

# BABY BLUES VS POSTPARTUM DEPRESSION

Postpartum depression (PPD) can be differentiated from the baby blues by **timing, duration, and/or severity**.<sup>1-7</sup>

## UNDERSTANDING THE KEY DIFFERENCES

### ONSET AND DURATION

BABY BLUES	POSTPARTUM DEPRESSION
The baby blues generally peaks within the <i>first few days</i> postdelivery and resolves without treatment within <b>2 weeks</b> . <sup>3,7</sup>	Expert opinions vary as to the timing of the onset of PPD. For example, symptoms of PPD can begin: <ul style="list-style-type: none"> <li>• During pregnancy or following childbirth up to 4 weeks (DSM-5 definition)<sup>2</sup></li> <li>• During pregnancy or following childbirth up to 12 months (ACOG definition)<sup>8</sup></li> </ul> Without treatment, symptoms may persist for months or up to a year. <sup>9</sup>

### PREVALENCE

BABY BLUES	POSTPARTUM DEPRESSION
Estimated to affect up to <b>80% of women</b> after childbirth. <sup>3,10</sup>	In the US, estimates of new mothers identified with PPD each year vary by state from 8% to 20%, with an overall <b>average of 11.5%</b> . <sup>11</sup>

### SYMPTOMS

While symptoms of the baby blues can overlap with those of PPD, they typically<sup>3,10,11</sup>:

- |                              |   |
|------------------------------|---|
| 1. Are generally less severe | 3. Do not interfere with daily activities |
| 2. Are shorter in duration   | 4. Do not impair maternal function        |

BABY BLUES	POSTPARTUM DEPRESSION
Symptoms include <sup>3,12</sup> : <ul style="list-style-type: none"> <li>• Sadness</li> <li>• Frequent crying</li> <li>• Anxiety</li> <li>• Mood swings</li> <li>• Irritability</li> <li>• Insomnia</li> <li>• Anger</li> <li>• Fatigue</li> </ul>	Symptoms include <sup>7,13</sup> : <ul style="list-style-type: none"> <li>• Feeling sad, hopeless, empty, or overwhelmed</li> <li>• Crying more often than usual or for no apparent reason</li> <li>• Worrying or feeling overly anxious</li> <li>• Insomnia or hypersomnia</li> <li>• Physical aches and pains</li> <li>• Changes in appetite</li> <li>• Feeling moody, irritable, or restless</li> <li>• Experiencing anger or rage</li> <li>• Trouble concentrating</li> <li>• Losing interest in activities that are usually enjoyable</li> <li>• Withdrawing from friends and family</li> <li>• Trouble bonding with her baby</li> <li>• Persistently doubting her ability to care for her baby</li> <li>• Thoughts of harming herself or her baby</li> <li>• Anxiety in the form of intrusive or obsessive thoughts about the baby</li> </ul>

**ACOG RECOMMENDS THAT ALL PATIENTS SHOULD BE SCREENED FOR PPD USING A VALIDATED SCREENER.**<sup>8</sup>

VISIT [KNOWPPD.COM](https://www.knowppd.com) FOR MORE INFORMATION.

**References:** **1.** American College of Obstetricians and Gynecologists. (2013) Frequently Asked Questions: Postpartum Depression. FAQ091. 630. <https://www.acog.org/-/media/For-Patients/faq091.pdf?dmc=1&ts=20180524T2244520338>. Accessed May 24, 2018. **2.** American Psychiatric Association. *Diagnostic and Statistical Manual of Mental Disorders*. 5th ed. Arlington, VA: American Psychiatric Association Publishing; 2013. **3.** Earls MF; Committee on Psychosocial Aspects of Child and Family Health American Academy of Pediatrics. Incorporating recognition and management of perinatal and postpartum depression into pediatric practice. *Pediatrics*. 2010;126(5):1032-1039. **4.** Prevalence of Self-Reported Postpartum Depressive Symptoms—17 States, 2004-2005. Centers for Disease Control and Prevention website. <https://www.cdc.gov/mmwr/preview/mmwrhtml/mm5714a1.htm>. Accessed November 2, 2017. **5.** Robertson E, Celasun N, Stewart DE. Risk factors for postpartum depression. In: Stewart DE, Robertson E, Dennis CL, Grace SL, Wallington T. *Postpartum Depression: Literature Review of Risk Factors and Interventions*. Toronto, Canada: University Health Network Women's Health Program; 2003. **6.** Depression Among Women. Centers for Disease Control and Prevention website. <https://www.cdc.gov/reproductivehealth/depression/index.htm>. Accessed May 3, 2018. **7.** Postpartum Depression Facts. National Institute of Mental Health website. <https://www.nimh.nih.gov/health/publications/postpartum-depression-facts/index.shtml>. Accessed July 12, 2018. **8.** American College of Obstetricians and Gynecologists. Committee opinion: screening for perinatal depression. *Obstet Gynecol*. 2018;75:7. **9.** Vliegen N, Casalin S, Luyten P. The course of postpartum depression: a review of longitudinal studies. *Harv Rev Psychiatry*. 2014;22(1):1-22. **10.** Moses-Kolko EL, Roth EK. Antepartum and postpartum depression: healthy mom, healthy baby. *J Am Med Womens Assoc*. 2004;59(3):181-191. **11.** Ko JY, Rockhill KM, Tong VT, Morrow B, Farr SL. Trends in postpartum depressive symptoms—27 states, 2004, 2008, and 2012. *MMWR Morb Mortal Wkly Rep*. 2017;66(6):153-158. **12.** As reviewed in Thurgood S, Avery DM, Williamson L. Postpartum depression (PPD). *Am J Clin Med*. 2009;6(2):17-22. **13.** Abramowitz JS, Meltzer-Brody S, Leserman J, et al. Obsessional thoughts and compulsive behaviors in a sample of women with postpartum mood symptoms. *Arch Womens Ment Health*. 2010;13(6):523-530.