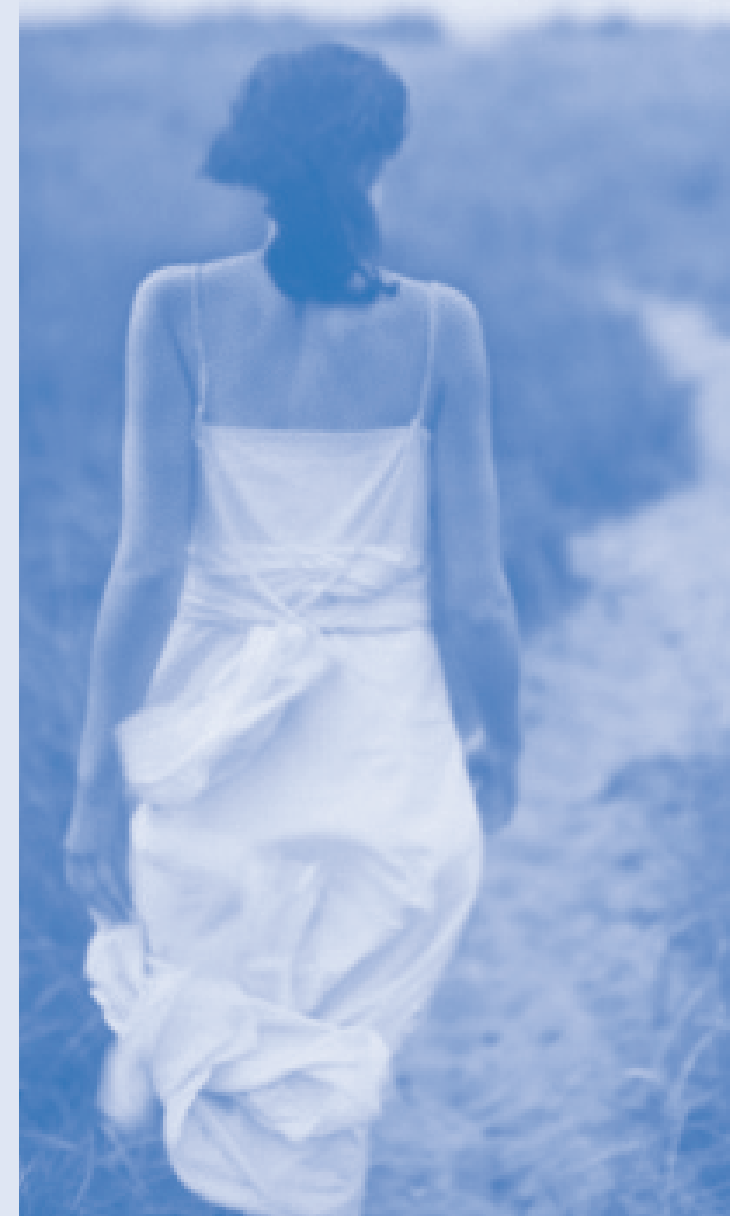


Check yourself for Postpartum Depression



This checklist will help you start a conversation with your provider. Check the boxes that best describe your experience over the **past 2 weeks**, and take it with you to give to your provider at your next visit.

Depression Checklist

In the past 2 weeks (14 days), how often have you:	A Few Days	Over Half the Days	Every Day
Felt sad or low?			
Felt more tired than usual, or have less energy during the day?			
Felt upset or annoyed at little things?			
Had trouble thinking, concentrating, or making decisions?			
Had no appetite or been eating too much?			
Worried that you might hurt yourself or felt like you wanted to die?			
Had trouble enjoying things that used to be fun?			
Felt like you have no one to talk to?			
Felt that you just can't make it through the day?			
Felt worthless or hopeless?			
Had headaches, backaches, or stomachaches?			
Complete the following questions only if you have given birth to a baby in the last 12 months			
Problems sleeping when your baby sleeps, or sleeping too much?			
Felt numb or disconnected from your baby?			
Had scary or negative thoughts about your baby?			
Worried that you might hurt your baby?			
Felt worried or scared that something bad might happen?			
Felt guilty or ashamed about your job as a mom?			

Here's a quick list of things to bring to your appointment:

- A list of any medications you are taking
 - The names of any antidepressants you have taken in the past
 - The names of any therapists, social workers, or other professionals who might be helping you
- and...
- **THIS COMPLETED CHECKLIST**

This information will help you and your doctor decide what treatments are best for you. You may want to bring a family member or friend with you to the appointment, too!

Contact Information

www.4woman.gov
 1-800-994-9662
 or
 1-888-220-5446 for the hearing impaired.



We all know being a Mom is hard. For some, the journey to becoming a mom is really hard, too.

Often, trying to get pregnant, being pregnant, or the birth of the baby can increase the risk for depression. You may have heard of *postpartum depression*, but many women don't know that depression sometimes happens with other events, such as losing a baby or having trouble getting pregnant.

Did you know that the following experiences may increase your risk for depression?

Having a hard time getting pregnant: Depression affects many women who see a doctor for fertility help.

Having twins or triplets: Mothers of multiples have a greater risk of developing depression compared to women who give birth to just one baby.

Losing a baby: Women who experience miscarriage (losing a baby early in pregnancy), stillbirth (losing the baby late in pregnancy), or death of a newborn have a much higher risk for depression.

Having a baby as a teen: Teen moms are more likely than older moms to have postpartum depression.

Having the baby before 38 weeks, or at too low a birthweight: These mothers have a significantly higher risk for depression.

Having a baby who is different: Mom's risk for depression increases if the baby has a birth defect.

Cesarean section: Some studies have shown an increased risk for depression after C-section, as compared to women who delivered vaginally.

What is depression?

Many women experience depression. Depression has symptoms, just like other illnesses, including:

- A low or sad mood
- Loss of interest in fun activities
- Changes in eating, sleep, and energy
- Problems in thinking, concentrating, and making decisions
- Feelings of worthlessness, shame, or guilt
- Thoughts that life is not worth living

When many of these symptoms occur together and last for more than a week or two at a time, this is depression.

Postpartum depression is depression that occurs after having a baby.

The symptoms of postpartum depression are similar to symptoms for depression, but they also include:

- Trouble sleeping when your baby sleeps (more than the lack of sleep new moms usually get!)
- Feeling numb or disconnected from your baby
- Having scary or negative thoughts about the baby, like thinking someone will take your baby away or hurt your baby
- Worrying that you will hurt the baby even though you never would
- Feeling guilty about not being a good mom, or ashamed that you cannot care for your baby

That sounds like me. What should I do?

Depression is common. Women who have problems conceiving or during their pregnancy or delivery are at a higher risk for depression than others without those problems. If you are worried about the way you have been feeling, **it is important to speak with a doctor and tell him or her about your concerns.** Your doctor can help figure out whether you have depression or not, and he or she can help find the best treatment for you.

Many women feel this way.

You are not alone.

There are treatments to help you feel better.

Talk to your doctor so you can feel like yourself again.

If I don't do anything about my depression, will it eventually go away on its own?

The best way to deal with depression is to see a doctor or a counselor. The earlier you seek help, the better you and your baby will do.

When left untreated, depression can hurt the mother and her baby. Mothers who are depressed often have a hard time adjusting to their new roles and attaching emotionally to their babies. Babies of depressed mothers are often fussier and have more difficulties later in life – things like doing well in school, relating well to others, and adjusting to new situations.

It is possible that the depression could eventually go away without help. However, it could take a long time and might cause a lot of extra suffering for the mother and problems for the baby. It could also get worse, instead of better.

Depression is treatable, but not if you don't seek help. Talk to your provider today.