



Mishpacha family

FIRST

FILLING THE COOKIE JAR

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and experienced bakers alike

PIONEERS OF THE SPIRIT

Live report from Cincinnati:
The Women In Kiruv Conference

EVERY BREATH SHE TAKES

A courageous woman shares
her struggle with cystic fibrosis

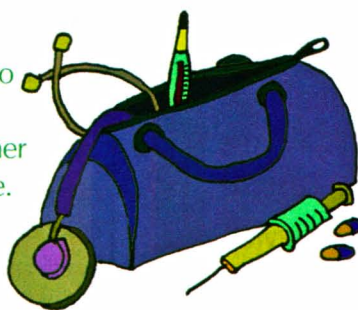
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SUPPLEMENT TO MISHPACHA JEWISH FAMILY WEEKLY

Q

My son's wife was going into early labor, and to prevent it her doctor put her on the drug nifedipine. Thank G-d she went on to deliver a beautiful healthy baby, but since



then, she has been suffering from anxiety, very severe loss of appetite, and terrible fatigue. A psychiatrist told us that this is a common response to this medicine. Will these symptoms go away?

Responding is Kevin Jovanovic, MD, FACOG, AACS, an associate professor of obstetrics and gynecology at Lenox Hill Hospital. Trained in obstetrics and gynecology at Yale University School of Medicine, he went to medical school at Albert Einstein College of Medicine. He is a fellow of the American College of Obstetrics and Gynecology, fellow of the College of Surgeons, and a fellow of the American Academy of Cosmetic Surgery. In his practice on Fifth Avenue in New York, he provides a full array of women's medical and cosmetic services.

A

Preterm labor is a devastating complication of pregnancy. There are now helpful ways to diagnose preterm labor, but not great ways to stop it. Nifedipine is a frequently used drug for preterm labor. We are aggressive with medications because an early baby can bring devastating complications.

The symptoms that your son's wife is describing could be related to a far more common reason — postpartum depression.

Depression in pregnancy and postpartum can affect up to 15 percent of moms. There are changes during and after pregnancy that can cause symptoms similar to those of depression. Your daughter-in-law may be depressed and not know it.

The symptoms of postpartum depression defined by the US Department of Health and Human Services are:

- Feeling restless or moody • Feeling sad, hopeless, and overwhelmed
- Crying a lot • Having no energy or motivation • Eating too little or too much
- Sleeping too little or too much • Having trouble focusing or making decisions
- Having memory problems • Feeling worthless and guilty • Losing interest or pleasure in activities you used to enjoy • Withdrawing from friends and family
- Having headaches, aches and pains, or stomach problems that don't go away

Many new moms feel happy one minute and sad the next. If you feel better after a week or so, you probably just had the "baby blues." If it takes you longer to feel better, you may have postpartum depression. If you have any of the above symptoms of depression for more than two weeks, call your doctor.

There is no single cause. Rather, depression likely results from a combination of factors. Patients with a family history of depression are more likely to have depression. Some changes in brain chemistry or structure are believed to play a big role in depression. These changes can be caused by stressful life events, such as death of a loved one, caring for an aging family member, abuse, and poverty.

Women are uniquely at risk because hormonal factors may contribute to depression. We know that hormones directly affect the brain chemistry that controls emotions and mood. During pregnancy, levels of the female hormones estrogen and progesterone increase greatly. In the first twenty-four hours after childbirth, hormone levels quickly return to normal. Researchers think the big change in hormone levels may lead to depression. Other factors that may play a role in postpartum depression include sleep deprivation, feeling overwhelmed with the new baby, self-doubt, the "perfect mom" expectations, and lack of free time. These lifestyle changes dramatically change after a baby arrives and, coupled with hormonal changes, can trigger depression.

Nifedipine's side-effect profile is composed mainly of short-term changes in blood pressure. However, no medicine is perfect and side effects are individual. It's always possible there were changes in brain chemistry as a result of the drug, but I have not seen that to be the case in my practice. It may be worthwhile discussing further with your obstetrician to see their experience with nifedipine and this rare side effect.

didyouknow?

Obesity is affecting our military readiness. The leading medical reason why so many young people are unqualified to serve in the US military? A fourth of adults in this age group — at least 9 million young men and women — are too fat to fight; they are too heavy to meet military entry standards. Additionally, every year, the military discharges more than 1,200 first-term enlistees before their contracts are up because of weight problems, and the military is spending \$60 million a year in recruitment costs to replace them.

healthtip

At a meeting of the American Association for Cancer Research in Washington, DC, researchers presented findings from a new study that a common osteoporosis drug, raloxifene, reduces breast cancer risk by 38 percent in women at high risk for the disease, without causing the serious side effects of similar drugs. Researchers followed nearly 20,000 high-risk postmenopausal women for almost seven years. Younger women may choose tamoxifen as prevention against breast cancer. Researchers state, "We now have two very effective agents for breast cancer prevention."