

Perinatal Mood & Anxiety Disorders (PMADs)



Many mothers experience the baby blues, especially within the first few weeks postpartum. This is normal and expected and is mostly the result of major hormonal shifts.

There are times however when symptoms persist and are more intense, which are clinically referred to as **Perinatal Mood & Anxiety Disorders (PMADs)**. Without treatment, PMADs can cause a significant disruption in a woman's life. PMADs may develop during pregnancy or postpartum, (typically within 3 weeks-3 months after birth) but can occur at any time during the first year.

Common Symptoms & Types

Postpartum Depression

- Feelings of anger or irritability
- Lack of interest in the baby
- Appetite and sleep disturbance
- Crying and sadness Feelings of guilt, shame, or hopelessness
- Loss of interest, joy, or pleasure in things you used to enjoy
- Possible thoughts of harming the baby or yourself

Postpartum PTSD (Post-traumatic Stress Disorder)

- Intrusive re-experiencing of a past traumatic event (such as childbirth)
- Flashbacks or nightmares
- Avoidance of stimuli associated with the event, including thoughts, feelings, people, places & details of the event
- Persistent increased arousal (irritability, difficulty sleeping, hypervigilance, exaggerated startle response)
- Anxiety & panic attacks
- Feeling a sense of unreality & detachment



Postpartum Anxiety

- Constant worry
- Feeling that something bad is going to happen
- Racing thoughts
- Irritability
- Disturbances of sleep & appetite
- Inability to sit still
- Physical symptoms like dizziness, hot flashes, & nausea

Postpartum OCD (Obsessive Compulsive Disorder)

- Obsessions (intrusive thoughts): sometimes related to the baby
- Compulsions: repetitive acts meant to reduce a mom's anxieties (Examples: needing to clean constantly, check things many times, count or reorder things)
- A sense of horror about the obsessions
- Fear of being left alone with the baby
- Hypervigilance in protecting the infant
- Moms with postpartum OCD know that their thoughts are bizarre and are very unlikely to ever act on them

NOTE: Postpartum Bipolar and Postpartum Psychosis are the two other types of PMADs. They are less common, however equally if not more important to seek treatment, if you think that you are dealing with them. Postpartum Psychosis is considered to be a medical emergency.