

## Spectrum of Perinatal Mental Health Complications

Maternal Mental Health Complication	Clinical Presentation (Symptoms)
<b>Baby Blues</b>	This emotional condition will occur during first week following childbirth and can last up to a week or two. 80% of new mothers experience the 'Baby Blues'. The new mother may present as weepy, sad, and/or anxious. She may show a wide range of emotions in short periods of time and may express difficulty concentrating. Symptoms will resolve within a few weeks postpartum.
<b>Adjustment Disorder</b>	An Adjustment Disorder is a stress-related, shorter-term diagnosable condition. The new mother may have feelings of being overwhelmed and present with an overly intense, irritable and/or depressed disposition but does not meet clinical criteria for full Postpartum Depression or Anxiety. Identifiable stressful event or life changing event occurs causing significant emotional or behavioral changes that directly effects and/or impairs personal, professional, or social life. In the postpartum period this can include events such as childbirth, becoming a parent, making the transition from working professional to stay-at-home mom or going back to work after maternity leave. The disorder is time-limited, usually beginning within 3 months of the stressful event, and symptoms lessen within 6 months upon adaptation of the transitional event.
<b>Perinatal Depression or Anxiety Disorder</b>	Major Depression or Generalized Anxiety can present as clinically diagnosable conditions during pregnancy, just after delivery, and through the first year following childbirth affecting up to 20% of new mothers. Excessive worry, difficulty making decisions, feeling overwhelmed, can't "think straight," sleep disturbance, feelings of sadness, guilt, hopelessness, doom, fear, physical complaints/symptoms with no apparent cause. It may include thoughts of self-harm or harm to others and is longer lasting then a depressed mood during a major life adjustment.
<b>Postpartum Psychosis</b>	Typical onset for this rare and dangerous psychiatric illness is 2-3 days after childbirth. Occurs in 1-3 women per 1000 childbirths. Postpartum Psychosis has a 5% suicide rate and 4 % infanticide rate. Symptoms include hallucinations, delusional thinking, delirium, and mania. Pre-existing Bipolar Disorder is a risk factor. <b>**IMMEDIATE MEDICAL ATTENTION REQUIRED**</b>
<b>Perinatal Obsessive-Compulsive Disorder (OCD)</b>	Intrusive, repetitive, persistent and obsessive thoughts that can include thoughts of hurting or killing the baby. Tremendous sense of horror and disgust of these thoughts often accompanied by avoidance behaviors in order to cope (i.e. hiding knives, plastic bags, refuses to be alone with baby). Repetitive and compulsive behaviors (i.e. counting, cleaning, checking on baby).
<b>Perinatal Panic Disorder</b>	Periods of extreme anxiety, breathing difficulty, chest pain, feelings of choking or smothering, hot or cold flashes, shaking, numbness, heart palpitations, irrational fear of dying or going crazy, restlessness, irritability, excessive worry, including fear of more panic attacks.
<b>Postpartum Post-traumatic Stress Disorder</b>	Recurrent nightmares, extreme anxiety, reliving or having flashbacks of past traumatic events (i.e. trauma during delivery, miscarriage, loss of child or loved one, past emotional, sexual or physical trauma).

Information gathered and compiled from: The Sommer Group Counseling & Consulting; Diagnostic & Statistical Manual of Mental Disorders Text Revision (DSM-IV-TR); Beyond the Blues: A Guide to Understanding & Treating Prenatal & Postpartum Depression - S. Bennett , P. Indman

perinatal outreach  
& encouragement



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