Postpartum depression

Overview

The birth of a baby can trigger a jumble of powerful emotions, from excitement and joy to fear and anxiety. But it can also result in something you might not expect — depression.

Most new moms experience postpartum "baby blues" after childbirth, which commonly include mood swings, crying spells, anxiety and difficulty sleeping. Baby blues typically begin within the first two to three days after delivery, and may last for up to two weeks.

But some new moms experience a more severe, long-lasting form of depression known as postpartum depression. Rarely, an extreme mood disorder called postpartum psychosis also may develop after childbirth.

Postpartum depression isn't a character flaw or a weakness. Sometimes it's simply a complication of giving birth. If you have postpartum depression, prompt treatment can help you manage your symptoms and help you bond with your baby.

Symptoms

Signs and symptoms of depression after childbirth vary, and they can range from mild to severe.

Baby blues symptoms

Signs and symptoms of baby blues — which last only a few days to a week or two after your baby is born — may include:

- Mood swings
- Anxiety
- Sadness
- Irritability
- Feeling overwhelmed
- Crying
- Reduced concentration
- Appetite problems
- Trouble sleeping

Postpartum depression symptoms
Postpartum depression may be mistaken for baby blues at first — but the signs and symptoms are more intense and last longer, and may eventually interfere with your ability to care for your baby and handle other daily tasks. Symptoms usually develop within the first few weeks after giving birth, but may begin earlier — during pregnancy — or later — up to a year after birth.

Postpartum depression signs and symptoms may include:

- Depressed mood or severe mood swings
- Excessive crying
- Difficulty bonding with your baby
- Withdrawing from family and friends
- Loss of appetite or eating much more than usual
- Inability to sleep (insomnia) or sleeping too much
- Overwhelming fatigue or loss of energy
- Reduced interest and pleasure in activities you used to enjoy
- Intense irritability and anger
- Fear that you're not a good mother
- Hopelessness
- Feelings of worthlessness, shame, guilt or inadequacy
- Diminished ability to think clearly, concentrate or make decisions
- Restlessness
- Severe anxiety and panic attacks
- Thoughts of harming yourself or your baby
- Recurrent thoughts of death or suicide

Untreated, postpartum depression may last for many months or longer.

**Postpartum psychosis**

With postpartum psychosis — a rare condition that typically develops within the first week after delivery — the signs and symptoms are severe. Signs and symptoms may include:

- Confusion and disorientation
- Obsessive thoughts about your baby
- Hallucinations and delusions
- Sleep disturbances
- Excessive energy and agitation
- Paranoia
- Attempts to harm yourself or your baby

Postpartum psychosis may lead to life-threatening thoughts or behaviors and requires immediate treatment.

**Postpartum depression in new fathers**
New fathers can experience postpartum depression, too. They may feel sad or fatigued, be overwhelmed, experience anxiety, or have changes in their usual eating and sleeping patterns — the same symptoms mothers with postpartum depression experience.

Fathers who are young, have a history of depression, experience relationship problems or are struggling financially are most at risk of postpartum depression. Postpartum depression in fathers — sometimes called paternal postpartum depression — can have the same negative effect on partner relationships and child development as postpartum depression in mothers can.

If you're a new father and are experiencing symptoms of depression or anxiety during your partner's pregnancy or in the first year after your child's birth, talk to your health care professional. Similar treatments and supports provided to mothers with postpartum depression can be beneficial in treating postpartum depression in fathers.

When to see a doctor

If you're feeling depressed after your baby's birth, you may be reluctant or embarrassed to admit it. But if you experience any symptoms of postpartum baby blues or postpartum depression, call your doctor and schedule an appointment. If you have symptoms that suggest you may have postpartum psychosis, get help immediately.

It's important to call your doctor as soon as possible if the signs and symptoms of depression have any of these features:

- Don't fade after two weeks
- Are getting worse
- Make it hard for you to care for your baby
- Make it hard to complete everyday tasks
- Include thoughts of harming yourself or your baby

If you have suicidal thoughts

If at any point you have thoughts of harming yourself or your baby, immediately seek help from your partner or loved ones in taking care of your baby and call 911 or your local emergency assistance number to get help.

Also consider these options if you're having suicidal thoughts:

- Seek help from your primary care provider or other health care professional.
- Call a mental health professional.
- Call a suicide hotline. In the U.S., call the National Suicide Prevention Lifeline at 1-800-273-TALK (1-800-273-8255) or use their webchat on suicidepreventionlifeline.org/chat.
- Reach out to a close friend or loved one.
- Contact a minister, spiritual leader or someone else in your faith community.

Helping a friend or loved one
People with depression may not recognize or acknowledge that they're depressed. They may not be aware of signs and symptoms of depression. If you suspect that a friend or loved one has postpartum depression or is developing postpartum psychosis, help them seek medical attention immediately. Don't wait and hope for improvement.

**Causes**

There's no single cause of postpartum depression, but physical and emotional issues may play a role.

- **Physical changes.** After childbirth, a dramatic drop in hormones (estrogen and progesterone) in your body may contribute to postpartum depression. Other hormones produced by your thyroid gland also may drop sharply — which can leave you feeling tired, sluggish and depressed.

- **Emotional issues.** When you're sleep deprived and overwhelmed, you may have trouble handling even minor problems. You may be anxious about your ability to care for a newborn. You may feel less attractive, struggle with your sense of identity or feel that you've lost control over your life. Any of these issues can contribute to postpartum depression.

**Risk factors**

Any new mom can experience postpartum depression and it can develop after the birth of any child, not just the first. However, your risk increases if:

- You have a history of depression, either during pregnancy or at other times
- You have bipolar disorder
- You had postpartum depression after a previous pregnancy
- You have family members who’ve had depression or other mood disorders
- You've experienced stressful events during the past year, such as pregnancy complications, illness or job loss
- Your baby has health problems or other special needs
- You have twins, triplets or other multiple births
- You have difficulty breast-feeding
- You're having problems in your relationship with your spouse or significant other
- You have a weak support system
- You have financial problems
- The pregnancy was unplanned or unwanted

**Complications**

Left untreated, postpartum depression can interfere with mother-child bonding and cause family problems.

- **For mothers.** Untreated postpartum depression can last for months or longer, sometimes becoming a chronic depressive disorder. Even when treated, postpartum depression increases a woman's risk of future episodes of major depression.
For fathers. Postpartum depression can have a ripple effect, causing emotional strain for everyone close to a new baby. When a new mother is depressed, the risk of depression in the baby's father may also increase. And new dads are already at increased risk of depression, whether or not their partner is affected.

For children. Children of mothers who have untreated postpartum depression are more likely to have emotional and behavioral problems, such as sleeping and eating difficulties, excessive crying, and delays in language development.

Prevention

If you have a history of depression — especially postpartum depression — tell your doctor if you’re planning on becoming pregnant or as soon as you find out you’re pregnant.

During pregnancy, your doctor can monitor you closely for signs and symptoms of depression. He or she may have you complete a depression-screening questionnaire during your pregnancy and after delivery. Sometimes mild depression can be managed with support groups, counseling or other therapies. In other cases, antidepressants may be recommended — even during pregnancy.

After your baby is born, your doctor may recommend an early postpartum checkup to screen for signs and symptoms of postpartum depression. The earlier it’s detected, the earlier treatment can begin. If you have a history of postpartum depression, your doctor may recommend antidepressant treatment or psychotherapy immediately after delivery.

By Mayo Clinic Staff

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