

# **The Baby Blues and Post-natal Depression**



One in two women experience the Baby Blues after giving birth. This leaflet explains why you may have mood swings after your baby is born and offers practical information and advice about the Blues and Post-natal depression.

This leaflet is produced by  
**The Association for Post-natal Illness**

## **The Baby Blues**

After the birth of a baby about half of all mothers suffer a period of mild depression called the Baby Blues. This may last for a few hours or, a few days and then it disappears.

## **Symptoms of the Blues**

Mothers may find that it is difficult to cheer up and they may feel very anxious and tense. Minor problems may cause new mothers to worry a great deal.

Some mothers have pains for which there is no medical cause or they may feel unwell but have no particular symptoms. Most mothers who have the Blues feel very tired and lethargic. Frequently mothers who have the Blues have difficulty sleeping.

## **Possible causes of the Baby Blues**

The Blues may have several causes, some biological and some emotional.

When a baby is born there are very sudden changes in the mother's hormone levels. Some, required during pregnancy, drop rapidly, while others like those which start the production of milk, rise. These rapid changes may act to trigger the Blues.

Many mothers are unprepared for the extreme tiredness which often follows birth. The tiredness is usually due to a combination of factors. In many cases the mother will have been anticipating the birth with some apprehension. This, as well as the physical exertion of the birth itself, can contribute to making mothers feel exhausted.

**Rest and quiet are most important after a birth. However few mothers get either, as they are busy responding to the needs of the baby, or, when they might be able to rest, they are looking after older children, doing housework, washing or seeing visitors who may stay too long.**



Sometimes the baby may have a mild health problem such as jaundice or feeding difficulties in the early days. These problems are very common with new babies, but they cause mothers great anxiety. The problems do settle down as the baby gets older and you should try to talk to your midwife or health visitor and allow yourself to be reassured that the baby will thrive.

### **What can be done to help the Blues sufferer?**

Mothers who have the Blues should feel free to cry if they want to and to express their fluctuating emotions. If they feel miserable they should **not** be told to 'pull themselves together'. It can be a great help to the mother if someone listens to her and reassures her that her worries and misery will not last and that she will soon feel better.

A mother who has the Blues must have as much rest as possible. It may also help the mother if she is reminded that the Blues are very common and they will pass in a few days.

Affected mothers who have the Blues are often over-sensitive about what is said to them by relatives and medical personnel. So tact and empathy from everyone around them can be very beneficial at this time.

### **Length of the Blues**

In most cases the Blues last for only a few days and then the feelings fade. If the Blues do continue and seem to be getting worse then the mother should see her doctor and discuss the problem.

### **Postnatal Depression**

Postnatal depression is an unpleasant illness which affects about 10% of mothers who have recently given birth. The depression often starts after the mother has been discharged by the midwife.

## **Symptoms of Postnatal Depression**

Postnatal depression has many symptoms. Most mothers who have the illness find that they are less able to cope with the demands of the baby and of the home.

Some mothers feel very despondent. They may feel very sad and cry frequently. Some mothers feel anxious and fearful. They worry about their own health and that of their baby. They may suffer from panic attacks and feel tense and irritable all the time. Most depressed mothers feel tired and lack energy, often they feel unable to concentrate and they find even simple tasks are confusing and demand too much energy.

Some mothers experience pains for which there is no cause (other than tension and anxiety). Many suffer difficulty in sleeping and have a poor appetite. Many depressed mothers lose all interest in sex.

A depressed mother may suffer from any or all of the symptoms mentioned. Many mothers who have this illness feel guilty that they are not 'coping' as they feel they should be.

## **What can be done if you have postnatal depression?**

If your depression lasts longer than a few days you should discuss your feelings with your doctor. If possible ask your partner or a friend or relative to come with you. Before you see the doctor write a list of all the symptoms that you are experiencing.

You should not go on suffering depression in the hope that it will go away. Postnatal depression is a real illness and it can be treated successfully with anti-depressant drugs and counselling. These drugs are not addictive. They make the unpleasant symptoms fade until they go completely. Counselling can also have considerable benefits.



## **Who else can help?**

After you have seen the doctor, you may find it helpful to talk to an understanding and sympathetic member of your family or a friend. If your friend understands that you will recover completely and be your 'old self' again when you are better, then he or she can be a real source of comfort and reassurance to you during the time of your illness.

Your community nurse and health visitor can also give advice, reassurance and support.

It is important to remember that all mothers recover from post natal depression. As the recovery proceeds, the bad days get fewer and less upsetting and the good days become more numerous. Gradually the bad days disappear completely.

Some mothers find it helpful to talk to a mother who has had postnatal depression and recovered. If you contact the Association for Post-natal Illness (APNI), we will send you some further information about PND and tell you how to apply for a supporter who has had the illness and recovered.

## **Self help**

Although it may be difficult to rest when you have a demanding baby and perhaps other children to care for, it does help to rest as much as possible if you are suffering from depression. You will find that you feel worse if you are overtired. Ask a partner or friend to care for the baby whilst you have a proper rest, preferably in the middle of the day.

Try to lie on your bed even if you do not sleep. A rest in the day often improves sleeping at night for those with sleeping difficulties.

Try to eat a small meal or have a hot sweet drink at regular intervals. Many depressed mothers forget to eat and this can make the depression symptoms feel worse.

## **Postnatal Depression in Partners**

Male or female partners may also suffer from Postnatal depression. If this occurs then they should seek help from their G.P at an early opportunity. Rates of depression after birth in partners are similar to those of new mums.

### **Further Information**

For more information about Post-natal Depression please visit our website:

**[www.apni.org](http://www.apni.org)**

or you can write to us at:

**The Association for Post-natal Illness,  
145 Dawes Road, Fulham, London, SW6 7EB**

**Call us on: 0207 386 0868**

**or email us at: [info@apni.org](mailto:info@apni.org)**

**Our office hours are 10am - 2pm weekdays**

### **Covid-19 arrangements**

Our staff are working remotely at present.  
You can speak to them during office hours by  
ringing the landline number 0207 386 0868.  
If you wish to leave a message outside of office  
hours please send us an email.

Calls are not recorded.

Post will be collected and responded too.

Other organisations you may wish to contact:

The National Childbirth Trust -

**[www.nct.org.uk](http://www.nct.org.uk)**

0300 330 0700

or

**Netmums - [www.netmums.com](http://www.netmums.com)**

**Association for Post-natal  
Illness**

Reg Charity no 280510

