Information on medications and pregnancy/ breastfeeding can be found in the Mother to Baby factsheets, available at www. mothertobaby.org/fact-sheets-parent/

What can you do to feel better?

- Don't blame yourself; you are not a "bad mother"
- Talk about your feelings with someone you trust
- It is OK to have some negative feelings about parenting
- Let your partner and/or family know how they can help you
- Try to rest when the baby sleeps
- Have healthy snacks and get help with meal preparation
- Avoid caffeine and alcohol
- Get out of the house every day for fresh air
- Be physically active every day
- Meet with other new mothers through a play group, parenting group or a group for women with postpartum depression (PPD) that feels comfortable for you
- · Trust your feelings

Postpartum depression is a common medical illness that is preventable and treatable. Seek support from family, friends and a health care professional.

Where to get help?

- · Your family doctor
- · Your obstetrician or midwife
- A social worker at your hospital
- Ask for a medical referral to a psychiatrist
- Toronto Public Health Nurse

Perinatal Support Services:

Toronto Public Health 416-338-7600 Perinatal adjustment program (offers 1:1 counselling)

Postpartum Support.......1-800-944-4773 International Helpline

Helpful websites:

www.mothertobaby.org

www.mountsinai.on.ca/care/psych/ patient-programs/maternal-infantperinatal-psychiatry/maternal-infantprogram-and-perinatal-mental-health

www.postpartum.net

www.toronto.ca/health/postpartumdepression

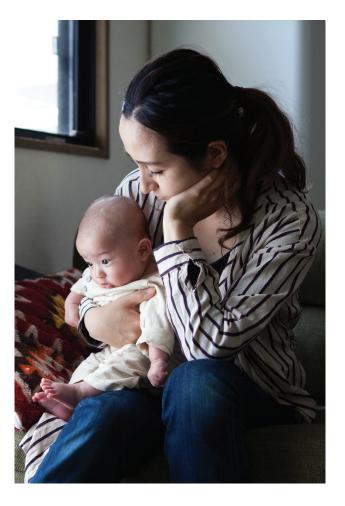
www.womenscollegehospital.ca/ programs-and-services/mental-health/ Mother-Matters

Perinatal Mental Health Program

Mount Sinai Hospital Joseph & Wolf Lebovic Health Complex 3-200, 700 University Avenue Toronto, Ontario M5G 1Z5 T 416-586-4800 x 8325 mountsinai.ca

Baby Blues and Beyond

What Every Woman Needs to Know About Perinatal Mental Health Issues





Postpartum Mood Disorders

Who is affected?

- 25% of women experience depression
- 30-50% of women with a history of depression will develop postpartum depression
- 10-16% of new moms will develop postpartum depression
- 50-70% will have a recurrence of postpartum depression with their next pregnancy

Which women are most at risk?

Women with current active psychiatric symptoms, personal or family history of mental illness, stressful life events and lack of social support are most at risk.

Depression During Pregnancy

Depression may start in pregnancy and should be discussed with your caregiver. Early treatment can prevent or minimize postpartum depression.

Symptoms may include:

- Sadness or hopelessness
- Lack of interest/pleasure
- Anxiety or irritability
- Sleep and appetite changes

Baby Blues

This starts a few days after delivery and may last up to three weeks. Mothers may experience tearfulness, sadness, moodiness, irritability or worrying.

Postpartum Depression (PPD)*

PPD can start within four weeks and up to one year after birth.

Symptoms may include:

- · Loss of pleasure/lack of interest
- · Low energy/persistent fatigue
- Crying
- · Feelings of guilt or worthlessness
- · Poor concentration, poor decision making
- Sleep and appetite changes
- Intense anxiety or agitation
- · Irritability, anger
- · Feeling overwhelmed
- Thoughts of harming self or baby
- *Early recognition and prompt treatment benefit both mother and baby

Many woman will not be diagnosed or treated. Symptoms will be blamed on lack of sleep or demands of the new baby. Women stay silent because they feel guilt and shame.

Postpartum Psychosis

Postpartum psychosis is very rare and occurs in 1/1000 births. It usually occurs in the first few weeks after birth. Mothers feel confused and out of touch from reality. They may have intense thoughts about harming themselves or their baby.

Postpartum psychosis requires prompt medical attention.
See your care provider or visit an Emergency Department.

Is medication safe for me and my baby?

Medication may be a necessary part of your care plan. There is a lot of scientific research to show that medications can be safely used during pregnancy and breastfeeding.

- Always consult your healthcare provider to discuss if medication use is right for you.
- 15-20% of babies exposed to antidepressants during pregnancy may have frequent crying and mild jitteriness. Symptoms will resolve on their own and should disappear within a week.
- Women on antidepressants are not excluded from breast milk donation.
 Please visit the Rogers Hixon Ontario Human Milk Bank (www.milkbankontario.ca)
 for more details.