



Postnatal depression is a serious illness that can make new motherhood hard to handle

By Adele Hamilton

When baby makes you blue

SHE was pregnant with her third child when she felt the familiar unhappiness descend on her like a heavy storm cloud. She'd felt it before – when she was pregnant for the first time, in 1990, at the tender age of 14.

Looking back now, Gloria Mbovu of Khayelitsha is sure she was suffering from postnatal depression at the time, but no-one explained to the pregnant teenager what it was that was making her feel so different from her usual warm, chatty self.

"I was not happy at all. I just wasn't myself. But I was not aware that postnatal depression existed, so I didn't know what was wrong with me," Gloria says.

Fortunately when she started experiencing the same feelings during her third pregnancy, help was at hand. This time her employer, a psychologist, recognised the warning signs and helped her find a counsellor and the correct medication to help her cope.

"My third baby is three now, and I'm fine," says the 31-year-old domestic worker. "The problem is that black people don't understand depression. I think that people should talk about it. This is a silent killer disease, and I want women to know that it can happen to them."

Gloria is lucky that her

employer happened to be a medical professional who could help her. Women who feel depressed after giving birth (and sometimes even during their pregnancies) usually just suffer in silence, or end up reaching breaking point before they get help.

It's thought of as one of the happiest times in a woman's life, so when a new mother feels unhappy and unable to bond with her baby she may try to hide the true extent of her pain from family and friends, even her husband. For some, help – if it does arrive – comes too late to prevent a lot of pain and heartache for the woman and those who love her.

"In my experience most black women with postnatal depression only get treatment after failed suicide attempts," says Dr Bavanisha Vythilingum, a senior psychiatrist at the University of Cape Town. "Women have no idea that what they're experiencing has a name and can be helped – they tend to hide their feelings because they feel they'll be seen as shameful, lazy or bad mothers."

What are the symptoms?

Women experience postnatal depression in different and unique ways, but all share the feeling that something isn't right. You may feel sad, anxious, or simply numb and unable to connect with your baby and your role as a mother.

Here are the symptoms to look out for.

Mental and emotional symptoms:

- feelings of sadness, guilt and

- loneliness
- feeling unable to make decisions
- being unable to relax or feeling constantly on edge
- your mind may race with fears that you might harm your baby or yourself, or that something may happen to the baby or your partner
- being alone with the baby may make you feel particularly fearful and anxious.

Physical symptoms:

- being unable to sleep, or feeling the need to sleep all the time
- suddenly losing or gaining weight
- even headaches or nausea can be the body's way of saying that something is not right.

What causes postnatal depression?

Although the hormonal changes of pregnancy and birth are a factor, the causes of postnatal depression are far more complex. Fathers and adoptive mothers are also known to suffer from it – they can also feel the immense pressures of coping with a new baby, even without being pregnant or giving birth.

As many as one in ten mothers is thought to suffer from postnatal depression to some degree, and it can affect women of all ages. Some studies, such as one done in the townships in the Western Cape, show that in some communities it may be as many as one in three women who suffer from postnatal depression. Many of these women will struggle through their sadness, anger and other negative feelings without ever having heard of the condition.

Who is at risk?

Gloria's third pregnancy was unplanned and women in this situation are often at risk, as are single mothers who will have to cope with the pregnancy, birth and raising a child alone. Having the safety net of a family can make a big difference.

"Women who have good

family and partner support, good lines of communication with their family and partners, good relationships with their own mothers, and who have planned pregnancies are less at risk of developing postnatal depression," says Dr Vythilingum. "If they have this, they're more likely to seek and get help early and recover faster and better."

The emotional support that a strong family network gives is important, but so is practical help. Moms, neighbours and sisters can offer to take the baby while the mother rests for an hour. Delivering food that can be heated up easily is always appreciated, and doing washing or ironing can take that extra burden off a mother who is feeling overwhelmed.

The struggle with symptoms such as exhaustion, sadness, and a lack of enthusiasm for life affects not only the mother but also her family, and particularly her other children. A mother may not feel up to providing meals or paying attention to her children's needs. She may lash out at them in anger, or simply withdraw and be quiet and unable to react to their daily joys and sorrows.

Other adults in the house may not always understand what is going on, and this could create tension and arguments. Fathers and grandmothers may feel hurt or confused because the mother is not showing the joy they would expect at having a new baby. Finding out more about postnatal depression can help family members understand, so they're not tempted to say things like "You should be happy you have a baby."

In extreme cases, the mother may even go so far as to harm the baby or other children, or try to kill herself.

"However, most women with PND are still good mothers and pose no risk to their children," says Dr Vythilingum.

How is it treated?

Postnatal depression may not respond to medication alone. For Gloria, it took a combination of antidepressants and the sympathetic ear of a trained counsellor to get her back on track.

The counsellor helped her understand that her feelings were not uncommon, that many other women go through the same thing, and that there was help available.

"Once I knew and understood what was happening to me, I started feeling better," Gloria says.

She continued to take the antidepressants after her baby was born and was able to cope with the challenge of having a little one in the house again.

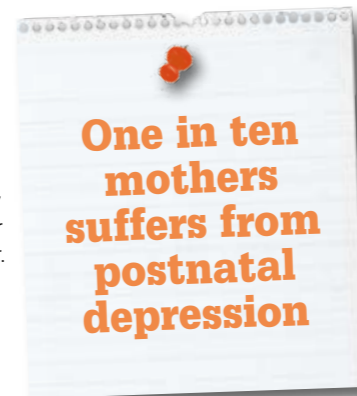
Treatment for this debilitating illness is any one of or a combination of the following:

Drug therapy – antidepressants can help balance the chemicals in the brain that are associated with depression.

Sufferers may need to stay on these for a few years in order for the brain to regain its normal chemical balance. It's important not to suddenly stop taking antidepressants, but to work with your doctor when you want to go off the medication once you're feeling well again.

Counselling – a counsellor with experience in postnatal depression can understand what you're going through and help you move on. Your doctor can refer you to a counsellor, or you can phone the Postnatal Depression Support Association and they'll put you in touch with help in your area.

Support – talking to other mothers who have suffered from postnatal depression is a good way to get over the loneliness and guilt that is often part of this illness. Join a mother's group and you will soon realise you're not alone in dealing with these negative feelings. □



Help yourself

You can't cure postnatal depression by wishing it away. Here are some tips to help you deal with it and make things easier for yourself as well as those around you.

- Get enough sleep. According to Dr Vythilingum, lack of sleep and exhaustion are factors that can contribute to postnatal depression. When the baby sleeps, lie down and relax, listen to some peaceful music and allow your body and mind to rest. Even if you don't sleep, this will help you recharge your physical and mental batteries.
- Don't get stuck at home. Wrap the baby up warmly on your back or in a pram, and go to the local spaza or visit a friend.
- Eat well and healthily. Eating too little or the wrong foods will reduce your energy even more.
- Lean on your family, friends and community when they offer to bring food or look after the baby for an hour.
- Most clinic sisters and doctors are aware of postnatal depression so use the opportunity of your baby's check-ups to talk about your feelings. You will not shock them, and they will be able to help you get assistance.
- Call the Postnatal Depression Support Association on 082-882-0072 or 021-797-4498, email info@pnDSA.org.za or visit their website, www.pnDSA.org.za.