WHAT IS POSTPARTUM DEPRESSION?



Postpartum depression is a condition that affects 10-22% of women after childbirth. 60% of women have their first depressive episode in the postpartum period. During this period, there are rapid changes in the hormones, estradiol and progesterone, which can contribute to changes in mood. Having postpartum depression does not mean you are a "bad mother" – it only means that you there are factors at times out of your control that are affecting your mood.

It differs from other types of depression in that its symptoms are directly related to stressors associated with motherhood and caring for a baby. Postpartum depression usually occurs during pregnancy to up to a year postpartum, lasting weeks or even months. Postpartum depression is a common and treatable condition. However, if not addressed, it can develop into chronic depression.



"Baby blues" is milder and appears within 3-4 days after delivery, peaks on day 7, and disappears within 2 weeks, affecting **30-75%** of postpartum women. Baby blues presents with milder symptoms and is not generally treated.

COMMON SYMPTOMS & DISCOMFORTS

- Low mood
- Difficulty sleeping or sleeping more than usual
- Decreased interest or pleasure in almost all activities
- Low self-esteem, feeling guilty or worthless
- Low energy
- Difficulty concentrating
- Appetite changes or weight changes
- Others observe you are more restless or are moving more slowly than usual
- Thoughts, plan, or attempt at harming oneself or the baby

- Withdrawing from loved ones, the baby, family and friends
- Difficulty bonding with the baby
- Feeling overwhelmed with all the new responsibilities
- Feeling you are not meant to be a mother
- Feeling alone or socially isolated

If you are experiencing any of these feelings or symptoms, speak to your healthcare provider. They are here to help you navigate this challenging transition!

RISK FACTORS

- Previous depression during pregnancy
- Anxiety during pregnancy
- Stressful life events during pregnancy
- Low levels of social support

Personal or family history of depression

POSTPARTUM PSYCHOSIS

- Postpartum depression can present with "psychotic features"
- These include hearing voices others can't hear, seeing things that others don't, or having beliefs that others do not
- Sometimes these voices can tell you to harm your baby
- If you are experiencing any of these symptoms, please see a healthcare provider immediately

WHY SHOULD YOU SEEK MEDICAL ATTENTION?



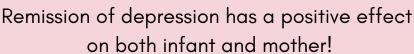
And why is it important for you and your baby to talk to a healthcare provider about what you are feeling?

Possible impacts on infant:

- Worsened delivery outcomes
- Breastfeeding difficulties
- Increased neonatal complications at birth
- Developmental delay
- Difficulty with emotional regulation
- Behavioural and attachment issues

Possible impacts on mother:

- Decreased bonding with baby
- Difficulties in daily functioning
- Persistent low mood
- Increased risk of suicide
- May lead to chronic depression if not treated

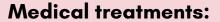




SO WHAT CAN WE DO ABOUT POSTPARTUM DEPRESSION?

Lifestyle treatments:

- Physical activity! Exercise with or without your infant has been shown to elevate mood.
- Prioritize sufficient sleep and delegate some responsibilities to partner if possible.
- Make time for friends and family social support is so important!



- Psychotherapy: Cognitive behavioural therapy (CBT) or interpersonal psychotherapy (IPT) are the most evidence-based treatments.
- Other treatments include medications such as antidepressants or a combination of psychotherapy and antidepressants – ask your healthcare provider about these options!



RESOURCES FOR SUPPORT

Mount Sinai Hospital - Perinatal Mental Health

Program (700 University Ave)

416-586-4800 ext. 8325

Psychiatric care, support groups

Referral form required

Sunnybrook Hospital - Women's Mood and Anxiety Clinic, Reproductive Transitions (2075

Bayview Ave)

416-480-5677

Psychiatric care, therapy, education

Referral form required

Women's College Hospital - Reproductive Life Stages Program (76 Grenville Street, 7th floor)

416-323-6230

Psychiatric care, education, psychotherapy, addiction consultation, parenting support Referral from family doctor or midwife

Support for Father's Mental Health

www.fathersmentalheatlh.com

Father's Mental Health Assessment and Treatment -

St. Joseph's Hospital - (30 Queensway, 3rd floor)

416-530-6825

Referral form required

Women's College Hospital - Mother Matters

416-323-6356

8-wk online support group for parents with mood/adjustment challenges - confidential discussion board (no video calls or meetings)

Register on website

Mindfulness-Based Therapy Group or Postpartum Support Group - Mount Sinai Hospital

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416-586-4800 ext.8325

Must be followed by a psychiatrist, requires referral from physician

Group for 8 wks on Wednesdays 1-2:45pm

Late Loss Bereavement Support Group - Mount Sinai Hospital

416-586-4800 ext. 8352

Loss after 20+ wks, or neonatal death, self-referral or referral from healthcare provider, Mondays 10:30-12pm

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Edinburgh Postnatal Depression Scale (EPDS)

Patient Label	Mother's OB or Doctor's Name:
	Doctor's Phone #:
the blank by the answer that comes closest to how you 10 items and find your score by adding each number th	by, we want to know how you feel. Please place a CHECK MARK () on have felt IN THE PAST 7 DAYS —not just how you feel today. Complete all at appears in parentheses (#) by your checked answer. This is a oesn't seem right, call your health care provider regardless of your score.
Below is an example already completed.	7. I have been so unhappy that I have had difficulty
	Sleeping: Yes, most of the time
	- (2) - (3) 8. I have felt sad or miserable:
This would mean: "I have felt happy most of the time" the past week. Please complete the other questions in same way.	in Yes, most of the time(3)
Not quite so much now Definitely not so much now	
I have looked forward with enjoyment to things: As much as I ever did Rather less than I used to Definitely less than I used to	10. The thought of harming myself has occurred to me:* Yes, quite often Sometimes Hardly ever Never 10. The thought of harming myself has occurred to me:* Yes, quite often (2) (3) (3) (4) (5) (6)
3. I have blamed myself unnecessarily when things we wrong: Yes, most of the time Yes, some of the time Not very often No, never	TOTAL YOUR SCORE HERE Thank you for completing this survey. Your doctor will score this survey and discuss the results with you. Verbal consent to contact above mentioned MD witnessed by:
Hardly ever Yes, sometimes	
Yes, sometimes No, not much	(3) (2) (1) (0)
6. Things have been getting to me: Yes, most of the time I haven't been able to cope at all Yes, sometimes I haven't been coping as well as usual No, most of the time I have coped quite well No, I have been coping as well as ever	(3) (2) (1) (0)