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THE TEN WARNING SIGNS OF POSTPARTUM DEPRESSION – AND WHAT TO DO ABOUT IT

(Oklahoma City, OK) More than one half of all women will experience the “baby blues” in the first ten days after delivering a baby. For one in ten women these initial sensations of disconnectedness, sadness or disappointment become Postpartum Depressive Disorder (PPDD), a serious medical condition that if left untreated affects not only the woman but the family as well. In her new book, *EXPECTING TWINS, TRIPLETS AND MORE: A DOCTOR’S GUIDE TO A HEALTHY AND HAPPY MULTIPLE PREGNANCY*, Dr. Rachel Franklin discusses the problems associated with this disease:

- 1) PPDD causes delays in cognitive and language development and attention in infants born to women with PPDD.
- 2) PPDD has been implicated in partner separation and divorce.
- 3) In its most severe form PPDD causes psychosis, suicide and murder.

Postpartum depression is treatable if caught early and managed aggressively, but Dr. Franklin says that women must be educated about the warning signs of the disorder and their families and partners made aware of the danger so they can assist with diagnosis and treatment. The top ten warning signs that a woman has “more than the baby blues” are:

- 1) Feelings of sadness
- 2) Loss of interest or pleasure in activities
- 3) Irritability and agitation
- 4) Feelings of worthlessness or guilt
- 5) Weight loss
- 6) Loss of energy

- 7) Sleeping problems (trouble sleeping or sleeping too much)
- 8) Loss of concentration
- 9) Inability to make decisions
- 10) Frequent thoughts of death or suicide

Postpartum Depression affects all women, but those at greatest risk are those women who:

- 1) Had a high-risk pregnancy
- 2) Delivered infants with developmental disabilities
- 3) Have previously battled depression
- 4) Feel unloved and unsupported during their pregnancies
- 5) Are in an unhappy relationship

Treatment initially consists of counseling for the woman and her partner, focusing on interpersonal relationship building and changing roles for each. Medications include Prozac, Zoloft and Elavil, and estrogen replacement therapy is being studied. Treatment must continue for twelve months to ensure adequate remission.

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EXPECTING TWINS, TRIPLETS AND MORE: A DOCTOR'S GUIDE TO A
HEALTHY AND HAPPY MULTIPLE PREGNANCY

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