THE MOTHERHOOD CENTER

Learn about PMADs

The Motherhood Center aims to educate, diagnose and treat moms/birthing parents suffering from perinatal mood and anxiety disorders (PMADs) otherwise known as postpartum depression.

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About PMADs

PMADs (pronounced *p-mads*) is a clinical term for what many people refer to as "postpartum depression." It includes several symptoms that mothers/birthing parents can experience after a baby is born. What isn't talked about enough is that these same symptoms can happen during pregnancy. In fact, **50%** of all PMADs develop before delivery.

So why isn't anyone talking about how hard it is to become a new mom?

When you have a baby, people say things like, "Enjoy this amazing time with your new baby—it's the best time of your life!" or, "You must be so happy!" Well... what if it's not amazing? What if you're not brimming with joy? What if new motherhood feels bad? It's ok to say, "This is really hard," because it is!

There is no right or wrong way to feel about becoming a parent, whether it's for the first time or the third.

What are the baby blues?

Nearly 80% of all new mothers/birthing parents experience the baby blues, which can feel like a rollercoaster of emotions—feeling happy one minute and tearful the next, stressed, exhausted, and overwhelmed.

80%

1 in 5 new or expecting moms will develop a PMAD.

Most new mothers experience the baby blues for up to 2 weeks postpartum. Lingering or intensified feelings of sadness, helplessness, hopelessness, or debilitating anxiety about caring for baby that continues beyond the two-week mark may suggest a perinatal mood and anxiety disorder.

What to know about PMADs

PMADs include the following:

Depression, anxiety, obsessive-compulsive disorder (OCD), post-traumatic stress disorder (PTSD), and in the most severe cases, postpartum psychosis, during the perinatal period (pregnancy and/or postpartum) are classified as PMADs. A parent experiencing these more intensive symptoms may have difficulty bonding with their baby. They might convince themselves that they're not a good parent, or worry that they don't love their baby enough. These conditions can be distressing; however, treatment is available and can help parents feel better.

Why are PMADs Important?

1 in 5 birthing people experience a PMAD in the perinatal period.

50% of PMADs develop before delivery.

80% of cases go undiagnosed and untreated because of shame and stigma.

PMADs are the **#1** complication associated with childbirth.

PMADs are the **leading cause** of maternal mortality.

How do I know if I have a PMAD?

There are several ways to determine whether the symptoms you experience may indicate a PMAD:

Your symptoms continue after the initial two-week postpartum period.

You have difficulty completing daily tasks, you notice tension or strain in your relationships, or you have difficulty connecting with your baby.

You score above 10 on the Edinburgh Postnatal Depression Scale (EPDS), a screening tool provided by your OB/GYN, PCP, or pediatrician.

Your symptoms feel so distressing that they take up most of your mental space and consume your day.

What does perinatal depression feel like?

Perinatal depression can make you feel like you are drowning in a big sea, struggling to keep your head above water. It can make you feel ashamed, guilty, and alone.

Symptoms include the following:

Low mood, sadness, tearfulness.

Loss of interest or pleasure in the things you used to enjoy.

Feelings of agitation and rage.

Feelings of hopelessness or helplessness.

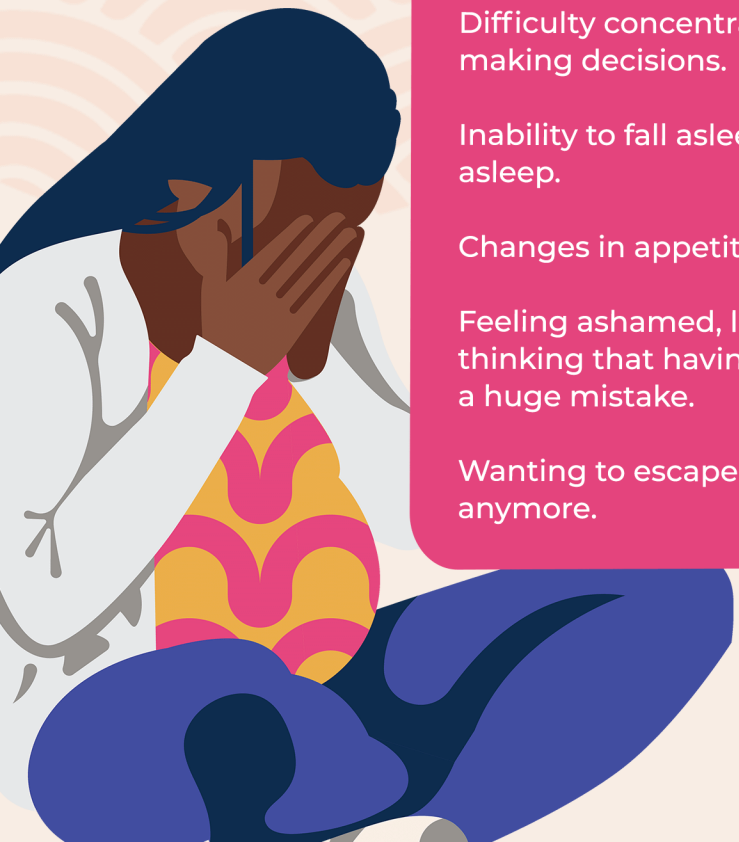
Difficulty concentrating or making decisions.

Inability to fall asleep or stay asleep.

Changes in appetite.

Feeling ashamed, like a failure, or thinking that having a baby was a huge mistake.

Wanting to escape or not be here anymore.



What does perinatal anxiety feel like?

Perinatal anxiety can make you feel like your mind is a hamster wheel or a merry-go-round of endless, circling fears and worries. These anxious thoughts escalate from zero to 100 almost immediately (e.g., “If my baby doesn’t take a 2-hour nap three times a day, then he will struggle, and I will be exhausted, and I won’t be able to take care of him, and then he’ll be taken away from me”). You may also find it difficult to control or stop these thoughts.

Symptoms include the following:

Anxiety, panic attacks, or obsessive thoughts.

Ruminating about your baby’s health and well-being.

Difficulty controlling worries/thoughts.

Irritability or exhaustion, physically and emotionally.

Difficulty concentrating or drawing a blank.

Physical symptoms like dizziness, heart palpitations, or nausea.

What does perinatal OCD feel like?

Perinatal OCD can bring a constant barrage of unwanted thoughts and images, resulting in fears and worries about your role as a caregiver and the safety and well-being of your child.

What do intrusive thoughts look like?

Worries you might harm the baby such as dropping or throwing them.

Anxieties about exposing the baby to toxins, chemicals, or serious illnesses.

Feeling distressed as a result of these thoughts.

To alleviate these thoughts and images, you might engage in repetitive behaviors, including the following:

Excessive washing of clothes, toys or bottles.

Not consuming certain foods or medications out of fear of harming the baby.

Obsessively checking the baby while they sleep.

Asking family members for reassurance that the baby is ok and has not been harmed.

What does perinatal PTSD feel like?

Perinatal PTSD can make you feel like you are re-experiencing a trauma, which puts your body in a state of flight, fight, or freeze, making you feel constantly on-guard or panicked.

Perinatal PTSD may develop following a traumatic birth. Additionally, new moms may feel overwhelmed by motherhood which can activate past traumas.

Symptoms include the following:

Having nightmares, flashbacks, or distressing recollections of the event.

Feeling restless or having difficulty sleeping.

Feeling hypervigilant, on-guard or easily irritated.

Avoiding people, situations, conversations, or places that remind you of the trauma.

Anxiety or panic attacks.

What does postpartum psychosis feel like?

Postpartum psychosis is rare. However, if you or someone you know may be experiencing symptoms of postpartum psychosis, *this is a mental health emergency* that requires a visit to the nearest emergency room.

Postpartum psychosis can make you feel like you are living in an alternate reality—that things are suddenly not what they seem.

You may experience the following:

Delusions or strange beliefs that feel real.

Hallucinations (seeing or hearing things that aren't there).

Feeling confused, disorganized, or disconnected from reality.

A decreased need for, or inability to sleep.

Feeling paranoid or suspicious.

Difficulty communicating.

People with a history of bipolar disorder are at a greater risk of developing postpartum psychosis.

Psychosis is a 911 emergency and requires hospitalization.

Where can you find support?

The best first step is to get evaluated by a licensed perinatal mental health specialist. A reproductive psychiatrist or perinatal therapist has expertise in treating PMADs and understanding the complexities of how PMADs impact maternal mental health.

An evaluation will provide information about which PMAD you may be experiencing and the most appropriate treatment options for your specific symptoms.

Treatment may include individual therapy, group therapy, medications that are safe and effective, a perinatal partial hospital program, or an inpatient hospital program.

"It can be really hard to ask for help, but the sooner you do, the sooner you'll feel so much better!"

The Motherhood Center
offers weekly support groups, individual therapy,
and medication management.

TMC also offers our one-of-a-kind
Day Program for mothers/birthing parents
who may need more intensive care.

With the right help,
everyone can feel better.

Call today for a free initial PMAD screening.
212 335 0034