

# Postpartum mood disorders

How to differentiate normal from problematic



**Routine care**  
Baby blues  
Offer reassurance



**Caution**  
Mild to moderate depression  
Non-emergent evaluation



**Stop**  
Severe depression or psychosis  
Prompt evaluation

	Routine care Baby blues Offer reassurance	Caution Mild to moderate depression Non-emergent evaluation	Stop Severe depression or psychosis Prompt evaluation
<b>Risk factors (see list on back)</b>	Absent/mild	Present	Present
<b>Self-reported symptoms</b>	None or mild	Yes	Yes
Mood changes (sadness, anxious, irritable, empty feeling)	Sometimes	Persistent	Persistent
Feeling overwhelmed	Sometimes	Persistent	Persistent
Fatigue	Sometimes	Persistent	Persistent
Inability to sleep (even when baby sleeps)	No	Yes	Yes
Difficulty concentrating, remembering, making decisions	No	Yes	Yes
Feelings of guilt, worthlessness, <i>bad mom</i>	Sometimes	Persistent	Persistent
Lack of interest in self-care (bathing, dressing)	No	Yes	Yes
Difficulty bonding with baby	No/rarely	Yes	Yes
Worrying about baby	Sometimes	Persistent	Obsessively
Delusions	No	No	Yes
Hallucinations	No	No	Yes
Mania, paranoia	No	No	Yes
Feelings of harming self or baby or others	No	No	Yes
Being afraid of your thoughts	No	No	Yes
Use drugs or alcohol to relieve stress, elevate mood, help sleep, increase energy	Rarely	Often	Frequently/daily
<b>Patient Health Questionnaire-2 (PHQ-2)</b>			
Little interest or pleasure in doing things/withdraw from family/friends	None to several days	More than 50% of days	Nearly every day
Feeling down, depressed, hopeless	None to several days	More than 50% of days	Nearly every day
<b>PHQ-9 score</b>	0 to 5	6 to 15	> 15 or any score with a positive response to thoughts of suicide



### Risk factors for postpartum mood disorders and substance use disorders:

- Mother is younger than 25
- Pregnancy was unplanned
- Mother has financial worries
- There is a lack of practical support (someone to help care for baby, run errands, take to doctor, etc.)
- Lack of emotional support (for example, from partner, family, or friends)
- History of birth trauma (real or perceived): Bad outcome, unplanned outcome, NICU stay, negative emotions surrounding labor and delivery
- Difficult infant temperament
- History of postpartum depression with prior pregnancy



### Helpful phone numbers:

- Postpartum Support International Help Line: **(800) 944-4773**
- National Maternal Mental Health Hotline: **(833) 943-5746** (call or text)
- National Suicide & Crisis Lifeline: **988**

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