Postpartum mood disorders

How to differentiate normal from problematic behaviors

| | | | STOP |
|---|----------------------|-----------------------------|---|
| | Routine care | Caution | Stop |
| | Baby blues | Mild to moderate depression | Severe depression or psychosis |
| | Offer reassurance | Non-emergent evaluation | Prompt evaluation |
| Risk factors (see list on back) | Absent/mild | Present | Present |
| Self-reported symptoms | 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, "bad mom" | 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 | Persistent |
| 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 |
| Patient Health Questionnaire-2 (PHQ-2) | | | |
| 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 |
| PHQ-9 score | 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

Reference:

Postpartum Support International, https://www.postpartum.net

https://provider.wellpoint.com/MD/

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