

Parenting can be difficult. Adjusting to life as your family changes and grows can be a time of great stress. During this time, mothers and fathers can experience Postnatal Depression

Almost one in five mothers develop postnatal depression (PND). What many people don't know is that one in ten fathers experience postnatal depression. PND can happen either a few days or weeks or even months after the birth, with a slow or sudden onset.

Some women may even experience depression **during** the pregnancy (this is called antenatal depression). The range of symptoms experienced depends on the severity of the depression. Treatments for postnatal and antenatal depression may include support, therapy and medications.

Exact causes of PND are unknown. Symptoms of PND may include lack of confidence, negative thoughts, feelings of being unable to cope or that life is meaningless, anxiety, difficulty sleeping and loss of appetite.

After having a baby, up to 80 per cent of women may develop the 'baby blues'. This feeling passes in a day or two and is different to postnatal depression (PND).

PND is a depression that comes on within 12 months of having a baby, usually during the first few weeks or months. It can range in severity from very mild and transient, to severe and lingering.

For most mums, it passes quickly; for others, professional help is needed.

Symptoms of Postnatal Depression include:

- Low self-esteem and lack of confidence
- Feelings of inadequacy and guilt
- Negative thoughts
- Feeling that life is meaningless
- Feeling unable to cope
- Tearfulness and irritability
- Difficulty sleeping or changes in sleeping patterns
- Low sex drive
- Anxiety, panic attacks or heart palpitations
- Difficulty concentrating or remembering things and/or loss/changes in appetite

Risk Factors for PND

Like depression which occurs at any other time, postnatal depression doesn't have one definite cause—but it's likely to result from a combination of factors including ;

- A past history of depression and/or anxiety
- A stressful pregnancy
- Depression during pregnancy
- Experiencing severe baby blues
- A prolonged labour and/or delivery complications
- Problems with the baby's health
- Difficulty breastfeeding
- A lack of practical, financial and/or emotional support
- Past history of abuse
- Difficulties in close relationships
- Sleep deprivation
- Being a single parent
- Having an unsettled baby (e.g. difficulties with feeding and sleeping)
- Having unrealistic expectations
- Moving house
- Making work adjustments (e.g. stopping or re-starting work).

Contributing factors

The exact causes of PND are still not known. Some contributing factors might include;

- **Physical changes** - even a relatively easy birth can be an overwhelming experience for the female body. In addition, the sudden drop in pregnancy hormones affects brain chemicals (neurotransmitters). Broken sleep and exhaustion can also contribute to depression.
- **Emotional changes** - adapting to parenthood is daunting. A new parent has to deal with the constant demands of a baby, different partner relationship dynamics and the loss of independence. Such changes would be hard at the best of times, but can be even more overwhelming when a new mum is still physically recovering from childbirth and coping with interrupted sleep.
- **Social changes** – The pressures of becoming a parent can be tough. These include financial pressures, often adjusting to living on one wage. Other changes include relationship with your partner, additional responsibilities and interrupted sleep. Challenges may also include adjusting to the parenting role and where you fit in, and trying to maintain social relationships.

Postnatal depression and family relationship

Postnatal depression can put an enormous strain on any relationship, even when the partner is patient, loving and supportive. It isn't unusual for a couple battling PND to think that their relationship has soured beyond repair. Generally, this is not the case, since most relationships return to normal once the depression lifts. A parent with PND may withdraw from everyone, including the baby. The good news is that once the depression lifts, a parent will be able to once again feel the full range of emotions and enjoy parenting.

How is Postnatal Depression treated?

Psychological treatment has generally been found to be the most effective way of treating postnatal depression. Psychology treatment can help by changing negative thoughts and feelings, encouraging involvement in activities and preventing depression from getting serious again. Medication can play an important role in helping people with depression manage from day to day. The decision to take medication is up to the individual and should be made in consultation with your doctor.

Where to get help

- Your GP
- Psychiatrist/Psychologist/Social Worker
- PANDA (Post and Ante Natal Depression Assoc.)
National Perinatal Depression Helpline -
Tel. 1300 726 306, Mon-Fri 9am to 7pm AEST
- The Royal Women's Hospital (03) 9344 2000
- Beyond Blue 1300 22 4636
www.beyondblue.org.au
- Tweddle Child + Family Health Service - Tel
(03) 9689 1577
- Lifeline 13 11 14
- Mensline 1300 78 99 78 www.mensline.org.au
- Maternal & Child Health Line 13 22 29