



Risk Factors for Perinatal Mood Disorders

Please note that the following list is not diagnostic, but rather provides an overview of potential vulnerabilities that one may have to developing a Perinatal Mood Disorder. While we don't know the exact cause of Perinatal Mood Disorders, they are likely a combination of biological, hormonal, environmental, and psychological factors. The combination of risk factors will be unique to each individual, their biological make up, and their personal circumstances. It is also possible that some women may have no risk factors at all. Fortunately, while we do not know exactly what causes Perinatal Mood Disorders, we do know what to do to effectively treat them.

Physiological risk factors	History of Premenstrual Syndrome; history of sensitivity to other hormonal shifts (Depression at puberty, after pregnancy loss, in reaction to birth control or fertility treatments); history of mental health problems; history of Postpartum Mood Disorders; Depression or Anxiety during pregnancy; family history of Mood Disorders; history of Eating Disorders; Thyroid Disorder or Diabetes (including Gestational Diabetes)
Risk factors related to stress and issues of social support	Miscarriage or other neonatal loss; previous termination of pregnancy; past infertility; adoption; unplanned or unwanted pregnancy; birth trauma; medical problems with baby or parent; challenging infant temperament; change in job or loss of career; poverty and economic pressures; recent move or change in living arrangements; recent immigration; previous death of close family member; separation from parent in childhood; marital difficulties; current or past abuse of any type; poor social support; young maternal age; single parenting
Interpersonal risk factors	Negative outlook on the world; external sense of control; overly eager to please others; very task oriented; rigidity; perfectionist tendencies; negative expectations of birth or parenting; very high expectations of birth or parenting; interpretation of the infant's temperament as being the fault of the parent; inadequate or ineffective coping skills
Family history risk factors	History of physical, sexual, or emotional abuse; history of substance abuse; poor mother/daughter or father/daughter relationship; low self-esteem; personal experience of being poorly parented; family history of mental illness