

How is it treated?

The best treatment for postpartum depression is:

- Support from your family and friends
- Individual or group therapy
- Medicine which can be used while breastfeeding (prescribed by your doctor)

What can I do?

Being a good mom means taking care of you and your baby. You can take better care of both of you if you:

- Are honest about how much you can do, and ask other people to help you when you need it.
- Find someone to talk to about your feelings.
- Talk with your doctor.
- Find time to do something for yourself, even if it is only 15 minutes a day.
- Get enough rest; sleep when the baby sleeps.
- Eat a healthy diet.
- Stay active.
- Keep a diary of your emotions and feelings.

What else should I know?

It is very common for new moms to have the “baby blues.” Approximately 80% of new mothers will experience the baby blues within a couple days of giving birth. These feelings usually come and go within the first two weeks after birth and go away without treatment. Usually feeling sad, tearful, irritable and anxious will not keep you from caring for your baby.

If these symptoms persist longer than 2-3 weeks you may have postpartum depression. Postpartum depression affects 1 in 8 women.

You have experienced many changes since the arrival of your child – physical, emotional and lifestyle. Experiencing postpartum depression is not your fault and does not mean you are not a good mother. If you are depressed, you need to get help. It will not get better on its own.

Who do I call for help?

Call your obstetrician or primary care physician

My doctor: _____

My doctor's phone number: _____

If you feel you are a danger to yourself or your infant, go to the nearest emergency room immediately.

Outpatient Assistance Resources include:

Postpartum Support International
www.postpartum.net

References:

American Academy of Family Physicians. (2008) Postpartum depression and the baby blues. Retrieved October 6, 2008 from <http://familydoctor.org/online/famdocen/home/women/pregnancy/ppd/general/379.printerview.html>
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(2008). Partnership for women's health: a new age collaborative program for addressing maternal depression in the postpartum period. *Families, Systems, & Health* 26(1), 30-43.
Edinburgh Depression Scale taken from the *British Journal of Psychology* June 1987, Vol. 150 by J.L. Cox, J.M. Holden, R. Sagovsky.



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**POSTPARTUM
DEPRESSION**

WHAT YOU NEED TO KNOW

McLaren
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DOING WHAT'S BEST.



Postpartum Depression

Postpartum depression is a medical illness that occurs after the birth of a child that negatively affects the way you feel and act. This may occur right after delivery or up to one year after childbirth.

Common characteristics of postpartum depression are:

- Less energy and motivation to do things
- Showing little interest in your baby
- Feeling sad, restless, irritable or anxious
- Difficulty sleeping or sleeping more than usual
- Feeling worthless, hopeless or guilty
- Loss of interest or pleasure in life
- Feeling like life isn't worth living
- Unexplained weight loss or gain
- Frequent crying or tearfulness

How is it detected?

The Edinburgh Postnatal Depression Scale is a screening tool used to help identify mothers suffering from postpartum depression. Complete the following 10 questions at 7 days after delivery and again at 6 weeks after delivery. Total your score and write it in the next column.

Edinburgh postnatal depression scale

I have been able to laugh and see the funny side of things.

0. As much as I always could
1. Not quite so much now
2. Definitely not so much now
3. Not at all

I have looked forward with enjoyment to things.

0. As much as I always could
1. Rather less than I used to
2. Definitely less than I used to
3. Hardly at all

I have blamed myself unnecessarily when things go wrong.

0. No, not at all
1. Hardly ever
2. Yes, sometimes
3. Yes, very often

I have been anxious or worried for no good reason.

0. No, not at all
1. No, not much
2. Yes, sometimes
3. Yes, quite a lot

I have felt scared or panicky for no good reason.

0. No, not at all
1. No, not much
2. Yes, sometimes
3. Yes, quite a lot

Things have been getting on top of me.

0. No, I have been coping as well as ever
1. No, most of the time I have coped quite well
2. Yes, sometimes I haven't been coping as well as usual
3. Yes, most of the time I haven't been able to cope at all

7. I have felt sad or miserable.

- 0 No, not at all
1. Not very often
2. Yes, quite often
3. Yes, most of the time

I have been so unhappy that I have had difficulty sleeping.

0. No, not at all
1. Not very often
2. Yes, sometimes
3. Yes, most of the time

I have been so unhappy that I have been crying.

0. No, never
1. Only occasionally
2. Yes, quite often
3. Yes, most of the time

The thought of harming myself has occurred to me.

0. Never
1. Hardly ever
2. Sometimes
3. Yes, quite often

Add up each number from your answers.

A score of 12 or more indicates possible depression. Call your doctor or one of the resources listed on this brochure.



“Experiencing postpartum depression is not your fault.”