



DOCTOR DISCUSSION GUIDE

Understanding Postpartum Depression

Postpartum depression is treatable, but it may be difficult at first to share how you're feeling. This guide will help you understand the terminology associated with postpartum depression and provide you with some questions to ask during a conversation with your doctor. Familiarize yourself with these common terms before your appointment to help facilitate the discussion.

Vocabulary to Know

Your doctor might mention these common terms. Here's what they mean.

Postpartum Blues, or the "Baby Blues"	Many new moms experience moodiness, weepiness, and stress as their hormones shift and they adjust to having a newborn. However, unlike postpartum depression, the "baby blues" should only last for the first week or two after giving birth.
Postpartum OCD	Postpartum OCD is characterized by obsessive worries and repetitive rituals to reduce anxiety or prevent some dreaded event. Behaviors might include needing to check on your baby compulsively or washing bottles a certain number of times. Postpartum OCD can also include disturbing thoughts that are difficult to shake.
Postpartum Psychosis	Postpartum psychosis is a rare—but serious—condition characterized by rapidly shifting moods, confusion, delusions (fixed false beliefs), auditory hallucinations (hearing voices), restlessness, irritability, and insomnia.
Perinatal Depression	About half of postpartum depression begins during pregnancy. Given this, depressive episodes that occur during and after pregnancy are often referred to as perinatal depression, or more formally as "major depression with a peripartum onset." Symptoms of depression include a sad or empty mood, weepiness, disinterest in activities that used to bring enjoyment, changes in appetite, insomnia, thoughts of suicide, feeling disconnected from your baby, and anxiety.
Antidepressants	Antidepressants are the medication doctors most often prescribe to treat postpartum depression. They work by correcting chemical imbalances in the brain. Most antidepressants are compatible with breastfeeding. Your doctor will help you pick the medication that is right for you, with the fewest side effects possible.
Psychotherapy	Psychotherapy, often referred to as "talk therapy," is a way of addressing mental health problems through a particular kind of conversation with a licensed mental health professional. There are several therapy types considered effective for treating postpartum depression, including Cognitive Behavioral Therapy (CBT) and Interpersonal Therapy (IPT).
Postpartum Support Group	Many moms find that meeting with a group of fellow moms who are also battling postpartum depression can be very supportive and healing. Your doctor can help you locate a local group.



Questions to Ask

These questions will help you start a conversation with your doctor about managing postpartum depression.

About Symptoms

- I've been having scary thoughts and can't sleep. Is this postpartum depression?
- I've been feeling extremely anxious and having obsessive thoughts. Is this common?
- I feel disconnected from my baby. Does that mean anything about me as a mom?
- I feel unstable. Is there something wrong with me?
- I've been having thoughts of self-harm. What can help with this?

About Causes & Risk Factors

- How prevalent is postpartum depression?
- Are some moms more prone to postpartum depression than others?
- Will I now be more prone to depression in general?
- Why did I get postpartum depression?

About Treatment Options

- Is medication the only option for treating my symptoms?
- Can you help me find a therapist who specializes in postpartum depression?
- I am uncomfortable talking about this with a therapist. What are my options?
- How do I find a local support group?

About Medication

- What are the side effects of medication for postpartum depression?
- Will I have to stop breastfeeding if I take medication?
