

Postnatal Depression



Having a baby is usually a happy time for mothers and families. Unfortunately this is not the case for all women. One in ten women suffer from a form of mental illness after childbirth called postnatal depression. It is a type of depression occurring after having a baby. It can develop within the first six weeks of giving birth, but is often not apparent until around six months. Women from all ethnic groups can be affected. Teenage mothers are particularly at risk.

Symptoms such as mood changes, irritability and episodes of tearfulness are common after giving birth. These are often known as the "baby blues" and they usually clear up within a few weeks. However, if the symptoms are more persistent and severe it could indicate postnatal depression. Women may report low mood, loss of interest, lack of motivation and energy as well as disturbed sleep and appetite. In severe cases, suicidal ideas or thoughts of harming their babies.

There is no known cause for postnatal depression, however, some researchers have suggested a number of possibilities such as changes in the body, including hormonal changes. Others think the cause is linked to past experiences personality traits and social circumstances. Many suggest that a combination of different issues cause postnatal depression.

Some situations are considered to put women at particular risk such as previous mental

health problems, lack of support, experience of abuse, low self-esteem, poverty and major life events.

Following simple self-help measures can be useful in reducing the risk of postnatal depression. These include taking regular rest and learning relaxation techniques, light physical exercise, balanced diet and surrounding oneself with supportive positive relationships.

As postnatal depression is not uncommon, it is recommended that all health care professionals should conduct postpartum depression screening. This can be done using screening tools such as Edinburgh Postnatal Depression Scale (EPDS), Postpartum Depression Screening Scale (PDSS) and Patient Health Questionnaire (PHQ-9)

Treatment for postnatal depression includes talking therapies, such as counseling and psychotherapies (Cognitive Behavioral Therapy) as well as antidepressant medications. In severe cases, admission to hospital maybe necessary. It is important for each woman to understand the potential benefits and side effects of the treatment fully and for doctors to keep monitoring the woman's progress and her response to treatment.

Author:

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WELCOME Aboard!



Mrs. Eman Alsinay Speech and Language Pathologists/ Therapist

Mrs. Eman Alsinay comes to the ACPN from the Rehabilitation

Division of the Al Noor Hospital in Abu Dhabi where she worked as a Senior Speech and Language Pathologist for four years. She completed her BA studies in Speech and Hearing Therapy at the King Saud University, Riyadh, Saudi Arabia in 1988. Mrs. Alsinay's working experience in the medical rehabilitation hospitals spans a period of more than 24 years. Mrs. Alsinay joined American Center for Psychiatry and Neurology and now seeing patients in Abu Dhabi Branch.

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Ms. Emma Humphrey Occupational Therapist

Ms. Humphrey has been a registered Occupational Therapist for nine years. She obtained Bachelor of Science in Occupational Therapy from the University of Northumberland, UK, in 2006, and Bachelor of Arts in Business Studies from the University of Leicester, UK, in 1996. She is a professional member of the British Association of Occupational Therapists and a member of the UK Health Care Professions Council. Ms. Humphrey has worked with children who suffered from a variety of physical and mental health disabilities focusing on children with sensory, developmental and coordination difficulties. Ms. Emma joined American Center for Special Abilities and now seeing patients in Abu Dhabi Branch.

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