

# MENTAL HEALTH IN PREGNANCY & POSTPARTUM DURING COVID-19



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## TIPS FOR DEALING WITH STRESS

It's completely normal to feel fear and anxiety right now, but that doesn't make it pleasant. We are facing a huge amount of uncertainty, and uncertainty is breeding ground for stress. Remember that this is not a time to be critical of yourself or to place high expectations on yourself. Be gentle. Try to create structure and stability for yourself: go to bed and wake up at the same time everyday. Eat regular meals. Spend (virtual) time with loved ones.

### FOCUS ON AGENCY

Making decisions helps us feel competent. Find small areas in your life where you do have control: cleaning your space or preparing a meal. When you complete small tasks like these, it helps you feel grounded and confident. It then becomes easier to tackle more difficult decisions.

## STRATEGIES FOR COPING WITH UNCERTAINTY

### 1. Focus on small decisions.

Agency and competence helps us feel in control. Take action in small ways that make you feel like you're moving forward.

### 2. Get back into your body.

Listen to music, lay on your favorite blanket, cuddle with your pet. Anything that stimulates your senses will help you feel less anxious.

### 3. Name your feelings and journal

When we get overwhelmed it's usually because we are feeling a combination of many different emotions, simultaneously. Naming your feelings takes power away from ambiguous or amorphous worry. Journaling is an effective way to do this.

### 4. Designate worry-time

If you find yourself facing ruminative, intrusive anxiety that doesn't go away, try designating "worry time." Set aside 20 minutes per day where you are allowed to worry about anything and everything. Wherever your brain wants to wander is fine! But, if any worries come up outside of that time, you aren't allowed to indulge them. You can write them down, and set them aside for your daily "worry time."

## COPING WITH THE GRIEF OF YOUR BIRTH PLAN

- **Recognize it's okay to experience this as a loss - you may go through the stages of denial, anger, bargaining, sadness and then, eventually, reach acceptance. It's important to honor those feelings of grief and give them space.**
- **Grief is not a linear process. With each loss, whether it's finding out your partner cannot come to prenatal appointments, or that they can't be there during delivery, you're going to feel grief.**
- **Prepare yourself for waves of emotions. Over the course of one day you may feel sadness, frustration, rage, and fear. Be gentle with yourself around this. If possible, do not take on any new roles or add new stressors (i.e. moves, career changes) during this time.**
- **When big feelings hit, activate your coping skills. This could be practices like exercise, meditation, yoga, or journaling. It could also be distraction through TV or reading.**
- **Stay connected with trusted support people, or, if applicable, a faith community.**

## INFORM YOURSELF ABOUT HOSPITAL POLICIES FOR BIRTH

- Am I allowed to have a support person with me?
- What are the policies about virtual support if in person support is not allowed? Do I need to use a hospital device or bring my own?
- If I'm not allowed to have a support person, what steps are the staff taking to provide extra support?
- What precautions are in place to prevent myself and my baby from COVID-19? Will I be asked to wear a mask during labor?
- What will happen if I test positive for COVID-19?
- What will happen if my baby tests positive for COVID-19?
- How long can I expect to stay in the hospital after delivery? \*

\*Adapted from March of Dimes Birth Plan

### BE MINDFUL OF YOUR INFORMATION

Get your information from reputable sources like the Centers for Disease Control or The American College of Obstetricians and Gynecologists

In normal times, pregnancy and postpartum are an emotionally vulnerable period for women. One in five mothers will experience some sort of mood or anxiety issue during pregnancy or in the first year after delivery. Women who have had a history of mental health struggles are at higher risk.

And, right now, we are not in normal times. In this pandemic, pregnant and postpartum women are in a uniquely vulnerable position due to social distancing, and precautions that are being put in place in healthcare settings to prevent infection. This means limitations on support people in hospitals, fewer OB visits, and social isolation in the postpartum period.

## REFLECTION QUESTIONS

How have I dealt with difficult times in the past?

What practices have I done that helped me feel safe?

Are there people in my life who help me feel grounded?

Is there one action that I can take that will help me feel more in control of my life right now?

## THE BABY BLUES

The baby blues is a normal experience of pregnancy. It typically comes on about 2-5 days after giving birth and 80% of moms will experience it. The baby blues typically consists of mood swings, crying spells, anger at your partner, and just a general feeling of being on an emotional roller coaster. While the baby blues does not require treatment, it does help to have someone to talk to, like a fellow mom. The baby blues should not interfere with your ability to take care of yourself or your baby. If symptoms persist for longer than 3 weeks, OR, if getting worse over time, or if you are having trouble getting out of bed and taking care of baby, it could be a sign of postpartum depression or anxiety.

# RISK FACTORS FOR POSTPARTUM DEPRESSION AND ANXIETY:

- A previous history of depression or anxiety (including prior PPD/PPA but also at any time in your life)
- Depression or anxiety during pregnancy
- Lack of sleep during the postpartum period
- Lack of social support
- Conflict in your relationship
- If you are taking psychiatric medication for depression, going off of it increases your risk
- Having a sick baby
- Birth trauma

## TREATMENT

- **Home interventions**
  - **Getting 4-6 consecutive hours of anchor sleep**
  - **Increased social support (practical and emotional)**
  - **Mom's groups**
- **Psychotherapy**
- **Psychiatric medication**

## Signs of Postpartum Depression:

Feeling down, hopeless, or sad

Crying spells

Feelings of guilt and worthlessness

Inability to sleep even when the baby is sleeping

A sense that life will never get better

Intrusive anxiety, obsessing over the same worries, with an inability to be reassured by friends, family or medical providers

Thoughts that your family would be better off without you, or suicidal thoughts

(If any of these symptoms are present for 2 weeks and cause difficulty in taking care of yourself or baby, it could be a sign of a clinical issue, and you should seek medical evaluation)

## Signs of Postpartum Anxiety:

Intensive, inconsolable anxiety or obsessions about the baby's health or safety

Frequent checking on the baby to make sure they're still alive, without any lasting reassurance

Panic attacks

Inability to sleep when the baby is sleeping

Trouble with decision making

Repeated thoughts or images of something violent happening to you or the baby that are difficult to shake and distressing

(If any of these symptoms are present for 2 weeks and cause difficulty in taking care of yourself or baby, it could be a sign of a clinical issue, and you should seek medical evaluation)

## WHERE TO GET HELP AND RESOURCES

- Re-connect with your mental health professional if you have one (many mental health professionals are currently offering telemedicine services).
- Postpartum Support International
  - Provider directory (searchable by location): <https://psidirectory.com>
  - Helpline: 1-800-944-4773(4PPD) (English and Spanish)
- Peer to peer support groups: <https://www.thebloomfoundation.org/mom-support-group/>
- March of Dimes Birth Plan: <https://www.marchofdimes.org/materials/March-of-Dimes-Birth-Plan-2020.pdf>
- COVID-19 Maternal Well-Being Facebook Group: <https://www.facebook.com/groups/2492372544412181/>

### NOTICE

The information provided here is not medical advice. It is provided for education only. Please talk to your own healthcare provider for medical advice. Do not delay seeking treatment because of something discussed here. If you need help finding a perinatal mental health specialist in your area, check out the Postpartum Support International HelpLine: 1-800-944-4773, or their website [www.postpartum.net](http://www.postpartum.net) for local resources. If you are having thoughts of hurting yourself, someone else, or in a clinical emergency, you should go to the ER or call 911 or the National Suicide Prevention Hotline at 1-800-273-8255.

# ABOUT DR. POOJA LAKSHMIN MD



Dr. Pooja Lakshmin, MD is a board-certified psychiatrist and writer specializing in women's mental health and perinatal psychiatry and a clinical assistant professor of psychiatry at the George Washington University School of Medicine. She maintains a private practice in Washington, DC where applies an integrative approach to taking care of women suffering from maternal mental health conditions. Dr. Lakshmin is most passionate about empowering women and sees her clinical work as a perinatal psychiatrist as an extension of this mission. She is a frequent contributor to The New York Times, and her advice has been featured in Glamour, Harper's Bazaar, Bustle and various other media outlets. Dr. Lakshmin is active in advocacy work and community building through online platforms. She serves on the Board of Directors for the Maternal Mental Health Leadership Alliance, a national non-profit dedicated to further maternal mental health policy, and the Editorial Advisory Board of Clinical Psychiatry News. She is working on a book about the tyranny of self-care. You can follow her on Instagram [@womensmentalhealthdoc](https://www.instagram.com/womensmentalhealthdoc).