

## The Thief that Steals the Joy of Motherhood

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### INTRODUCTION

It was a lazy forenoon of 29th January 2021 as the strong rays of the sun poured into my room from the east facing window that was kept ajar, I sat on my easy chair, happily sipping on my “Chai” with the daily newspaper tightly clenched in my left hand. Through the thick frame of my spectacles, my eyes were continuously trying to look for an interesting article to read. As they say, “expect the unexpected”, I came across an article that shook me in utter disbelief. A young mother who gave birth to a baby hardly few months ago, committed suicide. As per the news agency the lady was suffering from “post pregnancy depression Post-partum depression”. Instantly the psychologist within me kicked in and pointed out that prolonged and sustained form of depression often leads to the generation of suicidal tendencies in an individual.

Depression is a serious mental illness which has many different shades and Post-partum depression is one of them.

A woman experiences the bliss of motherhood upon giving birth to a baby, her own blood and flesh, finally gets physically separated from her body. However, in rare cases a negative feeling swallows this happiness and pushes the mother into a dungeon of darkness filled with depression. Precisely, for this reason, post-partum depression is aptly termed as “the thief that steals the joy of motherhood”. After the birth of the baby the mother experiences something commonly termed as “baby blues”. From the physiological perspective, it is a phase after the delivery of the baby in which the mother’s body undergoes hormonal readjustment. This phase often lasts for a couple of weeks and is marked with mood swings in the mother and it subsides without the need of any medical intervention. Nonetheless, in a few unfortunate cases, the problem lingers and manifests in to a bigger form of depression. There are basically three types of post-partum depression, namely: Baby blues (post-partum blues), Post-partum depression, and Post-partum Psychosis.

Statistics indicate that out of every ten new mothers, post-partum blues turns into the ugly post-partum depression for one of them. The most apparent symptoms include irritation, anxiety, feeling of guilt, inability to care for baby or herself. Psychotherapy and usage of anti-depressants often prove to be handy in this scenario. However, if left untreated, it may lead to disastrous end of life by suicide in worst cases.

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If we go by the popular saying “the good, the bad, and the ugly” then Post-partum psychosis is the worst nightmare of any family with a new-mother suffering from the same. This issue calls for immediate medical attention and the medical science hasn’t been successful in pin pointing at the root cause.

Neurophysiology (precisely Neuroendocrinology), attempts to offer an explanation for the underlying current of emotional roller coaster ride that a new mother goes through when she experiences baby blue depression. While a woman isn’t pregnant, her ovaries synthesize oestrogen and progesterone, the former boosts her chances of getting pregnant and the latter regulates menstrual cycle & promotes pregnancy. However during the phase of pregnancy, placenta (an organ that comes into being in the uterus during pregnancy) secretes the two hormones mentioned earlier (oestrogen & progesterone). The placenta not only provides the much needed oxygen & nutrients to the developing fetus but also removes the waste products from it. Progesterone provides a supportive environment for the proper growth of the fetus and oestrogen promotes formation of new blood vessels in the uterus and placenta to allow easy access of nutrients to the fetus. After the delivery of the baby, there is a sharp drop in the level of progesterone in particular and this doesn’t shoot up till the woman starts to ovulate again post delivery. This, in turn, leads to increase in the level of oestrogen, leading to oestrogen dominance.<sup>1,2</sup>

Oestrogen dominance is the culprit responsible for following two conditions: Hypothyroidism and Adrenal fatigue. Postpartum Thyroiditis, where in the thyroid gland fails to synthesize thyroid hormones in the appropriate amounts, failing which leads to low metabolism rate, loss of weight, and extreme fatigue. In case of adrenal fatigue,

the drop in the level of progesterone brings about low synthesis of adrenal hormones. This causes feeling of nausea, weight loss, muscle weakness, and depression.<sup>3,4</sup>

Post-partum depression (PPD) is caused by a range of factors from physiological to emotional changes a new mother experiences. On the other hand, Post-partum psychosis (PPP), involves symptoms like hallucination and state of delusion. This puts the lives of the mother and the baby at risk. PPP occurs rarely effecting 1 out of per 1000 new mothers and the onset of the condition is often abrupt. Apart from classical symptoms of psychosis, the patient can develop signs of paranoia, mood swings and confusion. Some of the investigations indicate that cases with a family history of bipolar disorder or schizo-effective disorder make the new mother more susceptible to the PPP. In rare cases, the new mother becomes suicidal and often ends her life and in extreme tragic cases, the mother attempts infanticide. Like PPD, PPP is also treatable but requires a swift medical attention right after the childbirth and prolonged care is also a needed.

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