

Fife Clinical

Psychology Department



Postnatal Depression

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Postnatal Depression

This leaflet aims to give you **information** about **Postnatal Depression**.

If you are struggling with Postnatal Depression, it is important to tell your GP, Midwife or Health Visitor about how you are feeling. You may decide you need more support and want to be referred to a therapist. Your GP, Midwife or Health Visitor will be able to arrange this for you. Your GP might also offer you medication which can help ease the symptoms of depression.

Having a new baby

Becoming a parent can be a time of great excitement and joy. However, it is also a time of significant change and adjustment for you and your family. It is normal to feel overwhelmed because many life changes are happening in such a short space of time.

Some of the things that you may have to adjust to include:

- your new role as a parent (or if this is not your first child, then adjusting to coping with more children)
- changes in your relationship with your partner
- having less free time for hobbies, relaxation, socialising
- changes in your other relationships (i.e. with family members and friends)
- changes to your working life/professional status
- possible financial pressures
- a greater sense of responsibility

It is perfectly normal to feel a bit low in mood or stressed as you find ways of adjusting to your new situation. Many new parents feel exhausted from lack of sleep at this stage, and this can make it even harder to cope with the changes in your lifestyle. It takes time for women, couples and families to adjust to a new baby. Given time, things should start to get easier as you begin to feel more confident in your new role as a parent.

That being said, if you continue to struggle with low mood for several weeks or months after having your baby, or if these feelings seem to be getting worse, then you may be suffering from postnatal depression.

What is the difference between the “baby blues” and Postnatal Depression?

It is thought that as many as 80% of new mothers will experience feelings of weepiness in the few days after the birth. This heightened emotional state is caused by hormonal changes and also because once the initial ‘high’ of giving birth dies down, natural fears may start to creep in. This is called ‘the baby blues’ and usually disappears after a few days.

However, if the feelings of low mood and tearfulness persist for several weeks or months then you may have postnatal depression. Sometimes the depression starts during pregnancy (this is called Antenatal Depression), or anytime after the birth within the first year. It is thought that 10-20% of women suffer from postnatal depression. It is also common for women who are suffering from postnatal depression to experience anxiety symptoms as well.

Even though postnatal depression is now quite well known, women can still feel ashamed or embarrassed about admitting to having difficult feelings after they have had a baby. People often expect women to see motherhood as a time of joy and excitement. Or people might say things like “Don’t worry, you’re just tired.” This type of response from others can make it even more difficult to admit that there is a problem.

Signs of Postnatal Depression

These are some of the signs or symptoms you may experience if you have postnatal depression:

Changes in your emotions or feelings

- Feeling sad, upset, numb, disconnected, despairing
- Feeling that you can’t cope as well as normal
- Feelings of guilt and inadequacy (e.g. about having negative feelings when you have just had a baby)
- Crying a lot *or* feeling unable to cry
- Loss of interest and enjoyment in things you previously enjoyed
- Feeling alone even in company
- Feelings of anger, frustration or irritability

Changes in your thoughts

- Losing confidence in yourself
- Expecting the worst and having negative or gloomy thoughts
- Thinking that everything seems hopeless
- Thoughts of suicide
- Thinking you hate yourself
- Worrying about not feeling love towards your baby

Changes in your body

Although some of these symptoms are normal after giving birth some may be worse if you are depressed:

- Poor memory or concentration
- Restlessness
- Poor sleep (which is not due to your baby waking in the night)
- Feeling worse at a particular time of day (usually morning)
- Changes in appetite
- Tearfulness

Changes in your behaviour

- Finding it difficult to do even the simplest of things
- Having difficulty bonding with your baby
- Not doing your normal activities because of how you are feeling
- Cutting yourself off from other people
- Being inactive; just sitting doing nothing for long periods of time
- Finding it difficult to see the funny side of things

It is important to note that not everyone who is depressed has all of these symptoms. However if you experience several of the symptoms listed above, and these are not getting better over time then you may be suffering from depression. It is important that you take steps to help yourself and/or seek help from others.

What causes Postnatal Depression?

We do not know exactly what causes postnatal depression. Most people believe that the changes in levels of hormones (which we know affect our mood) during pregnancy and after the birth must have something to do with it but this is usually not the only reason. Usually there is more than one reason and this differs from person to person. Sometimes depression can start without any obvious cause. Psychological and social factors are important. For example, social isolation, not having a supportive partner or a good support network can be a risk factor. If you have had depression in the past then this can also make you more likely to have postnatal depression.

Depression is likely to be caused by a combination of things, including:

- Family history of depression
- Hormonal changes during pregnancy and after the birth
- Psychological factors (e.g. low self esteem, difficult childhood experiences)
- Social factors (e.g. relationship difficulties, being in an abusive relationship, lack of support from family /friends, social isolation)
- Stressful life events (e.g. illness, bereavement, job loss)
- Circumstances (e.g. money worries, physical illness, unemployment).

Are some people more likely to become depressed than others?

Some people seem to be more vulnerable than others to develop depression. This may be because of body make up (including body chemistry) or because of early life experiences and family influences. Some people may be generally more inclined to “look on the gloomy side” of life, and this may make them more likely to develop depression.

How can you help yourself to feel better if you are suffering from depression?

Even if you have a doctor or mental health worker involved in your treatment there are things you can do to help yourself in overcoming depression.

1) Do something active

Physical activity helps us feel better. Introducing physical activity into your daily routine will begin to make you feel less tired and more energised. Plan to do 15 or 20 minutes of activity every day, or every other day, to begin with and build this up over time. The trick is to force yourself to do some activity, even though you don't feel like it. If you are not used to exercising, walking can be the easiest form of exercise to do with a new baby. Going for a walk often helps to settle the baby and can be quite therapeutic if you have a lot on your mind. Getting out of the house and breathing in a bit of fresh air (even in winter) can help you to feel better. Swimming is another good form of gentle exercise following childbirth. If you are recovering from a caesarean section or a difficult birth then you will have to discuss what exercise you can do with your Midwife, Health Visitor or GP.

Yoga is recommended if you are suffering from depression and there are specific courses for women who have just given birth. Yoga encourages both physical and mental well being by combining gentle stretching with breathing, meditation and relaxation techniques. There are often classes available for mothers and babies. Contact the 'British Wheel of Yoga' (www.bwy.org.uk) or look out for classes at your local sports centre. These sorts of classes also provide a good opportunity for meeting other mothers.

Try to **prioritise what needs to be done** around the house. You will be very busy trying to care for your baby and need to **take time to relax and rest**. Although it is tempting to rush around catching up on chores while your baby sleeps, this can be a good opportunity to have a break or catch up on some sleep. This may involve putting up with mess or leaving tasks unfinished, but you will cope better if you fit some relaxation time into your day.

It is important to make sure life is not all chores and no enjoyment. Even though it can seem impossible to fit more into your day when you are busy with a new baby, try to think about doing relaxing activities that you enjoy that you could do around the house or fit into your day. For example, take a bath, read a magazine, go for a swim, do your nails. **Be kind to yourself.** You are not feeling your usual self. If you had flu or a bad cold you would try and do something nice to make yourself feel a little better. Try and 'treat' yourself by doing something you enjoy each day.

When your baby is sleeping or if you have someone who can help look after your baby for half an hour, try introducing some **relaxation** exercise into your daily routine. There is a separate information leaflet on relaxation and audio recordings of exercises at www.moodcafe.co.uk

You can also ask your GP for a copy of the psychology department relaxation CD.

The following questions might be helpful to consider:

What do you enjoy?

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What could you do today, even for 10 minutes?

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Sometimes it is better to **do in spite of how you feel.** After the activity, ask yourself – How do I feel? Better? Worse? The same?

If worse, try something else.

2) Talk to others

We know that a lack of social support contributes to depression. Try and tell those close to you how you are feeling. They may be able to listen and help you to think things through. You may be surprised to find those you talk to have also felt depressed at some time and can understand how you feel. We are often reluctant to share our feelings with others because we don't want to worry or burden them. However, people are often relieved when you finally open up to them. It may help to let them read this booklet.

3) Look after yourself

Resist the temptation to cope with depression by turning to alcohol, misusing medication or turning to illegal drugs. These may give some immediate relief but quite soon create further health and psychological problems for you to cope with.

Eat well; a **good diet** will keep you in good health so recovery is easier. It can be easy to skip meals, binge on junk food or pick at food throughout the day. Aim to eat 3 meals and 2-3 snacks every day. Make sure that you drink enough fluid to avoid dehydration. Try to add an extra litre of water to your usual intake of fluid each day. Remember too many drinks that are high in caffeine (such as tea, coffee and fizzy drinks) will cause you to be dehydrated, can interfere with your sleep and can cause headaches.

4) Challenging negative thinking

It is very common for people who are suffering from depression to think more negatively than usual and to expect the worst. Negative thinking makes depression worse because the thoughts are usually not a realistic reflection of what is actually happening. It's almost as if the depression causes you to look at the world through a different pair of eyes; ones that put a negative slant on things.

It is important that you try not to simply accept these thoughts as if they are facts. Instead try to:

- Learn to recognise when your mood is getting lower and try to identify what could have triggered the change in your mood or the increase in negative thinking?
- Write down the unpleasant or negative thoughts
- Try and counter these thoughts by writing down arguments against them. Imagine what you would say to a friend if they had the same negative thoughts about themselves
- Try and keep a diary of things you have enjoyed or achieved during the week. This can help you to concentrate on some of the good things in your life and not just the bad things

Below is an example of how you might do this:

Feeling	Unpleasant Thought	Arguments against the unpleasant thought	What's gone well recently?
<i>Low, grumpy</i>	<i>My friends never phones these days</i>	<i>They are probably just busy and this is not a sign they don't care. I haven't phoned them either.</i>	<i>I've managed to go for a walk each day.</i>

This is not just about saying 'look on the bright side' or 'think positively.' What we know is that when people are depressed they have a darker, more negative view of themselves and the world in general. If you can learn to recognise these negative thinking patterns, begin to question them and build up a more realistic view of things, then your mood should begin to lift. If you just accept the negative thoughts without checking out how accurate they are, then this will feed into the depression.

What treatment is available for depression?

Overcome your fear of asking for help

Many women are scared to tell their Midwife, Health Visitor or GP about how they are feeling. Women often feel ashamed or embarrassed at having negative feelings about becoming a mother or worry that they will be seen as an unfit mother. In fact, professionals would prefer you to tell them about any negative feelings, rather than waiting until your depression becomes more severe. You will not be condemned as an unfit mother, nor will your child be taken away from you. Your Midwife, Health Visitor and/or GP will be able to offer support and advice. If you have a bad experience opening up to a professional, do not give up – try to speak to someone else. There is support and help out there for you.

Self Help

Self Help (such as reading this leaflet or recommended books and web sites) is an option that some women prefer to try as a first step. You will find a list of recommended books and websites at the end of this leaflet. A number of these books are also part of the Fife book prescription scheme. This means that your GP or Midwife can ‘prescribe’ you a self help book which you can then get out of the library. Further details are available at www.moodcafe.co.uk or you can ask your GP or Midwife. However, if you find that self help is not enough and your symptoms of depression are not lifting then it is important that you speak to your GP, Health Visitor or Midwife about how you are feeling.

Medication

Anti-depressant medication may be an option to consider. These can help to take the edge off some of the symptoms by increasing a chemical called “serotonin” in the brain. People often worry in case anti depressants are addictive so they are reluctant to try them. Anti-depressants are **not addictive** – you will be able to come off them

whenever you and your GP decide the time is right. If you are breast feeding then you will need to discuss the options with your GP.

Talking Treatment

Talking therapies have been proven to be a recommended treatment for postnatal depression. If you tell your Health Visitor, GP or Midwife about how you are feeling, they will be able to refer you to a local therapist for an assessment. Usually postnatal women are prioritised for treatment but you may still have to wait a few weeks, so the sooner you open up about your feelings, the sooner you will receive help.

The talking treatments are usually counselling or therapy. Counselling or therapy involves talking to a trained health professional about your feelings and experiences. They will help you understand your difficulties and begin to work out ways of overcoming the depression. 'Cognitive Behavioural Therapy' (CBT) is one kind of therapy that is often used in the treatment of depression. Whatever type of therapy is used, it will usually take a little time before you begin to feel the benefits, but treatment of this kind has helped many people and can be very effective.

Remember, you are not alone. The first step is to acknowledge you have a problem and be brave enough to seek help. This is often the most difficult part of overcoming depression but will help you on the road to recovery.

Further help

Useful Websites:

Postnatal Illness Org UK:

<http://www.pni.org.uk/>

This is written by women who have suffered or are suffering from postnatal illness, and gives useful accounts based on people's own experiences. However, a word of caution – as this has not been written by medical professionals, some of the factual information may not always be entirely accurate so check anything you are not sure about with your GP or midwife.

NHS 24:

http://www.nhs24.com/content/default.asp?page=s5_4&articleID=429

This provides good clear information about the symptoms, causes, diagnosis, and treatment of postnatal depression.

'Mind' website:

http://www.mind.org.uk/help/diagnoses_and_conditions/post-natal_depression

Good clear information about postnatal depression.

The following websites are interactive websites which use cognitive behavioural techniques to help you work through your problems online:

www.moodjuice.scot.nhs.uk

This site is designed to help you think about emotional problems and work towards solving them

www.moodgym.anu.edu.au

An excellent (Australian) site that helps you identify problem emotions and develop better coping skills. The site is very informative and is fun to use and good for all ages.

www.livinglifetothefull.com

This is an online cognitive behavioural therapy programme for people with anxiety and depression and includes: Understanding why we feel as we do / Practical problem solving skills / Using Anxiety Control Training relaxation / Overcoming Reduced activity / Helpful and Unhelpful behaviours / Using Medication effectively / Noticing unhelpful thoughts / Changing unhelpful thoughts / Healthy living - sleep, food, diet and exercise / Staying well.

Other websites you might find helpful:

Depression Alliance website:

www.depressionalliance.org

Although this is not written specifically for antenatal or postnatal difficulties it contains good information about symptoms and treatments of depression as well as Depression Alliance campaigns and local groups.

Living in Fife:

www.livinginfife.scot.nhs.uk

The Living in Fife Website has been designed specifically for people living in Fife. It provides both local and national information about support services.

Scottish Marriage Care:

<http://www.scottishmarriagecare.org/>

Scottish Marriage Care provide relationship counselling to couples and individuals all over Scotland.

Relationships Scotland:

<http://www.relationships-scotland.org.uk/index.shtml>

Relationships Scotland offer confidential relationship counselling and sexual therapy for couples and individuals.

Fife Clinical Psychology Department Website

<http://www.dwfchp.scot.nhs.uk/psychology>

Useful Self Help Books:

The following books are available in all Fife libraries or can be purchased from most good book stores. A number of the books below are also part of the Fife book prescription scheme. This means that your GP can 'prescribe' you a self help book which you can then get out of the library. Further details are available at www.moodcafe.co.uk or you can ask your GP.

Curham, S. (2000) Antenatal and postnatal depression. Practical advice and support for all sufferers. Vermilion.

ISBN: 9780091856075

Available as a book prescription

Williams, C., Cantwell, R. & Robertson, K. (2009). Overcoming postnatal depression. A five areas approach. Hodder Arnold.

ISBN: 978-0-340-97234-2

Available as a book prescription

Aitken, C. (2000). Surviving post-natal depression: At home, no one hears you scream. Jessica Kingsley Publishers.

ISBN: 978 1 85302 861 8

Available as a book prescription

Nicolson, P. (2001) Postnatal depression: Facing the paradox of loss, happiness and motherhood. Wiley.

ISBN: 0-471-48527-6

Below are some more books for depression in general (not specific to antenatal or postnatal period) – but still likely to be useful:

Burns, D. (2000) Feeling good: The new mood therapy. Avon Books.

ISBN: 0380731762

Available as a book prescription

Butler, G. and Hope, T. (1995) Managing your mind: The mental fitness guide. Oxford.

ISBN: 0192623834 (Chapter 20 is particularly relevant)

Available as a book prescription

Gilbert, P. (2000) Overcoming depression. Constable and Robinson.

ISBN: 1841191256 (Every chapter lists key points at the end. Step-by-step process makes it easy to follow.)

Golant, M. and Golant, S. (1998) What to do when someone you love is depressed. Henry Holt Publishers.

ISBN: 080505829X

Greenberg, D. and Padesky, C. (1995) Mind over mood: Change how you feel by changing the way you think. Guilford Press.

ISBN: 0898621283

Available as a book prescription

Rowe, D. (1996) Depression: The way out of your prison. Routledge.
ISBN: 0415144825 (Hard reading in places)

Telephone Help lines:

The following organisations and help lines may also be useful:

Breathing Space – mental health helpline

(Mon - Thurs: 6pm-2am, Fri – Mon: 6pm-6am) Tel: 0800 83 85 87

CRUSE Bereavement Care Scotland - help line for bereaved people
and those caring for bereaved people

(Mon - Fri: 9.30am-5pm) Tel: 0845 600 2227

Depression Alliance Scotland – helpline for depression

(Mon - Fri: 11am-1pm, 2pm-4pm) Tel: 0845 123 2320

Bipolar Fellowship Scotland – help for those experiencing severe
depression

(Mon - Fri: 9.30am-3.30pm) Tel: 0141 400 1867

(Mon - Fri: 9am-9pm, Sat: 9.30am-1pm) Tel: 0808 808 4000

Samaritans – confidential support for anyone in a crisis

24 hours Tel: 08457 90 90 90

Textphone: 08457 90 91 92