

Your Emotional Health During Pregnancy and the First Year Postpartum

Your emotional health during this time is extremely important. Below is a list of common distressing emotional reactions that 1 in 5 women will experience during pregnancy and the first year after childbirth.

- **Baby Blues**- Signs include weepiness, irritability, feeling overwhelmed and exhausted. Resolves or dramatically improves the first three weeks after childbirth. Up to 80% of women will experience the baby blues.
- **Depression/Anxiety** - Symptoms include feeling anxious, agitated, sleeping too much or difficulty “sleeping when the baby sleeps”, excessive worrying, tearfulness, irritability, anger, guilt & shame, feeling disconnected from your family and/or baby, appetite changes, difficulty concentrating, and possibly thoughts of harming yourself. (10-25%)
- **Panic** - Signs include feeling worried, anxious or very nervous most of the time combined with recurring panic attacks, which include heart palpitations, shortness of breath and/or chest pain, nausea/vomiting or fear of dying. (15%)
- **Posttraumatic Stress Disorder** - Can occur during pregnancy or following a childbirth that is perceived as traumatic. Usually involves distressing memories, irritability, difficulty sleeping, nightmares, hyper-vigilance, and efforts to avoid reminders of the trauma. Symptoms may be related to a prior traumatic experience or the birth itself. (3-5%)
- **Obsessive Compulsive Disorder** - Symptoms include intrusive and disturbing thoughts and/or images of harm coming to the baby, as well as a sense of horror about having these thoughts. Usually includes a preoccupation with keeping the baby safe through repetitive actions to reduce the fear and obsessions. *Women disturbed by these thoughts are very unlikely to ever act on them.* (3-5%)
- **Postpartum Psychosis** - Usually occurs within the first few days or weeks after birth. Includes having strange beliefs, hallucinations, irritability and agitation, inability to sleep, rapid mood changes, and poor decision-making. *Women with psychosis are not disturbed by the nature of their thoughts or find them unusual. Women with psychosis are at significant risk for harming themselves and/or their infants, and need immediate crisis intervention.* Occurs in 1-3 per 1000 births (.1-.3%)

- **For women with bi-polar disorder.** Women with bi-polar disorder are at a significantly higher risk of experiencing psychosis, particularly if they are extremely sleep-deprived. It is important to develop a wellness plan with a practitioner familiar with postpartum illnesses. Having adequate support is a must.

If you are experiencing any of the above symptoms, contact your healthcare provider right away. See www.utahmmhc.com for local resources in Utah as well as self-help strategies. Postpartum Support International, www.popstpartum.net, provides additional resources and a warm-line at (800) 944-4773 for phone support for women and their families. Keep reaching out until you find the help you need. You are not alone, you are not to blame, and with help you will be well!