



# Understanding perinatal depression and anxiety



[beyondblue.org.au](https://beyondblue.org.au)



1300 22 4636

Depression and anxiety can happen at any time – many women can experience these conditions during pregnancy and the year following the birth of a baby (the perinatal period).

Pregnancy and adjusting to a new baby is rewarding, but also brings changes and challenges. While some days will be better than others, for some women who experience mental health conditions each day is a struggle.

Just like physical health problems experienced during pregnancy, birth or early parenthood (e.g. high blood pressure), mental health conditions can happen to anyone. It's important to recognise the signs and seek support early.

While depression and anxiety are the most common types of mental health conditions in the perinatal period, there are other serious mental health conditions that can also occur at this time (see 'Other mental health conditions').

## Depression

**“I felt nothing ... just numb, emotionally dead/flat.”**

Perinatal depression affects one in 10 women during pregnancy, and one in six women in the first year after the birth.

Unlike the 'baby blues', which is temporary, depression generally does not go away on its own. Women with depression describe feeling sad, down, numb and empty, with no interest in their baby, other people or things they used to enjoy.



## Anxiety

**“I’m just so worried about everything.”**

**“I can’t stop feeling that something will go wrong with this pregnancy.”**

While we all experience some anxiety from time to time, for some people, these feelings keep going and can have an impact on their ability to function from day to day. Anxiety conditions are likely to be at least as common as depression during pregnancy and the year following. Many women experience both anxiety and depression at the same time.

Symptoms of anxiety include feelings of worry, panic or fear that are difficult to stop or control.

## Getting support

Talking to your general practitioner (GP) or an other health professional is a good first step in getting support. By discussing your experiences with you and assessing your answers to the questions in the Edinburgh Postnatal Depression Scale (EPDS) (see the panel to the right), a health professional can help you work out if you may be experiencing depression or anxiety and whether you could benefit from some additional advice or support.

Depending on your symptoms, you may be referred to a specialist (e.g. psychologist, psychiatrist).

## When is urgent assistance needed?

If you or someone you care about is in crisis, contact your GP or local health care provider.

Thoughts of suicide, harming yourself or your baby can accompany mental health conditions.

**If you think your partner or baby would be better off without you, or you are having thoughts of suicide or thoughts of harming your baby, seek emergency assistance by calling triple zero (000) or go to your local hospital emergency department.**

**You can also phone the Beyond Blue Support Service and speak with a trained mental health professional by calling 1300 22 4636.**

## Treating perinatal depression and anxiety

**“I knew I needed help, it was just a matter of finding the right combination of help for me.”**

Effective treatments are available. The type of treatment varies according to the individual and the severity of the condition. Often a combination of treatments is used for depression and/or anxiety.

- **Psychological therapy**, often referred to as ‘talking therapy’, can be effective in changing negative thoughts and feelings, stopping symptoms from getting serious and helping recovery. Learning about your symptoms can also be helpful.
- **Medication** can play an important role in reducing the impact of depression or anxiety on the mother, baby and other family members. Research has shown that certain medications are effective and can be used under the supervision of your doctor. During pregnancy and breastfeeding, your doctor will be able to advise you of any risks associated with particular medications and will consider the wellbeing of both you and your baby.

**Medicare rebates are available for a range of mental health services. For more information, visit the ‘Getting support’ section of the Beyond Blue website: [beyondblue.org.au](https://beyondblue.org.au)**

## Other mental health conditions

There are other less common mental health conditions that can occur during pregnancy or in the year following birth, and can be serious. These conditions include bipolar disorder, postpartum (puerperal) psychosis and schizophrenia. Further information can be found at the Centre of Perinatal Excellence (COPE): [cope.org.au](https://cope.org.au)

## Tips for looking after yourself

**“Talking with others who really do understand has helped me not to worry about the birth and being a mother.”**

- Develop a support network of friends, family and/or health professionals and organise extra support in the first few weeks after the birth.
- Involve your partner and family in day-to-day care of your baby and household chores.
- Organise your routine so you get some time for yourself — use the time to relax or do something you enjoy.
- Talk to someone you trust about your feelings – sharing your concerns can be really helpful.

## Tips for fathers/partners

**“My husband was fantastic ... he spent as much time as he could at home helping with the children.”**

- Become involved in day-to-day tasks related to caring for your new baby and the household.
- Accept offers of support from friends or family members or organise someone to help with meals, housework and childcare.
- Plan some time as a couple and try to do something you both enjoy.
- Be aware of your own health and wellbeing. Make sure you exercise, relax and set aside time for yourself.

## Tips for family and friends

**“My mother stayed over as much as possible and a neighbour and other friends cooked meals.”**

- Spend time listening, without needing to offer solutions and advice unless it's requested.
- Offer to look after the baby or older children, help with cooking and cleaning or whatever else is needed.
- Encourage the mother and/or father/partner to seek professional support if necessary.

## Edinburgh Postnatal Depression Scale (EPDS)<sup>^</sup>

The EPDS is a set of questions that can tell you whether you have symptoms that are common in perinatal women with depression and anxiety. It's strongly recommended that you complete this set of questions with a health professional.

**This is not intended to provide a diagnosis** – only trained health professionals should do this.

You will be asked to complete the set of questions below and circle the number next to the response that comes closest to how you have felt in the **past seven days**.

If your total score adds up to 13 points or more your health professional is likely to assess you further for depression/anxiety. \*Scores between 10 and 12 will be monitored and a repeat screen is recommended.

You can also complete the EPDS online at the Beyond Blue Healthy Families website: [healthyfamilies.org.au](http://healthyfamilies.org.au)

### 1. I have been able to laugh and see the funny side of things

As much as I always could	0
Not quite so much now	1
Definitely not so much now	2
Not at all	3

### 2. I have looked forward with enjoyment to things

As much as I ever did	0
Rather less than I used to	1
Definitely less than I used to	2
Hardly at all	3

### 3. I have blamed myself unnecessarily when things went wrong

Yes, most of the time	3
Yes, some of the time	2
Not very often	1
No, never	0

### 4. I have been anxious or worried for no good reason

No, not at all	0
Hardly ever	1
Yes, sometimes	2
Yes, very often	3

### 5. I have felt scared or panicky for no very good reason

Yes, quite a lot	3
Yes, sometimes	2
No, not much	1
No, not at all	0

### 6. Things have been getting on top of me

Yes, most of the time I haven't been able to cope at all	3
Yes, sometimes I haven't been coping as well as usual	2
No, most of the time I have coped quite well	1
No, I have been coping as well as ever	0

<b>7. I have been so unhappy that I have had difficulty sleeping</b>	
Yes, most of the time	3
Yes, sometimes	2
Not very often	1
No, not at all	0
<b>8. I have felt sad or miserable</b>	
Yes, most of the time	3
Yes, quite often	2
Not very often	1
No, not at all	0
<b>9. I have been so unhappy that I have been crying</b>	
Yes, most of the time	3
Yes, quite often	2
Only occasionally	1
No, never	0
<b>10. The thought of harming myself has occurred to me**</b>	
Yes, quite often	3
Sometimes	2
Hardly ever	1
Never	0

\*More information on what different scores mean can be found at [healthyfamilies.org.au](http://healthyfamilies.org.au)

**\*\*Thoughts of suicide or harming yourself can accompany depression and anxiety and question 10 asks you about this. If you are feeling this way or have thoughts of harming your baby, it is important to consult your doctor or support service.**

^ © 1987 The Royal College of Psychiatrists. The Edinburgh Postnatal Depression Scale (British Journal of Psychiatry, 150, 782-786) is reproduced with permission. Developed as the Edinburgh Postnatal Depression Scale and validated for use in both pregnancy and the postnatal period to assess for possible depression and anxiety.

## Information resources for new and expecting parents

**Booklet** – Emotional health and wellbeing:  
A guide for pregnant women, new mums and other carers

**Booklet** – Emotional health and wellbeing:  
A guide for new dads, partners and other carers

To download copies of available information resources please visit [beyondblue.org.au/resources](http://beyondblue.org.au/resources)

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## Where to find more information

### Beyond Blue

 [beyondblue.org.au](https://beyondblue.org.au)

Learn more about anxiety, depression and suicide prevention, or talk through your concerns with our Support Service.

 **1300 22 4636**

Email or chat to us online at

 [beyondblue.org.au/getsupport](https://beyondblue.org.au/getsupport)

### Beyond Blue Healthy Families

[healthyfamilies.org.au](https://healthyfamilies.org.au)

### Head to Health

[headtohealth.gov.au](https://headtohealth.gov.au)

### Lifeline

13 11 14

[lifeline.org.au](https://lifeline.org.au)

### Suicide Call Back Service (24/7)

1300 659 467

[suicidecallbackservice.org.au](https://suicidecallbackservice.org.au)

### Perinatal Anxiety & Depression Australia (PANDA)

1300 726 306 (Mon to Fri, 9am - 7.30pm AEST)

[panda.org.au](https://panda.org.au)

### Pregnancy, Birth and Baby

1800 882 436

[pregnancybirthbaby.org.au](https://pregnancybirthbaby.org.au)

### Centre of Perinatal Excellence (COPE)

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