

Greater awareness of stress disorder needed

Susie Hill

It took Auckland mother Sue Watson five years to recover from 35 days of intense stress during her first pregnancy back in 1993. More alarming still is it wasn't until 1997 that it was suggested she had post-traumatic stress disorder (PTSD) and she didn't get the right treatment for another three months.

Post-traumatic stress disorder is the term for a set of reactions anyone may experience when something traumatic happens. It is a normal reaction to an event that involves the threat of death or injury to self or others. Only recently has it been recognised that PTSD may be suffered as a result of a traumatic birth experience. Mrs Watson, chair of Tabs, Trauma and Birth Stress: PTSD after childbirth, wants other mothers and doctors to understand this type of trauma, which is often wrongly confused with depression. She says 6.5 per cent of pregnant women develop PTSD after childbirth and can also suffer from depression as a result of going undiagnosed. "My wish is for women to get help for PTSD early on in their postnatal care and that all women have the opportunity to talk, talk, talk their birth experience out. "Mrs Watson has written of her experience on the Tabs website at:

www.tabs.org.nz <<http://www.tabs.org.nz>>

Her stress began when she was told she had polyhydramnios. "Seventeen days later, I went into hospital for what I thought was just an 'amnio' but it was in fact an acute admission... I was already in labour, our baby girl had a very poor heart trace and she was not moving." Mrs Watson had an emergency caesarean and her daughter was taken to NICU where she deteriorated quickly and died. Once home, Mrs Watson haemorrhaged due to retained products. "I began a steady down-hill slide into blackness. One minute I was pregnant, the next my baby was gone and physically I felt very weak and unwell. I received help from various health professionals, but their focus was on the loss of the baby and my anorexia, whereas I was trying to grapple with all of the events. "It wasn't until after the birth of her second baby girl, two years later, that everything came flooding back to her. "For 20 months I kept a lid on it all until I hit rock bottom. I wanted to scream at the world, I am NOT depressed, THIS IS SOMETHING DIFFERENT! "At last she got help for all the events that had happened. It was two years later that she could "breathe the air and actually smell it". Auckland psychiatrist Sara Weeks says GPs should have a high index of suspicion in women who do not respond to postnatal depression treatment, have a past history of sexual or physical abuse or trauma, like prolonged hospitalisation or a bad car accident. What is routine to attending persons may not be so routine to women. Forceps or ventouse deliveries or the sound of a ripping perineum or panic in attendants might be enough to cause PTSD. She says eating disorders, substance abuse, depression, somatisation, emotional numbness, attachment difficulties and litigation proceedings can also be clues.

The Tabs website provides a range of information including things like who is at risk of developing PTSD after childbirth and details treatments. Mrs Watson says Tabs is currently looking for counselors.

