

# Understanding Perinatal Mood Disorders (PMD)

Postpartum Depression and Beyond



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## Perinatal mood disorders

Welcoming a newborn into your family—and into the world—is a joyous occasion.

For some families, the days and months following the birth of a child can also be emotionally challenging, especially when parents find themselves affected by perinatal mood disorder (PMD), which covers a number of conditions, including postpartum depression.

PMD, which is both common and treatable, is important for couples to understand as they take their first steps in parenthood.

## Understanding

As many as 30 percent of all new moms and up to 20 percent of all new dads may experience difficulty adjusting to their roles as parents. PMD can affect anyone regardless of education, socioeconomic status, culture, religion or personality.

Even though PMD is very common, only a small number of women (and even fewer men) who experience symptoms receive the help they need. Today, with greater understanding and improved treatments, this is changing.

PMD typically occurs in the first few months after childbirth, but can surface anytime in the first two years of parenthood.

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It is likely that PMD has more than one cause. Some of the risk factors may include:

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- Stressful event around the time of birth
  - Sleep deprivation
  - Colicky babies
  - Absence of support from family or friends
  - Isolation
  - Hormonal changes
  - Personal history of mental illness
  - Infertility
  - Gestational diabetes
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# Types and symptoms

While many women experience some mild mood changes during or after the birth of a child, 30 percent of women experience even more significant symptoms of depression or anxiety. Although the term “postpartum depression” is most often used, there are several forms of this illness.

## Pregnancy or Postpartum Depression (PPD)

A woman with PPD might experience feelings of anger, sadness, irritability, guilt, lack of interest in the baby, changes in eating and sleeping habits, trouble concentrating, thoughts of hopelessness and sometimes even thoughts of harming the baby or herself.

## Pregnancy or postpartum anxiety

A woman with this condition may experience extreme worries and fears, often over the health and safety of the baby. Some women have panic attacks and might feel shortness of breath, chest pain, dizziness, a feeling of losing control, numbness and tingling.

## Pregnancy or Postpartum Obsessive-Compulsive Disorder (PPOCD)

Women with PPOCD can have repetitive, upsetting and unwanted thoughts or mental images (obsessions). Sometimes they need to do certain things over and over (compulsions) to reduce the anxiety. Mothers find these thoughts scary and unusual and are unlikely to ever act on them.

### **Postpartum post-traumatic stress disorder**

This is often caused by a traumatic or frightening child-birth, and symptoms may include flashbacks of the trauma with feelings of anxiety and the need to avoid things related to that event.

### **Postpartum psychosis**

Sufferers sometimes see and hear images or voices that others cannot; these are called hallucinations. They may believe things that aren't true and distrust those around them. They may also have periods of confusion and memory loss, and seem manic. This severe condition is dangerous, and it is important to seek help for it immediately.

### **Treatment**

The first step of treatment is acknowledging that a person does have some form of PMD. Tremendous relief and hope can come from recognizing that the emotional and physical pain are symptoms of an illness that can be treated. Once there is acceptance, it is often easier to follow the recommended treatment.

Treatments may include individual or family therapy, medication and/or participation in PMD support groups (either in person or online) until the symptoms resolve.

If left untreated, PMD can lead to chronic mood disorders, poor parent-child bonding, marital trouble, child neglect or, in the worst case, physical harm to the mother and/or baby.

Finding compassionate professional help from physicians, nurses, therapists, PMD support groups and clergy is important. It is necessary to involve your entire family in



the recovery process. It is common for family members and friends to also experience confusion, doubt, anger and frustration when someone they love is diagnosed with a perinatal mood disorder. Support from loved ones is vital to the healing process.

### **Recovery**

Anyone can suffer from PMD. It is essential to recognize symptoms early and intervene as soon as possible so patients learn they are not to blame, they are not alone, and they will be well again with time and treatment.

Symptoms can appear during pregnancy and during the first two years after childbirth. It is important to know that, with informed care, symptoms can be relieved, and patients can fully recover. It is crucial that moms who are suffering know they are not to blame, are not alone and can recover fully.

## THE BABY BLUES

Many people have heard of the “baby blues.” This is usually described as a brief, temporary moodiness. It often includes sadness, crying and irritability, and can affect 60 to 80 percent of new mothers.

Unlike PMD, the baby blues is not actually an illness and will go away on its own, usually within two weeks. Support from others, extra rest or getting out of the house can help a mom suffering from the baby blues.

## Dads are not immune

Fathers can be affected by PMD as well. In fact, research indicates that 5 to 20 percent of men experience symptoms of depression either leading up to or following the birth of their child. Unfortunately, many men never seek help or support during this crucial period.

Possible PMD causes in men include feeling burdened, increased financial responsibility, feeling left out and missing a sexual relationship with the mother. Dads with depression often demonstrate anger or irritability, and sleep more or less than usual. They also might be prone to emotional withdrawal, sadness or worry.



# Are you suffering from a perinatal mood disorder?

The questions below can help determine if you should talk with a healthcare professional about PMD.

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Consider these questions:

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Are you feeling sad or depressed?

Do you feel more irritable or angry with those around you?

Are you having difficulty bonding with your baby?

Do you feel anxious or panicky?

Are you having problems eating or sleeping?

Do you have troubling thoughts that you can't get out of your mind?

Do you feel as if you are "out of control" or "going crazy"?

Do you feel like you never should have become a mother?

Are you worried that you might hurt your baby or yourself?

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# Support is just a phone call away

Through our Postpartum Connection Program, we offer support and education for mothers dealing with PMD issues. A trained facilitator who specializes in perinatal mood disorders leads the group. Mothers receive screenings, supportive conversation, education and appropriate referrals. Mothers are encouraged to bring their babies to the group.

Please call 630.933.4234, TTY for the hearing impaired 630.933.4833 or visit [nm.org/westparentgroups](http://nm.org/westparentgroups) for support group times and locations.