

What is postnatal depression?

Postnatal depression (PND) is a type of depression that emerges within the first year of the birth of a baby. It can develop as early as a few days or the symptoms can be delayed depending on the personal circumstances surrounding the mother, partner and baby.

PND is understood to affect 1 in 7 women (nearly 16%) giving birth in Australia. It is also diagnosed in around 3-10% of men during the postnatal period, either as a result of their partner's diagnosis or in conjunction with it. Men can also experience PND independently of their partner, however the strongest predictor of the development of PND in men is their partner experiencing it. Unfortunately new fathers do not access support services like new mothers do. If you think your partner is struggling with PND encourage them to talk about what they are experiencing or encourage them to reach out to us too.

Symptoms of PND in men may look slightly different to PND in women. Where women tend to experience teariness, feelings of numbness and inadequacy or excessive worry about their baby being harmed men tend to engage in more risk-taking, experience angry outbursts or withdraw from the family e.g., increase their hours at work. Like women, some fathers describe feeling trapped in their new family situation and can become overwhelmed by feelings of rage, disappointment, hopelessness and helplessness as they come to term with parenthood and wrestle with the transition from their pre-baby life.

How do I know if it is just normal feelings of sadness or postnatal depression?

It is natural for women and their partners to have a range of emotional experiences during pregnancy and within the first 12 months of their baby's life. Physical changes in pregnancy can affect emotions and mood, and becoming a parent may not be what you expected. We all hear about the negative impacts

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of prolonged sleep deprivation but until you experience for yourself there is no way of knowing how it will affect you.

Nearly 80% of women experience the baby blues in the first few days after birth due to hormonal changes, so it is normal for women to feel tearful or overwhelmed in this time. However these feelings typically pass within a few days without a targeted intervention apart from support and understanding.

For some women and men these feelings hang around and start to affect your life. If you have noticed these feelings hanging around for more than two weeks, it is important you get help. The earlier you get support the better for you and your baby. If reaching out to your GP or other health professional seems overwhelming, start by talking to a trusted friend or family member and with their support seek out the help of a health professional. By discussing your experiences and using the Edinburgh Postnatal Depression Scale (EPDS), a health professional can help clarify whether your symptoms are within a 'normal' range, or whether they could indicate you are experiencing postnatal depression and/or anxiety.

If you are having thoughts about your baby or partner being better off without you, or you are having thoughts of harming yourself or your baby, it is very important you seek professional help immediately. Please refer to some useful helplines at the end of this page*.

What are the symptoms of depression?

The symptoms of depression during pregnancy or early parenthood are the same as at any other time in our life, but can be more difficult to identify and deal with because of pregnancy and a new baby. Symptoms such as changes in sleep and appetite which come with being a new parent overlap with the symptoms of depression so it can be challenging for to diagnose.

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Becoming a parent is a momentous life transition and strong reactions and emotional responses are to be expected. However if you have experienced several of the symptoms listed below for two weeks or more, it is time to ask for help.

- depressed/low mood or feeling emotionally numb
- feelings of inadequacy, guilt, shame, worthlessness, hopelessness, helplessness, emptiness or sadness
- changes in appetite or sleeping behaviours (i.e. eating or sleeping too much or too little)
- a loss of interest in previously pleasurable activity, including sexual activity
- often feeling close to tears
- headaches, backaches and other unpleasant aches and pains
- difficulty attending, focusing and remembering to do things
- feeling angry, irritable or resentful (e.g. feeling easily irritated by your partner or other children)
- overly fearful about the baby and/or fear of being alone with the baby or the baby being unsettled
- fear of being alone or going out
- recurring negative thoughts like “I am a failure”, “I am doing a bad job”, “My life is terrible”
- feeling unmotivated and unable to cope with a daily routine
- withdrawing from social contact and/ or not looking after yourself properly
- having thoughts about harming yourself or your baby, ending your life, or wanting to escape or get away from everything.

It is really important if you are experiencing these symptoms or thoughts that you seek support from a professional.

What increases my risk of developing PND?

There are a range of factors that make women and men more vulnerable to developing mental health difficulties after having a baby. Some are genetic and biological whilst others have more to do with your upbringing or habitual ways of thinking, feeling and behaving. Your social circumstances can also put pressure on you, making you more vulnerable. Commonly identified risk factors include:

- Previous personal or family history of anxiety or depression
- A personal history of trauma or abuse
- Drug and alcohol abuse
- Recent stressful life events (e.g. loss of partner, divorce, moving, financial hardship)
- Hormonal fluctuations
- Chronic sleep deprivation
- The quality of the relationship with your mother
- Access to practical and emotional supports
- Medical complications for you or your baby

What are some of the myths about PND?

Myth 1. You can just 'snap out' of your depression.

Women experiencing mild PND may be treated with counseling and/or medication. Women experiencing moderate to severe PND may require treatment with medications to help lessen the duration of their depressive symptoms. They can't just snap out of it.

Myth 2. Depression will not affect your parenting skills or your baby.

Untreated PND may affect the parent's ability to bond with their baby and may have a negative impact on a child's future functioning. The earlier the intervention the better for both the parent and the child.

Myth 3. You won't recover from depression.

The majority of women and men recover from PND with treatment.

Myth 4. Only 'weak', 'lazy' or 'bad' parents get depressed.

Major depression is a biological illness (explained by chemical imbalances in the brain) with a strong genetic basis. Depressed mothers and fathers are not weak, lazy or bad. They are medically ill and need treatment. Depressed parents cannot change their feelings; it is not a reflection of their parenting skills.

What are the treatments for post-natal depression?

The good news is that there is an extensive range of treatments to help with depression. Your GP or other health professional can tailor an appropriate management plan for you. Typical treatments may include a mixture of lifestyle modifications, practical and emotional support as well as psychological therapy interventions (e.g. cognitive behaviour therapy or interpersonal therapy). If symptoms are more severe, medication may be recommended in conjunction with other supports.

Where to get help

The earlier you seek support, the faster you can recover. Talking to a health professional is a great place to start. Many women and men talk to us about the relief they feel to be able to put a name to what they are experiencing. A diagnosis can make people feel less overwhelmed and more in control. Health professionals can offer effective treatments for postnatal depression and anxiety. Medicare rebates are available under a mental health care plan. Alternatively you can reach out directly without a referral.

* Helplines if you need immediate support

Beyond Blue	1300 224 636 (24hours)
Karitane	1300 227 464 (24hours)
Post and Antenatal Depression Association	1300 726 306 (Mon-Fri:10-5pm)
Pregnancy, birth and baby helpline	1800 882 436
Tresillian	1300 272 736 (Mon-Sun: 7am-11pm)

References

www.beyondblue.org.au/get-support/who-can-assist
<https://healthyfamilies.beyondblue.org.au/pregnancy-and-new-parents/maternal-mental-health-and-wellbeing/depression>
cope.org.au/first-year/what-can-make-things-harder/
raisingchildren.net.au/articles/men_and_postnatal_depression.html