

## Paternal postpartum depression (PPPD) – An undertreated health disorder in fathers of newborn children

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Dear Editor

I want to draw the attention of the readers of *Psychiatria Danubina* to the common problem men often experience during the postpartum period, which is termed postpartum depression (PPD). Mom-to-be or Papa-to-be is supposed to be the happiest moment of the life- The arrival of the new baby. However, it is not the same for all. New Moms display collective perinatal disorders, from which Fathers' are not to be excluded. Fathers' do experience baby blues similar to Moms'. Postpartum depression in men or fathers of newborn children is termed Paternal Postpartum Depression (PPPD) (Mahon & Agius, 2019).

The majority of the studies scrutinized the prevalence, contributing factors, and symptoms of maternal postpartum depression, while the newborn fathers' depressive symptoms were less focused and understood. This might be because men and women exhibit unique clinical pictures (Fatima R. & Hani A, 2022). According to The Diagnostic and Statistical Manual of Mental Disorders – DSM-5, postpartum depression is defined as the occurrence of episodes of depressive symptoms during the postpartum period, with peak incidence in the first 6 months to until 12 months after delivery (American Psychiatric Association, 2013). A supplemental article published in *Psychiatria Danubina* in the year 2024 highlighted that 8 – 10 % of fathers of newborn children are affected with depression, with the maximum incidence occurring in the first 3 months following delivery. Prevalence estimates based on the included studies in the review indicate that depression in men is twice the rate of depression in the general male adult population. Additionally, significant variations exist in the disease progress and response to the given treatment based on the biological point of view (genetic) of each gender. Regarding the psychological point of view, men and women will portray different reactions to the exposure to the stress of expectations of gender roles (Ružić et al., 2024). The epidemiological survey reveals that both genders display unique clinical symptoms, although they are termed under the same disorder. One of the key features is that PPPD affects one in every 10 men. In contrast, in women, one

in seven is affected with maternal PPD; peak symptoms faced by Moms are almost in a couple or three months immediately after delivery. At the same time, Fathers see peak symptoms in the later months of the first year; men tend to show more frustration, anger, and social isolation, while women display hopelessness, crying, and loss of interest. Maybe this is one of the reasons that PPPD is overlooked or undertreated and does not get adequate support from the primary caregivers (Jiao et al., 2018). One of the important predictors of PPPD is maternal postpartum depression, which is directly correlated with paternal postpartum depression. An integrative review conducted by Goodman way back in the year 2004 has highlighted that the incidence of PPPD is rising from 24% to 50% among men whose partners were experiencing PPD. The effect of paternal maternal PPD is well recognized, while the effects of paternal PPD are gaining recognition, and more research has been conducted. Results reveal that a higher risk for disturbances in the establishment of family equilibrium, lack of paternal-child bonding, increased incidence of emotional tantrums among children, poor conduct behavior, and hyperactivity are exhibited by offspring of PPPD (Fatima & Hani, 2022).

The complexity of the manageable disorder underscores that there is an urgent need for screening and management of PPPD in fathers at early stages. In particular, this research on pooled literature aims to create awareness among health care providers, namely Midwives and Pediatric Nurse Practitioners (PNP), that there is a need to initiate their support services at the early stages of PPPD to prevent negative consequences on infants and children. Evidence suggests that establishing social and professional support helps fathers overcome their lack of confidence in child care. PNP and midwives must involve fathers in child care and follow-up care appointments, making them feel worthy of their role, preventing conflicts, and enhancing positive parenting skills. For the interventions to be effective, healthcare providers should know to tailor the intervention comprehensively, focusing on removing the causes of paternal postpartum depression (Essadek et al., 2023).

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