

# PND could happen to anyone

Postnatal depression doesn't discriminate. **Helène Ramackers** spoke to local celebrities Irene Bester and Penny Lebyane about their experiences

Irene suffered PND after the birth of her daughter, Mikayla

When actress Brooke Shields gave birth to a beautiful baby daughter, Rowan, she felt like the luckiest woman in the world. But within days her mood shifted dramatically. For months after the birth, all Brooke could do was cry. Rowan's presence terrified her. Whenever she was close to her daughter, a numbness swept over her and froze her to the core. She felt desperate, isolated and as if her life wasn't worth living any more.

Although she didn't realise it at the time, Brooke was suffering from postnatal depression, a crippling condition that affects one in 10 new mothers. With astonishing honesty and a refreshingly wry sense of humour, Brooke writes about her battle with postnatal depression and her slow path to recovery in *Down Came the Rain* (Penguin Books). She lifted the lid on a taboo topic that is still widely misunderstood.

## Anxiety overload

**Thirty-something television continuity announcer Irene Bester and her husband, Johan, have a daughter, three-year-old Mikayla, and are expecting their second child in the middle of 2007.**

'When Mikayla was four months old, I was asked to return to work. I felt anxious and put it down to a concern about leaving Mikayla, even though she was being looked after by my husband's mother, Henda. Although Mikayla was fine, I wasn't. I went to see my doctor and he put me on Eglynol for my anxiety. But when Mikayla was eight months old, I realised that I had postnatal depression.

'I was weepy all the time and just wanted to sleep and "go away". I thought Mikayla would be better off without me. I know today that this isn't true, but back then I didn't. Thankfully it did not affect me bonding with her – she was a happy baby. I would go to the shops and come home with a quarter of the items I had planned to buy because I would become so anxious that I would have to abandon my shopping basket.

'I think PND is caused by a combination of factors: broken sleep, the overwhelming responsibility of looking after a little baby who is depending on you for survival and the insecurity of not knowing everything. I like to be in control and struggled with not knowing what was wrong with Mikayla at times. The pressure to be a good mom was intense.

'I put Mikayla's needs ahead of my own and ended up alienating myself. My doctor put me on another type of antidepressant, which I stayed on for a year. I started going to gym again, which I hadn't done for 18 months. That was a shock to my body because I'd always been active before the birth.

'Within two weeks, I started to feel better, sleep better and could handle the challenges of motherhood better. My doctor recommended exercise, good nutrition and medication, and that I should see a psychologist or join a support group. Instead I spent a lot of time speaking to a friend who is a clinic sister. I deliberately avoided negative issues – anything that released endorphins worked for me. I read up on PND and started taking Omega 3, 6 and 9 and eating bananas – they boost serotonin levels in the brain. My best advice for other mothers is to get some sleep.

'Johan's support through this trying time was phenomenal. He was always available to change nappies, bath Mikayla and wind her so I could get some sleep during the early hours of the morning. I couldn't ask for a better husband and father.

'It was very difficult for him to see me going through this and, because it was all new to him, he couldn't really understand it all. Yet he was compassionate and would seek advice from other dads, so I knew he cared. PND is hard on husbands, too.' ▷

Irene decided to speak out about PND to break the stigma surrounding it. 'Women are not talking about it enough, and we live in a fast-paced society where women are supposed to handle it all – home, work, finances and the stress that goes with it. We think that if we don't keep it all together we are failures, but it takes strength to say, "I am not coping, please help me", not weakness.'

'I am back to feeling like my joyous self. Mikayla is wonderful. She speaks both Afrikaans and English and I'm also teaching her Greek. I love her so much and I am looking forward to giving her a brother or a sister. Asking for help was the best thing I could have done and now I know what to look out for. I'll get help immediately next time, if I need to.'

## On edge

**Metro FM DJ and *Idols* judge Penny Lebyane, 30, gave birth to her son, Takunda, in May 2005.**

'I had a great pregnancy. I was fit and healthy and I chose a natural birth. The midwife, my mother and my man, Ali Naka, were present during the birth and I was in labour for only six hours.

'But four days after giving birth to my beautiful son, I became hyperactive. I couldn't sleep, I felt trapped and unsafe in my own house and my mind didn't stop working. I was on edge all the time.


'I'd been through a lot in the six years before Takunda's birth and I'd been brave. But after his birth I couldn't do it any more.'

'I was diagnosed with periperal psychosis\*, an extreme form of PND, and admitted to a psychiatric ward and put on antidepressants. I felt excited but out of control in a liberating way. I had no negative feelings such as wanting to kill my child or myself: I just felt powerful beyond belief. The only time I thought of dying was when I was being driven to the hospital. While I was in hospital I saw a psychotherapist and talked about my life and got a lot of issues out of my system. After 10 days I asked to be discharged and stopped taking the medication. The medication just made me more anxious. Instead, I opted for a balanced diet, exercise and talking about my thoughts and feelings openly.' Her bond with her baby wasn't affected by PND. 'He was all I wanted

– him and his dad. I wanted my mom and my entire family to leave me alone. They were really hurt.'

Penny also believes that PND is caused by a combination of factors. In her case it was emotions that she hadn't dealt with: anger, fear, rejection, losing confidence in herself and wanting things to be a certain way. 'I think having a baby is a life-changing event and nature forces you to deal with matters you may have been avoiding.'

She thinks there's a stigma attached to PND because people don't talk about it. 'People are afraid they will be judged. And a lack of knowledge about PND makes it easier for the stigma to develop, especially in the black community. There is already so much stigma and myth around women's emotions after giving birth. I didn't feel guilty about having PND – I understood why it had happened to me and took control of it. It made me accept how vulnerable I am and now I want to make people more aware of PND.'

'I'm fine now. Some people don't want to hear about how I ended up in a psychiatric ward, but I am happy to talk about it to shed light on PND. I'm working on a website that will have detailed info on PND and other women's health issues that I'm passionate about, for example cervical cancer. People can e-mail me at penny@metrofm.co.za if they want to share their experiences.' 

\* Severe postnatal depression, or periperal psychosis, is rare and occurs in one in 600 births.

◆ The Postnatal Depression Support Association of South Africa (PNDSA) is a non-profit organisation that was founded in 1997 by a small group of health professionals and survivors of pre- and postnatal depression and anxiety. PNDSA offers emotional support to mothers and fathers during the stressful period of pregnancy and childbirth. For more information, call their national helpline on 082 882 0072 or contact Linda Lewis at the Postnatal Depression Support Group on 021 685 6172. You can also contact PNDSA's head office on 021 797 4498, the Gauteng helpline on 011 786 6556 or the KwaZulu-Natal helpline on 031 265 9790. For more information, e-mail info@pnDSA.org.za or visit pnDSA.org.za.

## Signs and symptoms of PND

Dr Dainty Meyer, a psychiatrist in private practice in Table View, has a special interest in postnatal depression and highlights common symptoms of PND:

- ◆ A feeling of being unable to cope.
- ◆ Anxiety and fearfulness.
- ◆ A low or irritable mood.
- ◆ A lack of enthusiasm for activities previously enjoyed and absence of motivation.
- ◆ A sense of inadequacy and experiencing feelings of failure and hopelessness.
- ◆ An inability to think clearly.
- ◆ Extreme tiredness.
- ◆ Loss of libido.
- ◆ Feelings of anger and loss of control.
- ◆ Sleep disturbance (unrelated to baby's needs).
- ◆ Appetite changes.
- ◆ Agitation and panic.
- ◆ Unreasonable feelings of guilt, self-blame and shame.
- ◆ Suicidal thoughts.
- ◆ Unusual physical symptoms such as headaches, vomiting and palpitations.

These feelings may emerge immediately after the arrival of the baby but can also be present later, or go unrecognised for weeks or months.

## Who gets it and why?

One in five mothers may develop PND in the first year after a birth. Some personality traits and circumstances may trigger it:

- ◆ Being a perfectionist.
- ◆ A lack of support.
- ◆ Experiencing a traumatic birth or an unplanned or difficult/complicated pregnancy.
- ◆ Financial and other stress.
- ◆ A history of depression.

Dr Meyer says, 'Neurobiology echoes the wisdom of the African saying: "It takes one woman to bear a child, but it takes a whole village to raise it." Women were not designed to raise a child in isolation. A healthy social support structure plays an important preventive role in PND – when the mother does not feel securely supported, she is at risk.'

## How is PND treated?

'Medication, preferably combined with counselling or therapy, usually works well,' says Dr Meyer. 'It lends support to those neurobiological systems that are overtaxed, allowing positive arousal and mood-stabilising chemicals to work properly again and, very importantly, to lower the mother's levels of stress hormones. Many breastfeeding mothers with PND are concerned that the medication will affect their babies. Caution is always advised when taking any substances or medication during breastfeeding. Talk to your doctor if you are concerned. We have to consider the impact of untreated depression on the health of the mother and her child. Mothers should be involved in the decision-making process and discuss the various treatments available with their doctors. This enables them and their partners to decide, together with their doctor, on a plan of treatment and support with which they feel comfortable.'

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Penny was diagnosed with periperal psychosis after the birth of her son, Takunda