



Postnatal depression can be treated.

For help and more information contact:

- The nearest clinic
- The nearest hospital
- The nearest health care provider
- Your religious leader
- A social worker



Postnatal depression



health

Department:
Health
REPUBLIC OF SOUTH AFRICA



Postnatal depression

It is common for women to feel stressed, sad, anxious, lonely, tired or weepy after their baby's birth. This is known as 'baby blues'. But some women experience a more serious mood disorder known as postnatal depression. Unlike the baby blues, postnatal depression does not go away on its own. It is a mental disorder that needs to be identified, confirmed and treated by a qualified health care professional. Postnatal depression can appear days or even months after delivering a baby.

Postnatal depression may affect your ability to care for your baby, yourself and your family and may result in long-lasting negative effects.

Signs of postnatal depression include:

- Losing interest in things you used to enjoy;
- Feeling sad and anxious throughout the day nearly every day;
- Feeling guilty or worthless and blaming yourself;
- Excessive irritability, anger or agitation;
- Feeling irritable or restless;
- Feeling tired all the time even after minimum effort;
- Feeling stressed, nervous or overwhelmed;

- Sadness and crying uncontrollably for long periods of time without reason;
- Difficulty concentrating, remembering details, or making decisions;
- Inability to sleep, sleeping too much or difficulty falling or staying asleep;
- Eating much more, or less, than usual;
- Fear of not being a good mother;
- Disinterest in the baby, family, and friends;
- Thoughts of death and suicide or suicide attempts.

If these signs occur on most days for at least two weeks, you may be suffering from postnatal depression.

Should you have these signs:

- Seek help from your nearest clinic, hospital or health care provider as soon as you notice any of the signs. Postnatal depression can get worse without treatment;
- Take your treatment as told by your health care provider;
- Do not stop treatment, even when you feel better, until your health care provider tells you to stop;
- Talk openly about your feelings with a person that you trust, like your partner, friends and relatives;

- Join a support group for mothers who are experiencing the same problem. Ask your health care provider if there is one available near your home;
- Find a relative or close friend who can help you take care of the baby;
- Get enough sleep and rest;
- As soon as your health care provider says it is okay, take walks and exercise;
- Do not worry about unimportant tasks;
- Be realistic about what you can do while taking care of a new baby;
- Cut down on less important responsibilities;
- Remember that postnatal depression is not your fault. It is a real, but treatable, mental disorder.

If you feel desperate, seek assistance.

- Contact a friend, family member or someone you trust for help and support.
- Go to your clinic, hospital emergency room or doctor and tell the health care provider what you are feeling. They will help you or refer you.

Factors increasing the risk of postnatal depression:

- Previous experience of depression or anxiety

- Family history of depression or mental illness
- Other health problems like HIV and AIDS
- Previous miscarriage, stillbirth or death of a child
- A challenging baby who cries more than usual, is hard to comfort, or whose sleep and hunger needs are irregular and hard to predict
- A baby with special needs like premature birth, disability or a sickly baby
- First-time motherhood or very young motherhood
- Emotional stressors, such as the death of a loved one or family problems
- Financial or employment problems
- Isolation and lack of social support
- Sudden changes in the home or work routines
- Domestic violence.

If you are facing these factors:

- Talk to someone you trust to get support;
- Talk to your clinic sister or doctor. They will establish if you have symptoms of postnatal depression. If they find that you have postnatal depression, they will treat you or refer you to a person qualified to treat you.