

Antenatal and Postnatal Mental Health

Importance of antenatal and postnatal mental health

Emotional problems during the antenatal or postnatal period would affect mothers' mental state, daily functioning, work performance, marital relationship and baby's development.

During pregnancy, mothers suffering from depression could have a higher risk of miscarriage and premature delivery. Research findings suggested that when mothers had depressive or anxiety symptoms during their pregnancy, they would have a much higher risk of having postnatal depression. Their infants tend to show more emotional and behavioral problems too.



After delivery, because of the hormonal changes, role change, challenges in baby care and family problems, mothers could have a higher risk of suffering from mood disorders. Postnatal depression could affect mothers' ability in taking care of their baby and have impact on infants' physical health, cognitive development as well as emotional and behavioural development. The partners of mothers with postnatal depression may also have a higher risk of emotional disturbance. Thus, it is very important to take care of the mental health of women during the antenatal and postnatal periods.



Emotional disturbances can happen in antenatal period

Getting pregnant brings a lot of excitement to the family. However, pregnant women experience a lot of physical changes and discomfort. Their lifestyle may have to be adjusted. Some pregnant women may have a lot of worries about the foetal development, the pain during childbirth or the childcare arrangement



after delivery, all of which may affect the mood of the mothers. Therefore, different emotions during pregnancy, which include anxiety, helplessness and irritability, etc. could not be overlooked.

Research findings suggested that some factors were related to antenatal anxiety and depression, such as self-esteem of the mother, her marital relationship, in-law relationship and social support.

Major risk factors of postnatal depression

The exact causes of postnatal depression are unknown. Research findings indicated that the factors listed in the table below correlated with an increasing risk of postnatal depression:

Clinical Factors	Psychosocial Factors	Obstetric- and baby-related factors
<ul style="list-style-type: none"> • Previous psychiatric conditions which include depressive and anxiety disorders • Antenatal depression or anxiety 	<ul style="list-style-type: none"> • Anxiety-prone personality • Lack of social support • Poor marital / in-law relationship • Domestic violence • Financial difficulties • Stressful life events 	<ul style="list-style-type: none"> • Previous miscarriage / difficulties in conception • Unplanned pregnancy • Antenatal and postnatal complications • Emergency caesarean section • Baby born with congenital diseases/ premature birth

Postnatal mood problems

There are three main categories of postnatal mood problems: (1) postnatal blues, (2) postnatal depression and (3) postnatal psychosis, each of which differs in its prevalence, clinical presentation, level of severity and management.

(1) Postnatal Blues

- It affects about 40% - 80% of postnatal women
- It is a transient state characterized by mood swings, tearfulness, troubled sleeping and irritability etc. The symptoms usually occur around day 3 to day 5 after childbirth
- The symptoms are relatively mild and often can be settled spontaneously within days

(2) Postnatal Depression

- It affects about 13% - 19% of postnatal women
- Symptoms are similar to a depressive disorder. The onset is usually within 6 weeks but can also occur anytime within first year after childbirth
- Most of the mothers with postnatal depression will recover if they are identified early with appropriate treatment and support from the family

(3) Postnatal Psychosis

- It affects about 0.1% - 0.5% of postnatal women
- Prominent features include hearing non-existing voices, bizarre thoughts of being harmed by others and ideas of harming self or baby. Symptoms usually occur within 14 days after childbirth
- This is a psychiatric emergency. Urgent referral to a psychiatrist or attending Accident and Emergency Department of hospital is necessary

Early identification of postnatal depression

Major symptoms of postnatal depression include:

- Persistent low mood, such as feeling depressed and sad, crying without reason or in deep sorrow
- Loss of interest in almost all activities (even lose interest in her child)
- Disturbance in appetite
- Sleep problems like difficulty to fall asleep or early awakening
- Fatigue or loss of energy for most of the time
- Difficult to concentrate or make decision
- Feeling guilty, worthless and hopeless
- Excessive worries and irritability



Should the above symptoms persist for 2 weeks or more and significantly affect the woman's daily functioning, seek professional help as soon as possible.



Tips on prevention

- Adequate preparation and arrangements before pregnancy, including financial and psychological aspects etc.
- Minimize major life changes, such as job changing or moving to a new home; if they are inevitable, prioritize accordingly.
- Accept limitations in physical condition or ability, and avoid worn out.
- Have realistic expectations for parenthood to help adjustment to life after delivery.
- Learn more about pregnancy, childbirth and childcare through various means, e.g. joining childcare and parenting workshops and participating in relevant talks arranged by organizations in the communities.
- Cultivate effective communication with the partner and other family members to improve understanding and support. Continue to show your love, respect and support despite disagreement; be open during negotiation to come up with mutually acceptable solution.
- Have more experience sharing with other parents and acquire more social support.
- Get enough rest and sleep, e.g. arranging appropriate person to help with household and childcare after childbirth.
- Spare some time for leisure and relaxing activities, e.g. going for a walk, doing relaxation exercise or calling friends, based on your preference.
- Maintain a healthy diet. Do not smoke and avoid beverages containing alcohol.
- Appreciate yourself, particularly your effort paid.

(You may refer to leaflet "How Postpartum Mothers Cope with Stress?" on P.159 for more information)



Ways to seek help

- ✓ Consult a family doctor or an obstetrician for preliminary assessment and management, and if necessary, referral to specialist services.
- ✓ See a psychiatrist or clinical psychologist in private sectors for professional assessment and treatment.
- ✓ See a social worker or counselor for assessment and referral.
- ✓ Should mothers suffer from postnatal mood problems, they could contact the Maternal and Child Health Centre in their residential area to make appointment with nurses for initial assessment and referral to suitable services.

Counseling services / hotlines

24 hour Hospital Authority Psychiatric Hotline	2466 7350
Social Welfare Department 24-Hour Hotline	2343 2255
Suicide Prevention Services	2382 0000
The Samaritan Befrienders Hong Kong	2389 2222

Others

Department of Health:	
Family Health Service 24-Hour Information Hotline	2112 9900
Family Health Service Breastfeeding Hotline	3618 7450
Health Education Infoline	2833 0111
Family Health Service Website	www.fhs.gov.hk
Primary Care Directory	www.pcdirectory.gov.hk
(You can find a family doctor that suits your needs using the Directory)	