



OFFICE OF THE ASSISTANT SECRETARY FOR HEALTH

# **Postpartum Depression:** *Evidence and Resources to Inform Your Challenge Submission*

*June 30, 2020*

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No Disclosures Related to Conflicts of Interest

The findings and conclusions in this presentation are those of the author and do not necessarily represent the views of the U.S. Department of Health and Human Services' Office on Women's Health.



# OFFICE OF THE ASSISTANT SECRETARY FOR HEALTH (OASH)

LEADING AMERICA TO HEALTHIER LIVES

## HEALTH OPPORTUNITY

Advancing health opportunities for all

## HEALTH TRANSFORMATION

Catalyzing a health promoting culture

## HEALTH INNOVATION

Fostering novel approaches and solutions

## HEALTH RESPONSE

Responding to emerging health challenges

- Oversees key public health offices and programs
- 10 regional health offices across the nation
- Office of the Surgeon General
- Office on Minority Health
- Public Health Service Commissioned Corps



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# Agenda

- Basic hormone physiology
- Define postpartum depression
- Current research findings
- HHS activities and resources

*First...*

- (Prenatal and Postpartum) vs. Perinatal terminology

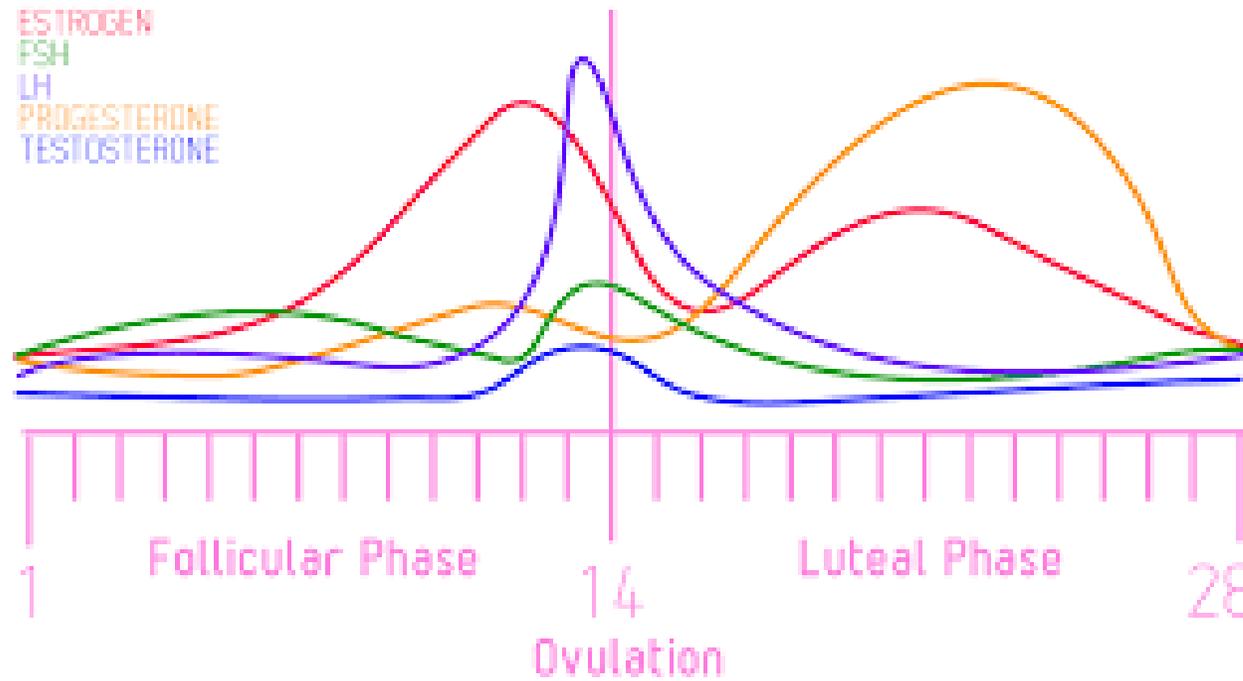


# Agenda

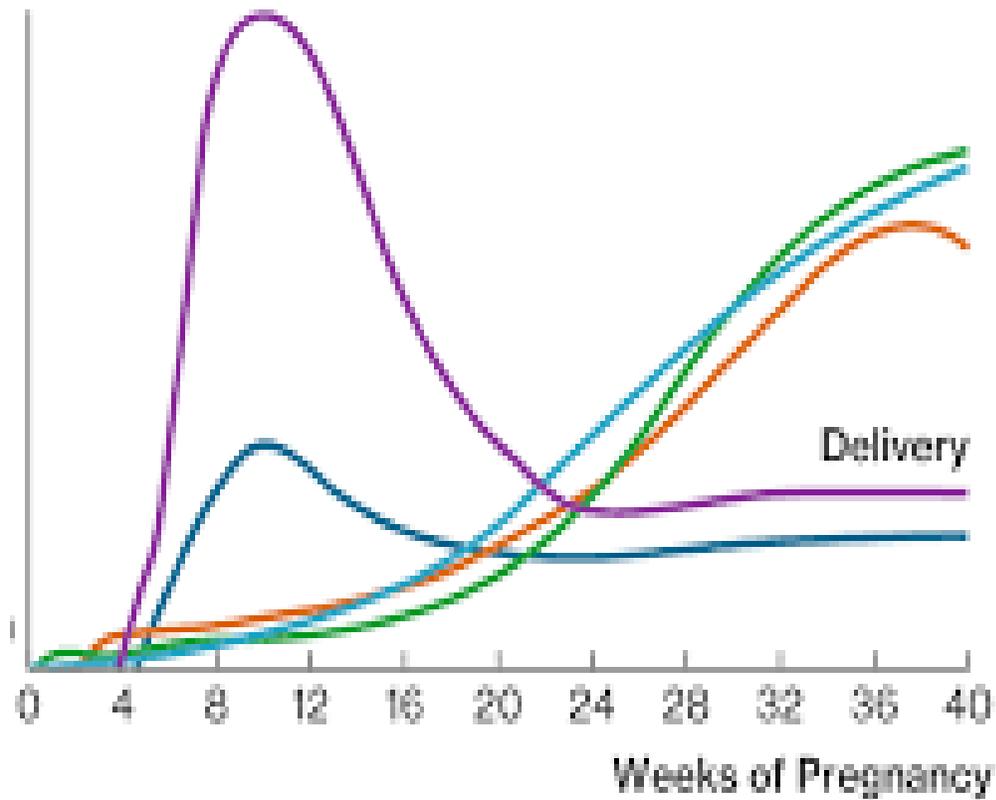
- Basic hormone physiology



# Hormones during an “average” menstrual cycle



# Hormone Levels During Pregnancy



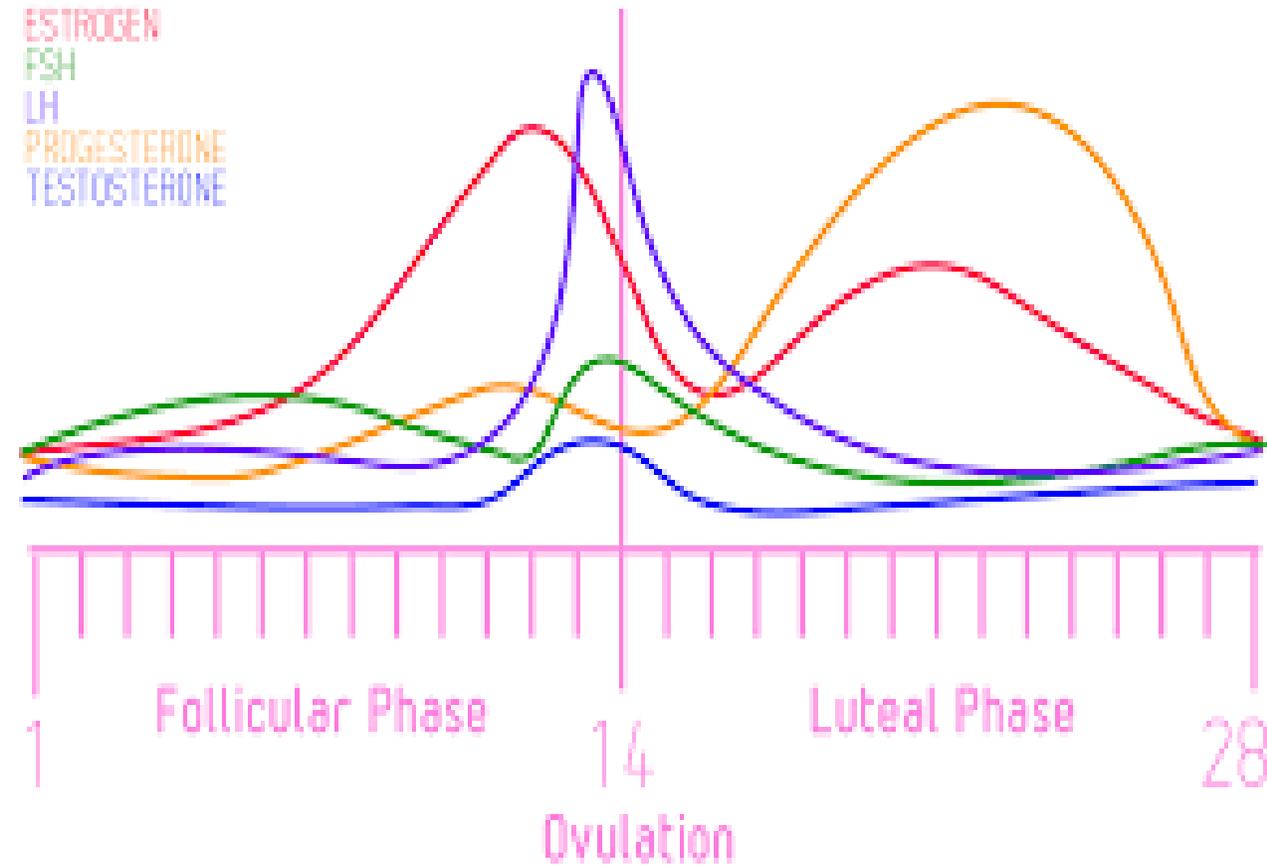
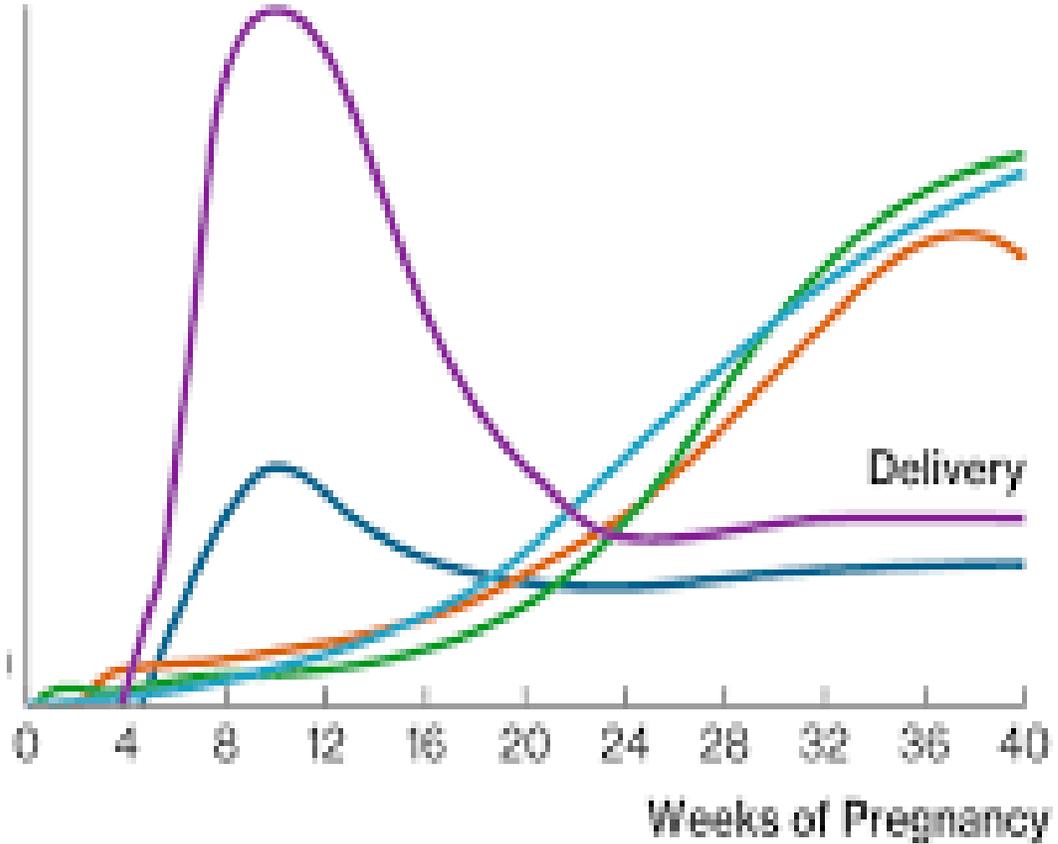
Human chorionic gonadotropin (hCG)   Prolactin   Estrogen  
Progesterone   Relaxin

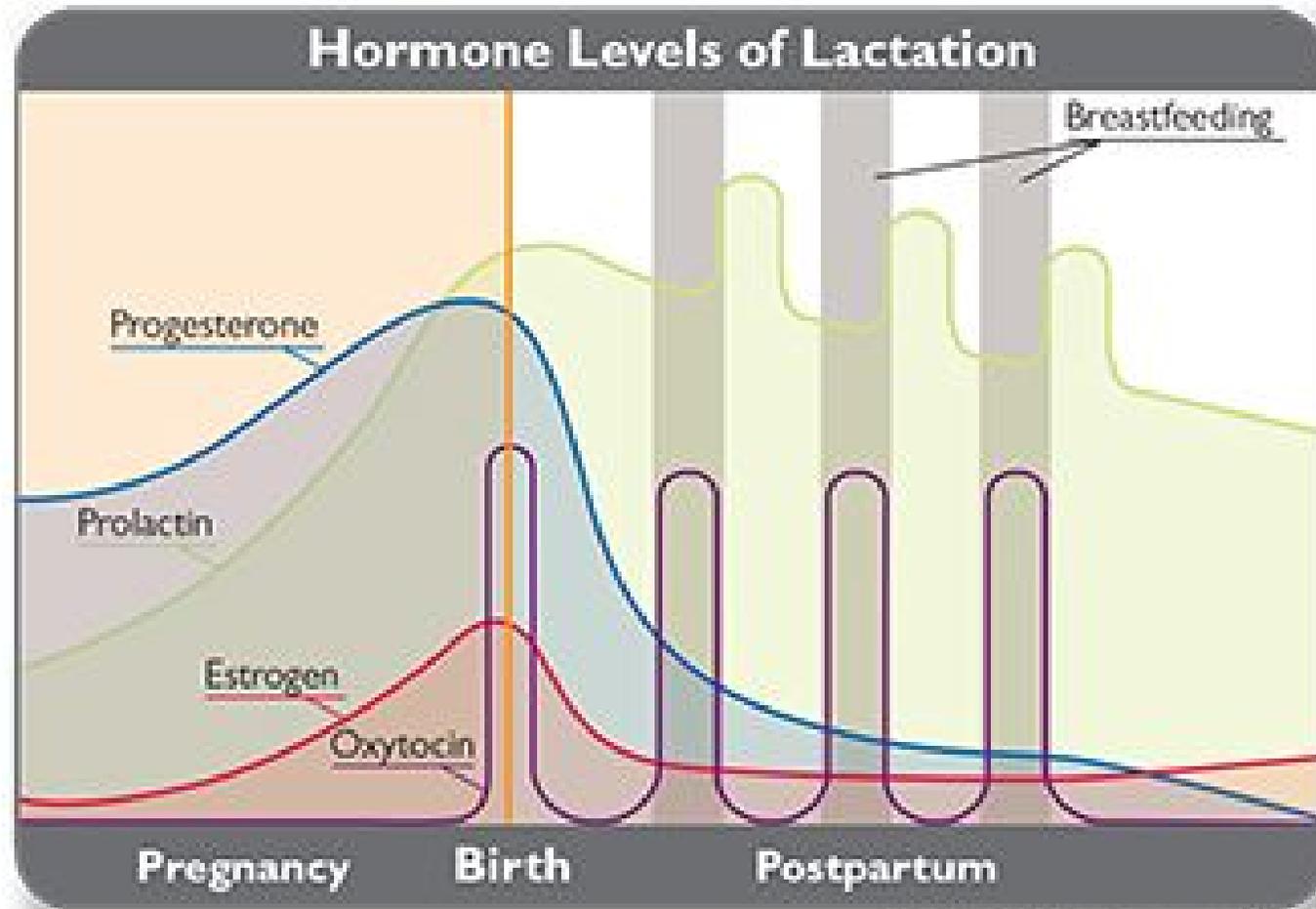


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Available at: <https://cdn.kastatic.org/ka-perseus-images/91c3ce0b88ec140971f2af5720ea4f743d928bae.svg>

**Not to scale**





*Adopted from Love, 1990*



# Agenda

- Basic hormone physiology
- Define postpartum depression



# Define postpartum depression

- Baby blues
- Postpartum depression
- Postpartum psychosis

Santoro, Kathryn and Hillary Peabody. "Identifying and Treating Maternal Depression: Strategies & Considerations for Health Plans." NIHCM Foundation Issue Brief



# The research evidence - perinatal mental health conditions

- **One of the most common complications in perinatal period (1)**
  - affects as many as 1 in 7 women (6)
- **Underlying cause for about 9% of pregnancy-related deaths (2)**
- Postpartum depression is associated with
  - lower rates of breastfeeding initiation
  - poorer maternal and infant bonding
  - increased likelihood of infants showing developmental delays (3)
  - Infant sleeping and eating problems (4)



# USPSTF Recommendations

United States Preventive Services Task Force (USPSTF) recommends

- All adults be screened for depression, including pregnant and postpartum women (5)  
and
- Clinicians should provide or refer pregnant and postpartum women who are at increased risk for perinatal depression to counseling interventions (6) - 2019



# Clinical Professional Organization Recommendations

## American College of Obstetricians and Gynecologists (ACOG)

- obstetric care providers screen patients for depression and anxiety symptoms at least once during the perinatal period and
- also conduct a full assessment of mood and emotional well-being during the comprehensive postpartum visit (7)

## American Academy of Pediatrics

- routine screening for maternal postpartum depression be integrated into well-child visits (8)



# Agenda

- Basic hormone physiology
- Define postpartum depression
- **Current research findings**



# Current research findings

## *Vital Signs: Postpartum Depressive Symptoms and Provider Discussions About Perinatal Depression — United States, 2018*

- *Weekly / May 15, 2020 / 69(19);575–581 (MMWR)*  
Brenda L. Bauman, MSPH; Jean Y. Ko, PhD; Shanna Cox, MSPH; Denise V. D’Angelo, MPH; Lee Warner, PhD; Suzanne Folger, PhD; Heather D. Tevendale, PhD; Kelsey C. Coy, MPH; Leslie Harrison, MPH; Wanda D. Barfield, MD  
[https://www.cdc.gov/mmwr/volumes/69/wr/mm6919a2.htm?s\\_cid=mm6919a2\\_w](https://www.cdc.gov/mmwr/volumes/69/wr/mm6919a2.htm?s_cid=mm6919a2_w)
- Data source: 2018 PRAMS (Pregnancy Risk Assessment Monitoring System) and infant birth certificate



# Simple questions

Since your new baby was born,

1. How often have you felt down, depressed, or hopeless?
  2. How often have you had little interest or little pleasure in doing things? (11)
    - Always---often---sometimes---rarely---never
    - *Always---often = postpartum depressive symptoms*
- 

1. During any of your prenatal care visits, did a doctor, nurse, or health care worker ask you if you were feeling down or depressed?
2. During your postpartum checkup, did a doctor, nurse, or other health care worker ask if you were feeling down or depressed?
  - Yes---no (%)



# Findings

- 31 PRAMS sites, the prevalence of self-reported Postpartum Depressive Symptoms was **13.2%**, ranging from 9.7% (Illinois) and 10.3% (Massachusetts) to 19.4% (West Virginia) and 23.5% (Mississippi)
- Among 16 sites continuously reporting from 2012 to 2018, a small but statistically significant annual percentage point increase of 0.22% (p-value <0.05) in PDS was observed.



# PDS prevalence exceeded 20% in some subgroups

- ≤19 years
- American Indians/Alaska Natives
- smoked during or after pregnancy
- experienced intimate partner violence before or during pregnancy
- experienced depression before or during pregnancy
- infant had died since birth



# Did the provider ask about depressive symptoms?

## *During prenatal visits:*

- increased significantly during 2016–2018, from 76.2% to 79.3% (22 sites)

## *During the postpartum visit:*

- increased significantly from 84.1% to 88.0% ( $p < 0.05$ ) during 2016–2018 (22 sites)
- varied from 50.7% (Puerto Rico) and 73.1% (New York City) to 95.9% (Minnesota) and 96.2% (Vermont)



# Take home messages

- 13% of surveyed women reported postpartum depressive symptoms
- Although there has been improvement,
  - one in five women reported they were not asked about depression during prenatal visits
  - one in eight reported they were not asked about depression during postpartum visits.



# Agenda

- Basic hormone physiology
- Define postpartum depression
- Current research findings
- **HHS activities and resources**



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 Eunice Kennedy Shriver National Institute of Child Health and Human Development

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[Home](#) > [Initiatives](#) > [Moms' Mental Health Matters](#) > Moms-to-be and moms



Find  
Help  
Now

## Moms' Mental Health Matters

### Depression and Anxiety Around Pregnancy

Depression and anxiety can happen during pregnancy or after birth. Learn the signs and how to get help.



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<https://nichd.nih.gov/MaternalMentalHealth>



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Healthy pregnancies. Healthy children. Healthy and optimal lives.

## Action Plan for Depression and Anxiety Around Pregnancy

Having a baby brings a mix of emotions, including feeling sad and feeling overwhelmed. Many women experience deeper signs of depression and anxiety before and after birth. Be prepared. **Watch for the signs.**

### If you...

- Feel like you just aren't yourself
- Have trouble managing your emotions
- Feel overwhelmed but are still able to care for yourself and your baby

### You may be experiencing mood swings that happen to many pregnant women and new moms.

**These feelings typically go away after a couple of weeks.**

- Take special care of yourself. Get your partner to watch the baby, get a babysitter, or team up with another mom to share child care so that you can rest and exercise.
- Continue to watch for the signs of depression and anxiety in the yellow and red sections below. If things get worse, find someone to talk to. Talk to a health care provider if you feel unsure.

### If you...

- Have feelings of intense anxiety that hit with no warning
- Feel foggy and have difficulty completing tasks
- Feel "robotic," like you are just going through the motions
- Have little interest in things that you used to enjoy
- Feel very anxious around the baby and your other children
- Have scary, upsetting thoughts that don't go away
- Feel guilty and feel like you are failing at motherhood

### You may be experiencing postpartum depression and anxiety.

**These feelings will not go away on their own.**

- Get help. Contact your health care provider or visit a clinic.
- Call Postpartum Support International at **1-800-944-4PPD (4773)** to speak to a volunteer who can provide support and resources in your area.
- Talk to your partner, family, and friends about these feelings so they can help you.

### If you...

- Feel hopeless and total despair
- Feel out of touch with reality (you may see or hear things that other people don't)
- Feel that you may hurt yourself or your baby

### Get help now!

- Call **9-1-1** for immediate help.
- Call the National Suicide Prevention Lifeline at **1-800-273-TALK (8255)** for free and confidential emotional support—they talk about more than suicide.
- Call the Substance Abuse and Mental Health Services Administration's National Helpline at **1-800-662-HELP (4357)** for 24-hour free and confidential mental health information, treatment, and recovery services referral in English and Spanish.

## Depression and Anxiety Happen. **Getting Help Matters.**

To learn more, visit [nichd.nih.gov/MaternalMentalHealth](http://nichd.nih.gov/MaternalMentalHealth).  
To find a mental health provider in your area, call **1-800-662-HELP (4357)**.



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<https://www1.nichd.nih.gov/ncmhep/initiatives/moms-mental-health-matters/pages/materials.aspx>

You're prepared for  
**ALMOST** anything...



Hundreds of dirty diapers



Dozens of loads of laundry



Middle-of-the-night feedings

**But are you prepared for the possibility of depression and anxiety?**

If you're like many pregnant women, nothing could be further from your mind. But depression and anxiety can happen before or after birth. Learn these signs.



Intense anger, worry, or unhappiness



Extreme mood swings



Difficulty caring for yourself or your baby



Less interest in things you used to enjoy



Changes in your eating or sleeping habits

**Reach Out. Get Help. You Matter.**

To learn more, visit [nichd.nih.gov/MaternalMentalHealth](http://nichd.nih.gov/MaternalMentalHealth).  
To find a mental health provider in your area, call 1-800-662-HELP (4357).



NIH

National Institute of Child Health and Human Development



NATIONAL INSTITUTE OF CHILD HEALTH & HUMAN DEVELOPMENT

## Talk About Depression and Anxiety During Pregnancy and After Birth

### Ways You Can Help

Pregnancy and a new baby can bring a mix of emotions—excitement and joy, but also sadness and feeling overwhelmed. When these feelings get in the way of your loved one taking care of herself or the baby—that could be a sign that she's dealing with deeper feelings of depression or anxiety, feelings that many pregnant women and new moms experience.



#### LISTEN

Open the line of communication.

- ♦ "I know everyone is focused on the baby, but I want to hear about you."
- ♦ "I notice you are having trouble sleeping, even when the baby sleeps. What's on your mind?"
- ♦ "I know a new baby is stressful, but I'm worried about you. You don't seem like yourself. Tell me how you are feeling."
- ♦ "I really want to know how you're feeling, and I will listen to you."



#### OFFER SUPPORT

Let her know that she's not alone and you are here to help.

- ♦ "Can I watch the baby while you get some rest or go see your friends?"
- ♦ "How can I help? I can take on more around the house like making meals, cleaning, or going grocery shopping."
- ♦ "I am here for you no matter what. Let's schedule some alone time together, just you and me."



#### OFFER TO HELP

Ask her to let you help her reach out for assistance.

- ♦ "Let's go online and see what kind of information we can find out about this." Visit [nichd.nih.gov/MaternalMentalHealth](http://nichd.nih.gov/MaternalMentalHealth) to learn more.
- ♦ "Would you like me to make an appointment so you can talk with someone?" Call her health care provider or the Substance Abuse and Mental Health Services Administration's National Helpline at 1-800-662-HELP (4357) for 24-hour free and confidential mental health information, treatment, and recovery services referral in English and Spanish.
- ♦ "I'm very concerned about you." Call the National Suicide Prevention Lifeline at 1-800-273-TALK (8255) for free and confidential emotional support—they talk about more than suicide.

<https://www1.nichd.nih.gov/ncmhep/initiatives/moms-mental-health-matters/pages/materials.aspx>

# HEALTH RESOURCES & SERVICES ADMINISTRATION (HRSA)



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## Mental and Behavioral Health: Mothers, Children & Families



In HRSA's Maternal and Child Health Bureau, our programs fundamentally promote mental health and well-being for maternal and child populations across the lifespan. This aligns with our mission to improve the health of America's mothers, children, and families.

Our programs *Promote, Prevent, Screen, Intervene, Refer, Treat, Train, and Support.*

- We *promote* healthy mental, emotional and behavioral development in infants, children and youth.

### Mental and Behavioral Health

*"There is no health without mental health." -World Health Organization, 2017*



# HRSA AND POSTPARTUM DEPRESSION

Depression During and After Pregnancy





**A Resource for Women, Their Families,  
and Friends**



**"I recognized the symptoms and took charge. It was not easy, but with support from my family, friends, and doctors, and drawing on my own personal strength, I overcame Perinatal Depression and today I am moving forward. My family is well. My baby is well. And most importantly, I am well."**



# HEALTH RESOURCES & SERVICES ADMINISTRATION (HRSA)

The screenshot shows the HRSA website header with the logo and navigation links. Below the header is a search bar and a navigation menu with categories like Grants, Loans & Scholarships, Data Warehouse, Training & TA Hub, and About HRSA. The main content area features a breadcrumb trail: Home > About HRSA > News & Events > HRSA 2018 Press Releases > HRSA awards over \$12M for maternal & child mental health programs. The title of the press release is "HRSA awards over \$12M for maternal & child mental health programs". Below the title, there is contact information for the HRSA News Room and the press office, including a phone number and an email address. The main text of the press release states that HRSA awarded \$12.4 million through two programs to support the mental health of women and children across the United States. A bullet point indicates that the programs promote healthy mental, emotional, and behavioral development in infants, children, and youth.

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## HRSA awards over \$12M for maternal & child mental health programs

[U.S. Department of Health & Human Services](#)  
Health Resources and Services Administration

HRSA NEWS ROOM  
<http://newsroom.hrsa.gov>

**FOR IMMEDIATE RELEASE**  
Tuesday, September 25

CONTACT: HRSA PRESS OFFICE 301-443-3376  
[Press@hrsa.gov](mailto:Press@hrsa.gov)

The Health Resources and Services Administration (HRSA) today awarded \$12.4 million through two programs designed to support the mental health of women and children across the United States.

- We *promote* healthy mental, emotional and behavioral development in infants, children and youth.



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<https://mchb.hrsa.gov/maternal-child-health-initiatives/mental-behavioral-health>  
<https://www.hrsa.gov/about/news/press-releases/hrsa-awards-12-million-maternal-child-mental-health-programs>

# Indian Health Service (IHS) AND POSTPARTUM DEPRESSION

U.S. Department of Health and Human Services

 **Indian Health Service**  
The Federal Health Program for American Indians and Alaska Natives

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- Maternal and Child Health**
- Adverse Childhood Experiences
- Alcohol and Substance Use During Pregnancy
- Emergency Preparedness and Women
- Fetal Alcohol Spectrum Disorder (FASD)
- Pediatric Health
- Pregnancy

## Postpartum Depression

### What is Postpartum Depression?

Postpartum depression is a mood disorder that may develop after a woman gives birth. Symptoms of Postpartum depression can interfere with a woman's ability to take care of herself and her baby.

Symptoms may include:

- Having feelings of sadness or emptiness
- Anxiety or worrying more than usual
- Having mood swings, becoming easily upset
- Feeling angry or acting enraged
- Feeling overwhelmed or hopeless
- Crying more than usual, and without obvious reason
- Over or under-eating
- Insomnia or oversleeping
- Memory problems, forgetfulness
- Experiencing physical pain (headaches, muscular pain)
- Avoidance of family, friends or social contact with others
- Loss of interest in favorite hobbies or activities
- Difficulty bonding with or feeling attached to the baby
- Questioning ability to be a good mother
- Thoughts of self-harm or injuring the baby



# FOOD AND DRUG ADMINISTRATION (FDA) AND INFORMATION ON MEDICINES IN PREGNANCY

## Pregnancy



Having a baby can be a joyous time. The FDA has lots of resources to help you make good choices about medicines, foods, and other products for you and your baby.



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[https://www.fda.gov/consumers/womens-health-topics/pregnancy#Medicine\\_and\\_Pregnancy](https://www.fda.gov/consumers/womens-health-topics/pregnancy#Medicine_and_Pregnancy)

# CENTERS FOR DISEASE CONTROL AND PREVENTION (CDC)

## Reproductive Health

[CDC](#) > [Reproductive Health](#) > [Features](#)

### Reproductive Health

About Us +

Data and Statistics +

**Features** -

Disaster Planning: People with Chronic Disease

Helping Babies Sleep Safely

Disaster Safety for Expecting and New Parents

**Depression During and After Pregnancy**

Premature Birth

Emergency Preparedness and Response +

## Depression During and After Pregnancy

[Español \(Spanish\)](#)

**Moms and moms-to-be deserve the best—including the very best mental health. Depression during and after pregnancy is common and treatable. If you think you have depression, seek treatment from your health care provider as soon as possible.**

### Depression causes severe symptoms that affect daily life

Everyone feels sad sometimes, but these feelings normally pass within a few days. Depression is a serious mood disorder that may last for weeks or months at a time.

### Depression doesn't feel the same for everyone

Some people may experience a few symptoms, and others might experience many. How often symptoms occur, how long they last,



Depression during and after pregnancy is common and treatable.



# CENTERS FOR DISEASE CONTROL AND PREVENTION (CDC)

- PRAMS, the Pregnancy Risk Assessment Monitoring System
  - a collaborative surveillance project between CDC and state health departments
  - <https://www.cdc.gov/prams/>
- Maternal Mortality Review Boards
  - <https://www.cdc.gov/reproductivehealth/maternal-mortality/index.html>
- NCHS National Health Interview Survey (NHIS)
  - <https://www.cdc.gov/nchs/>
- Wonder
  - Ad hoc query system
  - <https://wonder.cdc.gov/>





[BMC Pregnancy Childbirth](#). 2019; 19: 256.

PMCID: PMC6647165

Published online 2019 Jul 22. doi: [10.1186/s12884-019-2387-3](https://doi.org/10.1186/s12884-019-2387-3)

PMID: [31331292](https://pubmed.ncbi.nlm.nih.gov/31331292/)

## The PRogram In Support of Moms (PRISM): study protocol for a cluster randomized controlled trial of two active interventions addressing perinatal depression in obstetric settings

[Tiffany A. Moore Simas](#),<sup>1,2,3,4,5,7</sup> [Linda Brenckle](#),<sup>4</sup> [Padma Sankaran](#),<sup>4</sup> [Grace A. Masters](#),<sup>1</sup> [Sharina Person](#),<sup>1,5</sup>  
[Linda Weinreb](#),<sup>6,9</sup> [Jean Y. Ko](#),<sup>10,11</sup> [Cheryl L. Robbins](#),<sup>10</sup> [Jeroan Allison](#),<sup>1,5</sup> and [Nancy Byatt](#)<sup>1,2,4,5,8</sup>

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6647165/>



# SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION (SAMHSA)

## Depression in Mothers: More Than the Blues

*A Toolkit for Family Service Providers*



### ENGAGING IN PLEASANT ACTIVITIES CAN INCREASE MOOD AND IMPROVE RESILIENCE

- Being pregnant or being a mother with young children can disrupt your normal activities and thinking.
- Activities are linked to mood. When you feel down, it may be hard to find the energy to do healthy activities. But when you do activities, you are more likely to:
  - ▶ Feel happier and healthier
  - ▶ Have positive thoughts about yourself and your pregnancy
  - ▶ Have healthy contact with other people
  - ▶ Keep feeling good
- In general, more positive activities lead to more helpful thoughts and feelings. Keep in mind that you have some choice in the kinds of thoughts and activities in which you engage.
- When you do one activity, you often start a chain: one pleasant activity can lead to another positive activity, less negative thoughts, more positive feelings, and more contacts with other people.



*A Toolkit for Family Service Providers*

### OTHER IDEAS TO IMPROVE YOUR MOOD AND MANAGE YOUR STRESS

#### Contact with others improves mood

Being with other people is an important way to stay happy and healthy. Having people in your life that support and encourage you can help you manage stressful times.

- Everyone needs someone to turn to
- Everyone needs someone to have fun with
- Be sure that people in your life can help you and that you can help other people in your life
- Be sure that people in your life support you and make you feel good and that you support other people and make them feel good

#### Relaxation activities

Stress affects everyone to some extent. Stress can be overwhelming when a lot of stressful things happen at the same time. Relaxation activities can help you feel better and manage very stressful times. Try each of these at least once to determine which ones work best for you:



*B-5*

- Some people find that taking three or four deep breaths—inhalating through your nose and exhaling through your mouth—can help to ease the pace of stressful situations. Some people call this “dragon breathing” or compare it to blowing out the candles on a birthday cake.
- Some people prefer to close their eyes and imagine themselves in a special place. Recalling the sounds and smells that are associated with this place—for example, the waves breaking on the beach or the smell of the ocean breeze—can help to refocus your mind on more positive times.
- Some people like to focus on tensing and then relaxing different parts of their bodies as a way to relax. Starting with your feet, squeeze your toes together really tight and then relax them. Next, do the same thing with your calves, and then move all the way up your body.

Several websites discuss these different activities:

- **Relaxation Exercises** ([http://www.ecmhc.org/relaxation\\_exercises.html](http://www.ecmhc.org/relaxation_exercises.html)): These exercises are designed to help reduce stress of families and staff involved with the Early Head Start and Head Start programs. This series of exercises is available in English and Spanish.
- **Free Guided Meditations** (<http://marc.ucla.edu/body.cfm?id=22>): The Mindfulness Center at the University of California–Los Angeles offers an extensive series of relaxation activities that are available free, either by listening online or downloading from iTunes.



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<https://store.samhsa.gov/system/files/sma14-4878.pdf>

# OASH OFFICE ON WOMEN'S HEALTH



U.S. Department of Health & Human Services

En Español



What can we help you find?



Call the OWH HELPLINE: **1-800-994-9662** 9 a.m. — 6 p.m. ET, Monday — Friday



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## Mental Health

Good mental health

**Mental health conditions**

Alcohol use disorder, substance use disorder, and addiction

Anxiety disorders

Bipolar disorder (manic-depressive illness)

Body dysmorphic disorder

Borderline personality disorder

Depression

Eating disorders

Obsessive-compulsive disorder

[Postpartum depression](#)

## Postpartum depression

**Your body and mind go through many changes during and after pregnancy.** If you feel empty, emotionless, or sad all or most of the time for longer than 2 weeks during or after pregnancy, reach out for help. If you feel like you don't love or care for your baby, you might have postpartum depression. Treatment for depression, such as therapy or medicine, works and will help you and your baby be as healthy as possible in the future.



Expand all

What is postpartum depression?



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<https://www.womenshealth.gov/mental-health/mental-health-conditions/postpartum-depression>

***Thank you***

**Beth A. Collins Sharp, PhD, RN, FAAN**

**Director, Division of Program Innovation**

**Office on Women's Health**

**U.S. Department of Health and Human Services**

200 Independence Avenue, S.W., Room 712E, Washington, DC 20201

Website: [www.womenshealth.gov](http://www.womenshealth.gov) | [www.girlshealth.gov](http://www.girlshealth.gov)

OWH Helpline: 1-800-994-9662 | [womenshealth@hhs.gov](mailto:womenshealth@hhs.gov)

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2. CDC. Pregnancy-related deaths: data from 14 U.S. maternal mortality review committees, 2008–2017. Atlanta, GA: US Department of Health and Human Services, CDC; 2019. <https://www.cdc.gov/reproductive health/maternal-mortality/erase-mm/mmr-data-brief.html>
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