

Clinical Corner – Post-partum Depression

SATURDAY, July 14 (Health Scout News) -- It takes a rare and shocking event like the recent case of the Texas mother who killed five of her children to put postpartum depression in the headlines. But experts say the condition affects about 10 to 15 percent of women following childbirth.

Although cases of mothers harming their children are very rare, postpartum depression can be very serious, with such symptoms as sleep deprivation, anxiety and hopelessness leading to everything from social withdrawal to suicide.

It's the sleep deprivation, caused by the round-the-clock demands of a newborn, that is one of the biggest contributing factors to the problem, says Heather Flynn, a clinical psychologist and research scientist at the University of Michigan's department of psychiatry.

"Getting enough sleep is thought among researchers to be key right now for prevention of postpartum depression," she says. "In fact, there are some clinical programs for postpartum depression for women in Canada in which they actually have child care for women so they can sleep after delivery at least five or six hours a night. And so far they're showing positive results in terms of preventing postpartum depression."

The lack of sleep that new mothers face is also believed to play a major role in a much more common and fleeting form of postpartum depression.

"About 80 percent of women experience something that we call 'the postpartum blues', which usually resolves within one to two weeks," Flynn says. "That has actually been more linked to the hormonal changes women go through following childbirth."

"But postpartum depression is something that can last much longer," she adds.

So how does a woman know if she's suffering from something more serious than the "postpartum blues?"

"There is a list of particular diagnostic criteria for postpartum depression," Flynn says. "If you have any combination of the symptoms for nearly every day for two weeks or more, that's when we consider it to be entering into the realm of clinical depression or major depressive disorder. And that's when people should seek treatment."

The good news is that most cases can be successfully treated with a combination of psychotherapy, lifestyle changes, family support and anti-depressant medications, says Jeremy Kisch, senior director for clinical education at the National Mental Health Association.

"There are a number of effective interventions, so a person should be aware and vigilant and be ready to take corrective action if necessary," he adds. "That means being alert to the risks. And if you notice early on that you're becoming depressed, there is treatment... There's no reason that it has to reach a point of calamity or tragedy."

What To Do

Flynn says the following are the diagnostic criteria for clinical postpartum depression:

- A sad, blue or irritable mood every day for most of the day for two weeks, or a significant loss of interest or pleasure in things you normally find enjoyable or interesting
- Significant weight loss or gain without trying, or an increased or decreased appetite
- Significant changes in sleep
- Low energy or no energy
- Feelings of guilt or worthlessness
- An inability to concentrate or make decisions
- Thoughts of death or of harming or killing yourself

Women who experience a combination of these symptoms should see their doctor for treatment options.

To learn more about postpartum depression, visit the [National Institutes of Health](#), or [InteliHealth](#).