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100% Effective Natural Hormone Treatment
Menopause, Andropause And Other Hormone Imbalances
Impair Healthy Healing In People Over The Age Of 30!

Postpartum Depression

By Rexanne Mancini

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The case against Andrea Yates, accused of drowning her five young children, is disturbing and horrible. Despite what you may think of Andrea Yates or the tragic circumstances surrounding the death of her children, her postpartum depression (PPD) defense will either serve to enlighten more people to the devastating affects of PPD or throw the study of this very real mental illness into the dark ages. While many doctors and psychologists have made great strides in understanding PPD and helping its victims, these same doctors and mental health professionals worry that bad publicity and ridicule could destroy PPD's credibility and their efforts at gaining more funding and study of this disease.

For some women, PPD can be a nightmare. While her family and friends expect her to be joyous and elated over the birth of her child, a woman can be sinking into the darkest corners of despair, unable to cope with an infant, the biological changes surging through her body and the severe depression overwhelming her brain. As joyously anticipated as the birth of her baby was, a postpartum woman can become riddled with severe anxiety over her ability to care for her newborn, her self-esteem can plummet and her brain's chemical changes can produce intolerable levels of panic. This is no one's "fault." It is a condition that can strike even the ordinarily soundest individual.

PPD is classified as a mental illness. Only a non-professional would categorize it as a character flaw or weakness. PPD is real, at times to the point of severe psychosis and should be treated as soon as the new mother begins to feel any mental or emotional changes that could affect her ability to care for her newborn. Even though some women will refuse to believe PPD is happening to them, her family, friends and especially her husband must be alert to the possibility of this condition. While you, I and most women we know might have breezed through the first year after the birth of our children with only occasional surges of panic or moments of near collapse, a significant percentage of women suffer more serious PPD. Only one percent succumb to actual psychosis leading to the tragic harm or death of babies and sometimes themselves The greatest threat is denial of their symptoms.

Early identification and treatment of PPD are the keys to successful therapy. If you or a new mother you know is suffering from even the slightest feelings of depression, anxiety or inadequacy, seek

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immediate help. The birth doctor will be able to identify the severity of symptoms and prescribe appropriate treatment.

Rexanne Mancini is the mother of two daughters. She maintains an extensive yet informal parenting and family web site, Rexanne.com - <http://www.rexanne.com> – Visit her site for good advice, award–winning Internet holiday pages and some humor to help you cope. Subscribe to her free newsletter, Rexanne's Web Review, for a monthly dose of Rexanne: <http://www.rexanne.com/rwr–archives.html>

Postpartum Depression: What Women Aren't Telling Their Doctors

By Robyn B. Surdel

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What New Mothers May NOT be telling Their Doctors

By: Robyn B. Surdel
Robyn's Nest ~ The Parenting Network

Postpartum mood disorders come in many shapes and sizes. Approximately 80% of all women in the United States will experience some form of mood disorder after the birth of their child. The emotional and physical discomfort they feel can be triggered by hormonal changes, lack of sleep, stress, socioeconomic factors and other changes. What is concerning, however, is that only 20% of women actually report their feelings to a qualified health professional, such as their physician, midwife, or pediatrician. Perhaps women are concerned about the stigma associated with mental health issues, or they fear that in reporting their mood swings and emotional pain they may jeopardize custody of their new baby. Whatever the reason, it's time to change the way we look at perinatal (after birth) mood disorders.

The majority of women experience what is referred to as "the new baby blues". This milder form of postpartum depression may be characterized by insomnia, fatigue, anxiety, tearfulness or sadness and may last anywhere from several hours to a week. The more serious forms of perinatal mood disorders include Postpartum Depression and the extremely severe Postpartum Psychosis.

Approximately 10–15% of new mothers will experience Postpartum Depression. Family members, partners and health professionals should watch for symptoms that could include sleeping and eating disturbances, anxiety and insecurity, mood swings, confusion, loss of self, guilt or shame, and thoughts of harming herself.

Dr. Cheryl Beck and Dr. Robert Gable at the University of Connecticut have developed a new screening tool to assist health care professionals with identifying new mothers who may be at risk or suffering from postpartum depression. Dr. Beck suggests that doctors, midwives, and nursing staff should continuously evaluate new mothers throughout the first year after giving birth as the more severe of these conditions may not surface until well after the 6–week obstetric check up.

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While only 1% of new mothers may experience the more obvious symptoms of Postpartum Psychosis (hallucinations, delusions, an inability to sleep, poor appetite, and bizarre/irrational behavior) these are the women who are at risk of hurting themselves or their new baby. Early detection of perinatal mood disorders is imperative to prevent another senseless loss of life, however our perception of mental illness and its associated diseases must change. Women need to feel confident that their healthcare professionals will take appropriate steps to get them the help they need without fear of shame or consequence.

If you are concerned that someone you love is experiencing any of the above symptoms, please request help in your area by going on the web to www.postpartum.net. Professionals are standing by to

answer your questions.

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After having children, Robyn found that there was a need for reliable and current information on all children's issues. Not finding the medical, behavior or psychological information available to parents or grandparents, she wondered what to do. Of course, being skilled on the computer, informed about children's issues and with a desire to help others, she started her web site and put aired information on TV.



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