



My Journey Parenting with Chronic Depression as a Physician Mom

Karla Lester, MD

[KevenMD.com](https://www.kevenmd.com)

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I remember feeling like I was on an island, and any time I separated from her and put her down, I frantically looked around for her, daydreaming she was lost at sea.

When I was pregnant, everything was contained and controlled. Her womb gymnastics, even at night, were welcome interruptions to my sleep.

It was my first time breastfeeding, and even though I was a pediatrician, getting her to get a good wide-open latch was impossible. What comforted her was nursing. So, I leaned forward with my abundant milk supply, dug my nails into the gliding rocker armrests, and put her to my breast with every tiny squeak. My back was killing me. At times, I looked at her, and tears ran down my face with an explosion of joy and love. At times, I felt so exhausted I dreamed of sleeping.

110-hour weeks in the NICU and PICU during residency had nothing on the sleep deprivation of motherhood, especially when I went back to work as a hospitalist in the ER and worked night shifts to avoid daycare in a city where we knew and trusted no one. The cumulative sleep deprivation over my first few months of motherhood put me in a go-through-the-motions place.

Then, it gradually lifted, and things were better for a while.

All these years later, 22 to be exact, I know what to call it. Depression. I had post-partum depression. I experienced post-partum depression after my son was born five years later but attributed my exhaustion to the stress of feeding issues. Looking back through my self-love superpower lens, I understand, with grace and compassion, that this was a stressful time in my life.

“It,” my depression, has ebbed and flowed in my life. Starting in my teens, I remember staring at the ceiling in my room in a daze, wondering when life would get better. I remember two more times in college when things felt like more than a funk, then in medical school a couple of times and when I started residency. I have experienced bouts of depression throughout my 22-year parenting journey.

As a parent, I haven’t always called “It” what it is because of stigma.

If you are parenting with a mental health diagnosis, ignoring depression or not recognizing how depression shows up in your daily life can create unnecessary drama in your home.

One vulnerable shame-busting example is that I have blamed my depression or symptoms of my depression and how I was feeling on my kids. If only she would behave or if he would listen, then I wouldn’t be exhausted. I got into control mode over stupid little things, had a short fuse of irritability, and put my happiness on the external. I was not in the moments of my life as much as I would have liked to have been. Part of not being in the moment is parenting is a busy game. When you’re changing diapers and wiping butts for eight straight years of your life, it’s OK to let some of those moments go!

I come from depression naturally, but it didn’t register with me until 2011, working with a therapist, and even though I asked my patients about a family history of depression, I would consider my own.

My sisters and I grew up in our mother’s mind. It was a mess. We were 5, 3, and 18 months when our parents first separated and then two years older when they finally divorced. The rug got pulled out from underneath our mom, the three of us too, though we were not a consideration. She couldn’t function except to go through the motions to keep up external appearances.

2011 therapist: “Your mother had a-volitional depression.”

“It’s the kind of depression where you can barely go through the motions.”

I’m a major goal slayer, so there was no way, in my mind, I could be in the same kind of depression as my mom. I remember family members calling her lazy when she literally had three jobs to make ends meet while not having the energy to write the checks to keep the lights on.

Me: “I’ve been thinking maybe I should try medication.”

I remember the look on my therapist's face. It was relief.

“Me: “I just don't know how it will affect me when I fill out my licensing forms. When you look at the questions on those forms, it's almost like if you answer yes to having a mental health diagnosis, you will be labeled an impaired physician.”

“Are you impaired?”

Me: “No, I'm not. I'm a good doctor.”

“Then, there you go.”

“There's no problem with taking medication. If that's your only hesitation, then it sounds like you should highly consider it.”

“Serotonin levels get depleted over time.”

“They can be replenished with medication. That's all.”

When it's chronic, you think it's you. It's how you are. “Am I just a melancholy person,” I would ask myself.

Hearing my therapist's words was the first time it dawned on me that my depression was biological and not something I could control by ignoring it.

Ironically, being a physician has been the biggest barrier to getting treatment or even a diagnosis for my chronic depression. During my bouts of post-partum depression, in my clinical practice, I had no place to share what I was experiencing. Pediatricians screen for maternal depression at newborn and well-baby visits, but there was no way I would ever go to my partners to share that I was experiencing post-partum depression myself.

Another major barrier to getting help for my depression is my life looks so amazing on paper. And it is an amazing life. I have a good marriage, a great career in many ways, my own success, a beautiful home, friends, my health, my kids are wonderful, and lots of gratitude, yet my brain sometimes goes dark. That's part of society's stigma that becomes internalized. External circumstances may certainly improve well-being, but depression is a medical diagnosis, and chronic is, believe me, chronic.

Medication isn't magic, but it certainly has helped me, especially when it comes to disrupting ruminating thought patterns in my obsessive-trauma brain.

I don't tiptoe around it. I'm open about my depression with my kids. I don't like secrets and don't believe in stigmatizing chronic diseases, especially mental health.

If you are suffering from chronic depression, remember to:

- Have grace and compassion for yourself.
- Get support, and don't be afraid to name it.
- Recognize you do not have to grind your way through, hoping it will lift.
- Take a simple action when your brain is stuck in more than a funk. Get up. Brush your teeth. Get your eyeballs to the sun by stepping outside for a minute.
- Let someone know how you feel—someone who will listen and not try to fix you.
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Your children will be better off when you get the help you need.

Be OK with your kids telling you honestly, without getting defensive, how they have suffered. It's OK to apologize to your kids.

It is courageous to name it, recognize and get support, so you feel better. It's OK to feel better. You deserve to feel better. You even deserve to feel good.

Call or text the National Maternal Mental Health Hotline at 1-833-943-5746 (1-833-9-HELP4MOMS) for free, confidential, 24/7 mental health support for moms and their families before, during, and after pregnancy.