

Postpartum depression: what lies beyond baby blues?

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ABSTRACT: The present study has tried to highlight the role of environmental factors in postpartum depression in women. It has been seen that not only environmental but also social support, family, cultural influences etc., play a vital role in the overall adjustment of women after giving birth. The method used was a Edinburgh Postnatal Depression Scale1 (EPDS) in which a total of 60 samples were taken into consideration. These 60 sample were equally divided into working mothers (N=30) and non- working mothers (N=30) and their results have indicated into a lot of basics of role of environmental factio which impact a mother's psychological states as well as physical states during pregnancy and their stigma and anxiety neuroses mixed with their hormonal imbalances can easily be dealt with proper environmental care and support.

Keywords: Postpartum depression, Post-pregnancy, psychosocial risks, Hormonal imbalances, Mental Health.

I. INTRODUCTION

Postpartum depression is a serious mood disorder that affects women after childbirth, postpartum depression (PPD) creates feelings of sadness, anxiety, depression and exhaustion that can greatly inhibit their ability to care for their new-born child. Postpartum baby blues is a very common experience for new mothers. The symptoms of this condition usually occur in the first few days following childbirth and are milder than postpartum depression. Baby blues typically last a few days to a week or two after childbirth.

Postpartum depression can begin anytime within the first year after childbirth. The cause is not specific but mainly hormonal and physical changes after birth and the stress of caring for a new baby may play a role. Hormonal changes that

peak in the third trimester of pregnancy and then dramatically drop after birth. Having a new born brings lifestyle changes that can be physically and emotionally taxing- sleep deprivation, new responsibilities, stress and anxiety. Symptoms such as depressed mood or severe mood swings, fatigue, difficulty in bonding with the baby, irregular eating patterns and excessive crying could be due to building of postpartum depression.

Genetic and environmental factors can make a women more vulnerable to developing PPD, such factors may include:

- Previous experience with postpartum depression
- Depression before/during pregnancy.
- Being pregnant at young age.
- Complication during and after giving birth.

Psychosocial risks of PPD could be:

- Periods of hallucinations and delusions
- Lack of perceived social support from family
- Exposure to violence before/ during pregnancy
- Extreme feeling of agitation and anxiety

II. METHODS AND MATERIALS:

Sampling may be a powerful tool in conducting research work. During this research study of postpartum depression and it's psychosocial risks the participant were selected from Jaipur. Which is Further divided into two equal numbers, i.e., n = 30 working women and n = 30 non-working women. A complete sample of 60 women was selected through purposive sampling. For postpartum depression was done with questionnaires given to our post-delivery women after informed consent. We used a 10-point questionnaire called "Edinburgh Postpartum Depression Scale" (EPDS), as it was easy to use

and validate. We analyzed the data to identify risk factors and find which category among working and non-working women who are more prone to be a victim of postpartum depression. This study is based on data collected over a 3-month period in a

nursing home care hospitals in Jaipur which caters to low- to mid-income groups of patients. Because of using convenience sampling, the results of this study should be generalized with caution.

Result and Discussion:

Variable	group	N	Mean	SD	t-Ratio	df	Sig
Well-being	Non-Working mothers	30	20.8	5.5980	2.738	58	.01
	Working mothers	30	22.9	4.7222	5.809	58	.01

The following findings emphasize on the fact that working women have shown more mean indicating that self-independency is an important factor in order for working mother to feel comfortable enough to not only take proper leave when required and bounce back to work but also to decrease the stereotypes and taglines associated with motherhood. We found the prevalence of post-delivery depression identified by EPDS questionnaires to be 2.07% in non-working mothers and in working mothers to be 4.89%, which is 2.82% higher as compared to working and non-working. Postpartum period is a critical period in women's life during which she undergoes wide range of emotional changes. Postpartum depression if left undiagnosed and untreated can have serious consequences on mother and the infant. As shown by many studies, the mother-infant bonding as well as the infant development is ruined by the postpartum depression.

This study is an attempt to look into the trends of risk factor which can have impact on the postpartum depression in an urban Indian population. The prevalence of postpartum depression in our study was 4.89%. Women who were diagnosed were advised to see a psychiatrist or were advised to seek a mental health. Lifestyle changes as women enter motherhood and are additionally influenced significantly by psychosocial factors.

III. CONCLUSION:

Every research has its own importance but whenever research is conducted on topics which although must be known by all yet due to stigma are rarely talked about, the emphasis of the above research and similar increases. Our study highlighted the risk factors for postpartum depression which can have impact on emotional well-being and subsequent quality of life of mothers. The prevalence of early postpartum depression in our study is 4.8%. Presence of

psychiatrist in the hospital would be beneficial. We have concurrence of our study results with other studies in factors like family support, new high-risk factor, eventful intranasal history, and personal experience of labor. The study shows that using screening scales like EPDS should be feasible and should be the norm for all patients to provide care for the complete physical and mental well-being of mother and child.

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