

# MATERNAL MENTAL HEALTH

## PMAD Facts

- PMAD= Perinatal mood and anxiety disorders
- Affects 1 in 7 mothers and 1 in 10 fathers
- Symptoms can appear prenatally or during first year post-delivery
- PMADs are treatable
- Untreated PMADs can lead to undesirable social, mental, physical, and newborn outcomes
- PMADs include: depression, anxiety, bipolar, panic, OCD, PTSD, and psychosis
- Shame and guilt prevent mothers from getting help

## Baby Blues or PMAD?

### Baby Blues can look like....

- Symptoms that last for *less* than 2 weeks
- Sadness and tearfulness that come and go
- Mood swings
- "The worst PMS"
- Emotional sensitivity
- Feeling unsettled or nervous
- Worry
- An increase in these emotions the first week post-delivery

Up to 80% of new mothers experience the baby blues.

This is not mental illness, but rather, a reflection of the hormonal changes occurring in the new mother's body.

### PMADs can look like....

- Symptoms that last for *more* than 2 weeks
- Loss of pleasure
- Low self-esteem
- Appetite or sleep changes
- Unrelenting fatigue
- Thoughts of death or suicide
- Irritability or rage
- Wanting to be alone all of the time
- Lack of feelings
- Increased physical symptoms or pain
- Thoughts/unwanted thoughts that keep persisting
- Feeling "on edge"
- Intense fear
- "I feel like I'm going crazy"
- Shortness of breath, dizziness
- Repetitive behaviors that can't be controlled
- Hyperactive, rambling speech
- Hallucinations
- ANYTHING THAT DOESN'T FEEL LIKE YOU

# EXPECTING WELL

POSTPARTUM + MOTHERHOOD

## Risk Factors

- Thyroid disorders or diabetes
- PCOS
- History of premenstrual dysphoric disorder
- Difficulties with fertility
- Physical pain
- Not getting sleep!
- Personal or family history of PMAD\*
- Personal or family history of mental health disorders\*
- Sensitivity to hormonal shifts
- Sexual trauma, specifically as a child\*
- Discontinuing breastfeeding abruptly

\*#1 risk factors

## This makes it worse...

- Pregnancy, birth, or breastfeeding complications
- Financial stressors
- Lack of support
- Domestic violence
- Death or loss of loved one
- Health difficulties
- Difficulty accessing care
- Racism
- Seasonal depression
- Recent move
- Unresolved grief
- Employment stressors
- Baby's temperament

*If you have identified any risk factors, please reach out to your physician, therapist, support system, Postpartum Support International, or The Expecting Well Company for ways to protect your mental and emotional well-being.*

# EXPECTING WELL

POSTPARTUM + MOTHERHOOD

## Protective Steps

### Sleep!

- Plan a “sleepcation”
- Prioritize sleep
- Have your partner take on baby-duty so that you can sleep

### Plan

- Line up people whom you trust to provide support
- Determine your biggest stressors and troubleshoot them before birth

### Communicate

- Let those around you know your needs and concerns
- Be open with your care team

### Process

- If you have unresolved trauma and/or grief, find a therapist you trust

### Build

- Habits that will help make your life easier

### Accept

- This is your season to ask for, and to receive, help

Postpartum psychosis is a medical emergency. Call your local physician or emergency services IMMEDIATELY if signs of delusions, hallucinations, or concerning behaviors arise.

Advocate for your own well-being with this tool from Postpartum Support International:

[Click Here](#)

*All information has been gathered from the PMH-C training manual from Postpartum Support International, and the book by Sacks and Birndorf, What No One Tells You: A Guide to Your Emotions from Pregnancy to Motherhood.*