

There's also evidence that women who were depressed during pregnancy are at greater risk. So it's a good idea to talk with your doctor about any symptoms even before the baby comes.

And to maintain as much emotional stability as possible, put off making big life changes such as switching jobs, moving or buying a new house for as long as possible after giving birth.

**What to do>** Share your feelings with family and friends. Talk to your doctor; PPD should be treated, whether with psychotherapy, appropriate medications or a combination of both. Research indicates that even if you're breastfeeding, it's safe to use most antidepressants. “We'd rather have a woman nurse and take an antidepressant than have her stay depressed,” Hendrick says. “In terms of the baby, it's better to have a happy mom than to be exposed to the mom's depression.”

And know that other women have successfully overcome PPD. “Find out as much as you can,” Freed says. “There's so much more [information] out there now than when I went through it. Spouses need to read about it, too; otherwise they won't know what you're going through.”