



Mood Changes During Pregnancy and After Childbirth

Pregnancy can be filled with emotional highs and lows. Having a new baby is challenging. Caring for yourself as well as your new baby is a lot of work. You will be going through many physical and emotional changes. You may find that some of these changes are not what you expected. Many times, along with joy and excitement, you may also be worried and sad.

It is important to be patient with yourself. Surround yourself with as much support as you can during this time. Even with patience and support, you may still feel overwhelmed and concerned. You may be telling yourself, “I didn’t expect to feel this way...”

Why do I feel this way?

There is no clear or single reason why our moods change. What you are feeling may be the “baby blues”. Or it may be something more serious. Perinatal* mental health disorders can happen before or after you deliver your baby.

***The term perinatal refers to the time of pregnancy through the first year postpartum.**

Is this normal?

It is very common to feel worry or sadness before or after you give birth. If you do feel like something is wrong, then trust your instincts and tell your provider. This does not mean that anything awful is happening. It may just be a sign that you are tired or overwhelmed and need some time and rest. Other times, you may need help to feel like you again.



Pregnant or postpartum moms/birthing persons can have different responses. Some are more common than others. **They can occur at any time up to a year following childbirth.**

Prenatal anxiety or depression

Some moms/birthing persons will have feelings of worry, sadness, fear, or confusion. Many times it is hard to tell others they feel this way. They may even deny these feelings. It is VERY important to tell your provider if you are feeling any of these symptoms, so he or she can help you before you give birth.

“Baby Blues”

Most new moms/birthing persons will experience the “baby blues” very soon after giving birth. This is **NOT** an illness, and will resolve on its own. The blues are brought on due to lack of sleep, breast engorgement and a major shift in hormones after childbirth. Feelings of short-term sadness, guilt, restlessness or impatience are common. Sometimes moms may notice themselves crying for no reason or feeling anxious. This is short-term and will stop within a week or two. The baby blues affect about 80% of new moms.

Postpartum anxiety or depression

About 1 in 10 moms/birthing persons will experience anxiety and about 1 in 7 will experience depression after childbirth. Symptoms can include:

- extreme worry
- sadness
- irritability
- trouble sleeping
- loss of interest in activities
- hopelessness
- changes in appetite
- loss of focus
- feelings of extreme guilt or shame
- not being able to care for yourself or your baby



Obsessive Compulsive Disorder (OCD)

About 3-5% of new moms/birthing persons experience OCD after childbirth. Symptoms include:

- counting/checking
- repeated behaviors (such as cleaning or hand washing)
- repeated thoughts or obsessions (also referred to as intrusive or scary thoughts)
- mental pictures of horrible scenes involving your baby or yourself
- fear of germs or taking extra measures to protect your baby

Bipolar Mood Disorders

Symptoms include mood swings that range from very high happy times to drastic lows or depression. If someone in the mother's family has bipolar mood disorder, the mother's risk for bipolar mood disorder is higher. Symptoms include:

- racing thoughts
- high energy/inability to sleep
- anxiety
- overconfidence
- impulsiveness
- severe periods of depression

Post-Traumatic Stress Disorder (PTSD)

About 9% of moms/birthing persons experience PTSD from childbirth. This can be due to a traumatic or perceived traumatic childbirth. Childbirth can also cause a person to remember previous abuse or assault.

Psychosis

About 1 or 2 new moms/birthing persons out of 1,000 will experience this serious illness. Symptoms usually come on very quickly and include very happy feelings, confusion, paranoia or seeing and hearing things that others do not.

What are the risk factors for developing a postpartum mental health disorder?

Postpartum mental health disorders can strike any new mom/birthing person. Sometimes we can identify risk factors ahead of time. Risk factors include:

- Having a high risk or stressful pregnancy
- Hormonal changes
- History of infertility
- Previous miscarriage or infant loss
- Family mental health history
- History of anxiety or depression
- History of any type of abuse or trauma
- Lack of sleep or social support
- Exposure to racism/discrimination
- Major life changes (such as a new job, moving, financial strain)



What does having a postpartum mental health disorder feel like?

- “It feels like an emergency only you know is happening. Like everything is on fire.”
- “It feels scary.”
- “Everything feels hopeless.”
- “I feel like no one understands.”
- “I can’t sleep even when my baby is sleeping.”
- “I can’t concentrate.”
- “I don’t remember the last time I laughed or felt joy.”
- “I have no energy to care for myself or my baby.”
- “My head and thoughts feel like they are spinning out of control.”
- “Everything seems to get on my nerves. I find myself getting angry at everything.”
- “I worry and have scary thoughts about purposely or accidentally harming my baby.”
- “Sometimes I feel like my baby would be better off without me.”
- “There are times when I feel like I would rather be dead than go on feeling like this for one more second.”

Will I ever be okay again?

YES. You are not alone. There is help.

- Don't blame yourself. You are a good parent and feeling this way is not a choice.
- Ask for help. Talk to your provider and let them know what you are feeling.
- Ask to be connected to a therapist trained in perinatal mental health.
- A support system is very important. Talk to someone you trust like your partner, friends or family about your feelings.
- Join a support group for new parents.
- Eat healthy and try and stay away from caffeine, alcohol, or sugary foods.
- Exercise and stay active to help keep up your energy.
- Allow yourself some personal time to read a book, watch a favorite television show or hang out with a friend. Do something that takes your mind off things.
- Avoid people or situations that make you feel anxious or stressed out.
- Have confidence in yourself and take one day at a time. And when that feels like too much, take one hour at a time, or one minute at time.
- Remember that the healing takes time.

Sometimes moms/birthing persons need to take medicine. Medicine can be a valuable tool in helping moms get well. There are many medicines that are safe and can be taken while you are breastfeeding. Your provider will help assess what the right choice is for you.

How can others help moms/birthing persons?

- Listen to their worries and concerns. Take them seriously.
- Assure them that they are not being judged.
- Remind them they are not to blame. Tell them that with help, they will feel better.
- Go with them to appointments if you are able.
- Take charge of household chores like laundry, cooking and cleaning.
- Remind them to rest and eat good nutritious foods.
- Remind them that they are important, cared for, and loved.



Don't be afraid to call for help if you know mom/birthing person needs it and is too scared or won't call themselves. As their partner or loved one, you may need to take charge. You could be saving their life.

Can partners or adoptive parents experience perinatal mood changes too?

YES. Perinatal mental health disorders, like depression or anxiety, are not just hormonally driven. One in ten partners can also have symptoms due to their role changes, expectations, stress of finances or simply caring for or bonding with the baby. Adoptive parents can have symptoms too. Perinatal mental health disorders in partners and adoptive parents have been linked to many of the same risk factors as moms/birthing persons. More research still needs to be done in this area.



“You are not alone. You are not to blame. With help, you will be well.”

-Postpartum Support International

Do I need help?

Edinburgh Postnatal Depression Scale (EPDS)^{1, 2}

Take this test during pregnancy or within the first two years of baby being born to find out if you need more help. Circle the answer that comes closest to how you have felt in **the past 7 days**, not just how you are feeling today.

1. 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

2. I have looked forward with enjoyment to things.

- 0=As much as I ever did
- 1=Rather less than I used to
- 2=Definitely less than I used to
- 3=Hardly at all

3. I have blamed myself unnecessarily when things went wrong.

- 3=Yes, most of the time
- 2=Yes, some of the time
- 1=Not very often
- 0=No, never

4. I have been anxious or worried for no good reason.

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

5. I have felt scared or panicky for no very good reason.

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

6. Things have been getting on top of me.

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

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

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

8. I have felt sad or miserable

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

9. I have been so unhappy that I have been crying.

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

10. The thought of harming myself has occurred to me.

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

If your score is **12 or higher 2 weeks in a row or question 10 is a positive**, call your provider.

¹ Cox, J.L., Holden, J.M. & Sagovsky, R. (1987) Detection of postnatal depression: Development of the 10-item Edinburgh Postnatal Depression Scale. *British Journal of Psychiatry*, 150, 782-786.

² K. L. Wisner, B. L. Parry, C. M. Piontek, Postpartum Depression N Engl J Med vol. 347, No 3, July 18, 2002, 194-199.

For Extra Support and Resources Contact:

- The Perinatal Emotional Support Program Coordinator (Bronson Methodist Hospital: 269-341-7175, Bronson Battle Creek: 269-245-5796)
- Your Primary Care Provider or OB/GYN.
- Postpartum Support International’s Helpline at 1-800-944-4773, or visit their website for other support resources at postpartum.net



***For IMMEDIATE HELP contact:**

- The National Maternal Mental Health Hotline at 1-833-TLC-MAMA (1-833-852-6262)
- Gryphon Place 24-hour suicide prevention/help line at 269-381-HELP
- The National Suicide Prevention Lifeline at 988
- 911

Information gathered in part from:

“Beyond the Blues” Shoshana Benett, PhD and Pec Indman, EdD

“This Isn’t What I Expected”, Karen Kleiman, MSW and Valerie Raskin, MD

Spectrum Health, Healthier Communities, Nancy Roberts, RN, CCE, CBC

Postpartum Support International