

Postpartum Depression

Alexander Stephan*

Managing Editor, Gynecology and Obstetrics, Belgium

POSTPARTUM DEPRESSION

Most people have heard of moms being unhappy, suicidal, or injuring their children after giving birth at least once. PPD affects up to 10%-15% of women who give birth, with onset in the first month following child birth, however, this is not a hard and fast rule. According to studies, PPD is frequently underdiagnosed and undertreated, which can lead to Postpartum Psychosis. This page aims to provide all of the necessary information for parents, future parents, families, and health professionals to be prepared for the possibility.

SYMPTOMS OF PPD

Less serious

- Severe fear
- Severe anger
- Diminished concentration
- Obsessive need for deserts and alcohol
- Irrational reactions
- Disturbance of sleep and appetite
- Loss of interest and energy
- Severe anxiety
- Depressed mood
- Loss of pleasure in activities
- Obsessive feeling of guilt
- Crying episodes
- Excessive fatigue
- Severe irritability
- Feelings of worthlessness
- Hyperactivity
- Confusion

- Suspiciousness
- Poor care of the baby after 6 months

More Serious (mostly related to Postpartum Psychosis)

- Persecution mania
- Obsessive thoughts of harming the baby or the partner
- Suicidal thoughts and attempts
- Panic attacks
- Emotional rejection of the baby
- Pathological jealousy of the baby

TREATMENT

PPD can be treated

PPD is treated with psychiatric examination and counseling, medication, and, if necessary, hospitalization. In some circumstances, psychotherapy may be required. When it comes to treating PPD, cognitive, behavioral, and interpersonal therapy have all been shown to be quite beneficial. Medical herbs, nutritional supplements, massage, aromatherapy, chromotherapy, and acupuncture are some of the alternative therapies that can aid. Antipsychotic medications and lithium should be avoided when nursing because they pass via breast milk and can affect the baby's system.

CONCLUSION

We must recognize that Postpartum Depression affects a large number of new parents and that it is not the monster with green eyes that some of us imagine. We can all agree that if not recognized and handled appropriately, it can be harmful to both the parents and the baby, but this can be a warning sign for accurately examining aberrant behaviors during the postpartum time and not allowing them to worsen.

Correspondence to: Alexander Stephan, Managing Editor, Gynecology and Obstetrics, Belgium; E-mail: obsgyne@emedicinejournals.com

Received: November 19, 2021; **Accepted:** November 22, 2021; **Published:** November 27, 2021

Citation: Stephan A (2021) Postpartum Depression. Gynecol Obstet (Sunnyvale) 11:574.

Copyright: ©2021 Stephan A. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.