

## An Evil Cradling: First-Person Account of Psychosis During Pregnancy\*

### Anonymous

\*To whom correspondence should be addressed; Sanne van Rhijn, Dr, Perinatal Mental Health Service, West London NHS Trust, Magnolia Way Annexe, St Bernard's Hospital, Uxbridge Road, Southall, UB1 3EU, United Kingdom; e-mail: [sanne.vanrhijn@nhs.net](mailto:sanne.vanrhijn@nhs.net)

When I found out I was pregnant for the fourth time, I was worried: we couldn't afford another child, and I was unsure how I'd cope with so many children under the age of 5 years. I went to a routine doctor's appointment when I was 20 weeks pregnant, and just sobbed and sobbed. I was inconsolable, and the doctor was so concerned that she ordered a minicab to take me immediately to the local community mental health team.

After a wait of an hour or two—still crying—I saw a psychiatrist, along with the home treatment team. I was prescribed anti-depressants and the home treatment team arranged to see me the next morning. I went home, feeling ashamed about what had just happened, and worried about what my husband would say. As I predicted, he was very concerned—mostly about the effect all this intervention would have on the children—and I felt incredibly guilty.

The home treatment team visited me twice a day until I gave birth, and pretty soon social services became involved. A community psychiatric nurse had waved at my 5-year-old daughter through the window, and she hadn't waved back. The nurse reported this to her team, and so I was visited regularly by social services as well. I was terribly worried that my children would be removed from me. As it was, they took my illness so seriously that I wasn't allowed to be alone with my children for the rest of my pregnancy. I find it hard to describe how remorseful and disgusted I felt about myself as a result. Meanwhile, I still hadn't had a firm diagnosis.

Around this time, I was referred to a wonderful psychologist who specialized in antenatal mental health. She sustained me throughout what I can only describe as hell. She was caring and compassionate in equal measure. She also referred me to a midwifery team for vulnerable women. I was allocated my own midwife, who saw me weekly, and was also sympathetic and helpful. By this

time, I was having at least one appointment every day, either for the children or myself. Thank goodness my mother agreed to be the responsible adult in this situation, enabling me to spend time with the children throughout my pregnancy. It also meant my husband could continue working, which I welcomed as money was a significant concern of mine.

However, things were about to deteriorate. I had an antenatal check-up, where I requested the obstetrician use an ear trumpet rather than an ultrasound as I didn't want to hear the baby's heartbeat. As I lay on the bed, I lifted up my jumper and he saw my abdomen was laced with cuts. Shocked, he carried out the examination and then immediately rang my psychiatrist. Following this discovery, I was sent to a psychiatric ward for observation. It was a dirty and threatening environment, not particularly suitable for a pregnant woman. I was admitted there 3 or 4 times throughout my pregnancy, only for a matter of days each time.

It was around this period that I received a firm diagnosis: psychotic depression and borderline personality disorder (BPD). I dissociated myself entirely from the pregnancy and didn't believe I had a baby inside me, but rather something sinister. I stopped eating regularly, and my weight plummeted by 5 stone. By the end of my pregnancy, I was lighter than I was at the beginning. Meanwhile, my cutting provoked a rapid response from social services. I was told that they were going to take my case to panel and recommend my unborn baby to be placed on the Child Protection Register under Neglect, and that my other children were listed as Children in Need. At this point, I attempted to slash my wrists and was swiftly admitted to hospital.

A week later, I attended the meeting with my husband, social workers, a midwife, representatives from the children's school and nursery, a psychiatrist

and—alarmingly—a police officer. It's difficult to explain how a meeting like this made me feel. I understood that I was ill, but it was a strange experience being talked about while I was in the room, totally objectifying. Most of those present were very sympathetic, but the outcome (which was as predicted) was devastating for me. I felt like the worst mother in the world, and that I was bringing shame on my family—especially on my husband.

My life continued to be scrutinized, and the amount of meetings was ramped up now that my children were overseen by social services. On the busiest day, I had 6 appointments. I resented my inpatient stays, but they provided some respite from the constant meetings. Meanwhile, the home treatment team—and particularly the lead consultant—did a sterling job. They were almost always kind and sympathetic, and liaised very effectively with my psychologist, midwife, and social services.

By the time I was 7 months pregnant, plans had to be made for the birth. It was decided that I should have a planned Caesarean, and that I should thereafter be admitted to a mother and baby unit. I was taken around the unit, and was interviewed by one of the psychiatrists to see whether I was suitable for an inpatient stay. She offered me a place on the spot. Time passed, and at about 37 weeks I went into labor. My husband and I rushed to the hospital and I was operated on immediately. I was shown my daughter, and was shocked that I'd actually delivered a baby—I wasn't expecting that.

Part of the delivery plan was that I would be moved to a private room after I'd given birth, and would be accompanied by a mental health nurse whenever I was with the baby. When the nurse went home in the evening, the baby was sent downstairs to the nursery. This gave me precious time to recover and connect with my daughter, although I would have difficulties bonding with her for a while. After 3 days, I was transferred to the mother and baby unit.

This is where my recovery began. I cannot overstate how amazing this facility was. Every single staff member was kind, considerate, and empathetic. It had a homely feel, with carpets and the smell of fresh washing. Inpatients were helped to look after their babies and were encouraged to establish a routine, so that by the time they were discharged their babies would be sleeping through the night, or near enough. There was also daily psychotherapy, and I was lucky enough that my antenatal

psychologist from the hospital continued to see me at the unit. My midwife also visited regularly.

I progressed, though still found it difficult to relate to my daughter. Once recovery was established, the inpatients were encouraged to cook dinner for everyone. I'd been there for maybe 4 weeks when I planned to make macaroni cheese. The supermarket was about 5 minutes' walk away. But something inside me snapped—I just couldn't cope. I felt overwhelmed and exhausted. I arrived back at the unit, and told them I couldn't make dinner that night. Then, later, I pressed the exit button by the front door—I needed to escape the constant scrutiny. To my surprise, it opened. I ran to the nearest bus stop, which took me to the tube, and then the South Bank. I craved a glass of wine by myself, but by the time I sat down to drink it, my phone had been ringing nonstop. This wasn't the relaxing beverage I'd had planned, and I was feeling increasingly guilty and uncomfortable. Eventually, I went up to a police officer and told him I'd absconded. I was driven back to the unit and was, again, treated with kindness and care.

I'd reached my nadir. For the next 5 to 7 days I remained mute and highly suicidal. I was under constant observation, and attempted time and again to take my own life. I was eventually sectioned, and my daughter was on the cusp of being taken away from me while I was going to be sent back to the inpatient unit I so despised. However, the unit's consultant gave me a reprieve: if I looked after my daughter more that weekend than I could stay.

This marked the beginning of my journey to recovery. Since then, I've been diagnosed with full-blown schizophrenia and BPD. My children still don't know this, and I'm thankful that my final pregnancy took place when they were young and less aware of what was going on. My schizophrenia is, happily, easily controlled with medication and rest. While my BPD is something I cope with daily, I believe I'm self-aware enough for it not to interfere too much with my everyday interactions. Most importantly, I have my children, for which I'm forever grateful and, with the passage of time, view my final pregnancy as an ordeal I had to undergo in order to reach a greater understanding of myself.

### Conflict of Interest

The author has no conflict of interest to disclose.