

Perinatal Mental Health

Most women have good mental health during pregnancy but pregnancy does not stop women from having mental health problems. Some women may already have a mental illness when they get pregnant. Others worry about mental health problems they have had in the past – fearing they will become ill again. Some women have mental health problems for the first time in pregnancy.

Mental health and the time around child birth

Depression and anxiety are the most common mental health problems in pregnancy. These affect about 10 to 15 out of every 100 pregnant women.

Women who have suffered from mental illness in the past are more likely to become ill again in the first year following the birth, even if they have been well for years. Seven out of every 10 women who stop antidepressants, without guidance or support, in early pregnancy become unwell again.

Symptoms of mental illness in pregnancy are similar to symptoms experienced at other times. Some symptoms might focus on the pregnancy, for instance, you may have anxious or negative thoughts about your pregnancy or your baby. You may find changes in your weight and shape difficult, particularly if you have had an eating disorder.

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How your mental health is affected during pregnancy depends on many things. These include:

- whether you have had a mental illness before
- whether you are currently on treatment
- recent stressful events in your life (such as a death in the family or a relationship ending)
- how you feel about your pregnancy. You may or may not be happy about being pregnant. You may have upsetting memories about difficulties in your own childhood.

Mental Health after child birth

Over half of new mums will experience the 'baby blues'. This usually starts three to four days after birth. You may have mood swings. You may burst into tears easily. You can feel irritable, low and anxious at times. You may also over-react to things. It usually stops by the time your baby is about 10 days old. Women with baby blues do not need treatment but if these symptoms continue for more than two weeks, you should tell your health visitor or GP. They can check whether you have postnatal depression.



Postnatal depression

Becoming depressed after your baby is born is called postnatal depression (PND). It usually begins sometime during the first six months after the birth and affects 10-20% of new mothers. About a third of women with postnatal depression have symptoms which start in pregnancy and continue after birth. Signs to watch out for include:

- feeling irritable and angry
- crying or often being on the verge of crying
- feeling unable to cope
- worrying unnecessarily about things that wouldn't normally bother you
- being afraid of being left alone with your baby
- uncontrollable feelings of panic
- overwhelming fears, for example fear of dying
- dreams about harming your baby
- sleeping problems, feeling exhausted and lethargic
- lack of interest in your surroundings and appearance, or becoming obsessively tidy
- trouble concentrating, and feeling distracted
- gaining or losing large amounts of weight
- loss of pleasure in activities you usually enjoy, including loss of libido
- feelings of guilt that you're a bad mother

Many possible causes for PND have been suggested. There is probably no single reason, but a number of different stresses may add up to cause it.

Depressed mums often worry they may harm their baby, but this is very rare. Sometimes through utter tiredness and desperation, you may feel like hitting or shaking your baby. Many mums (and dads)

occasionally feel like this, not just those with postnatal depression. Even if you have these feelings, most mums never act on them. If you do feel like this, you should tell someone. You shouldn't worry that your baby will be taken away, your GP, health visitor and midwife all want to help you to get better.

A small number of women with very severe depression develop psychotic symptoms. They may hear voices and have unusual beliefs. If this happens, you should seek help urgently.

Postpartum or Puerperal Psychosis

This is the most severe type of mental illness that happens after having a baby. It affects around one in 1000 women and starts within days or weeks of childbirth. It can develop in a few hours and needs urgent treatment.

There are many possible symptoms. Your mood may be high or low and there are often rapid mood swings. You may experience psychotic symptoms e.g. you may believe things that are not true (delusions) or see or hear things that are not there (hallucinations).

Women with this illness always need medical help and support. You may have to go into hospital but services will always try to bring help to your home if it is at all possible.

Women who have had previous episodes of severe mental illness, particularly bipolar disorder, are at a high risk of postpartum psychosis. Women, who have had a severe episode of illness following a previous delivery, are also at very high risk. Tell your doctor or midwife about your mental health, as this will increase the chances of you staying well.

Although puerperal psychosis is a serious condition, the vast majority of women make a full recovery.

Help, support and treatment

The sooner you seek help, the better. While many women will recover from postnatal depression within three – six months without any treatment; one in four women are still depressed when their child is one year old.

Postnatal depression can spoil the experience of new motherhood. It can put a strain on your relationship with your baby and partner. You may not look after yourself or your baby, as well as you would when you are well.

The treatment you are offered will depend on how unwell you are. You should be told about the benefits and risks of treatment.

Talking therapy / counselling

Talking about your feelings can be helpful, however depressed you are. Sometimes, it's hard to express your feeling to someone close to you. Talking to a trained counsellor or therapist can be easier. All general practices now have access to a counsellor.

Cognitive Behaviour Therapy

Cognitive Behavioural Therapy can help you to see how some of your ways of thinking and behaving may be making you depressed. You can learn to change these thoughts, which has a positive effect on other symptoms. Some counselling and psychotherapy services will see you more quickly if you have recently had a baby. Ask your GP or health visitor about services in your local area.

Support Groups

Ask at your GP surgery to find out if there is a group near you.

Antidepressants

If you have a more severe depression, or it has not improved with support or a talking therapy, an antidepressant will probably help.

There are several types of antidepressants. They all work equally well, but have different side-effects. They can all be used in postnatal depression, but some are safer than others if you are breastfeeding. Some antidepressants have been used in breastfeeding for many years. Your doctor can provide up-to-date information and advice – especially about newer medications and breast feeding.

To decide whether to breastfeed when taking an antidepressant, you need to think about:

- how severe your illness is (or has been in the past)
- treatments which have helped you before
- side-effects
- up-to-date information about the safety of medication in breastfeeding
- the benefits of breastfeeding
- whether your baby is very premature or has any health problems
- the impact of the untreated illness on your baby.

Antidepressants take at least two weeks to start working. You will need to take them for around six months after you start to feel better.

Hormones

Hormones have been suggested as a treatment for PND. However, there is little evidence that they work, and they have their own dangers, particularly if you have had thrombosis (blood clots in their veins).

Further information and help

The Angela Harrison Charitable Trust

A registered Cornish charity which aims to help local women and their families by raising awareness and providing information about postnatal depression/illness.

www.help4mums.co.uk

National Childbirth Trust

Providing advice, support and counselling on all aspects of childbirth and early parenthood.

Support line: 0300 330 0700

Net Mums

A website offering support and information on pregnancy and parenting. There is a specific section of the website offering support. There is also information on local resources and support groups.

www.netmums.com

The Association for Postnatal Illness

Telephone helpline and information leaflets for women with postnatal mental illness. Also a network of volunteers (telephone and postal), who have themselves experienced postnatal mental illness.

www.apni.org/

Telephone: 020 7386 0868 between 10am-2pm, Monday to Friday.

Family Action

Support and practical help for families affected by mental illness. Includes 'Newpin' services - offering support to parents of children under 5 whose mental health is affecting their ability to provide safe parenting.

www.family-action.org.uk

bumps

Information on the best use of medicines in pregnancy.

www.medicinesinpregnancy.org

Samaritans

National organisation offering support to those in distress who feel suicidal or despairing and need someone to talk to.

www.samaritans.org

116 123 - call free any time, from any phone