Health Visiting

with you every step of the way

NHS
Leicestershire Partnership
NHS Trust



Emotional Changes Following Childbirth

Information on possible emotional and relationship changes following the birth of your baby.

Information on postnatal depression and the support available to new parents.

It is recommended that you read this booklet with your partner, a close friend or family member.

Your health visitor is:

Who is available to support you every step of the way.



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Introduction



Having a baby and becoming a parent is a major event in the lives of women and men. Becoming a parent is usually accompanied by changes to your home life, social life and relationships. Parents of a new baby experience a variety of emotions after the birth. You may feel happy and proud of yourself, or just relieved that the birth is over.

Whether this is your first, second or subsequent baby, the first few weeks of parenthood are demanding both physically, socially and emotionally.

It can be difficult to find time for yourself, your partner or your family when you have the twenty-four hour demands of a new baby to deal with. Meeting the needs of a baby can be rewarding, but in the weeks and months following the birth of a baby, you can feel stressed. **Try not to expect too much of yourself or your partner, if you have one.**

It is likely that during the first few weeks and months of parenthood you will feel a mixture of emotions. **It is very important that you speak honestly to your friends, family and your partner if you have one, about how you feel so that they can understand what you are experiencing and respond in a helpful and positive way. You can also speak to your health visitor so that they can support you.**

In reality becoming and being a parent means constantly experiencing new events and carrying out tasks we are not sure we can manage. A new set of skills to cope with these situations have to be learnt. **Women do not automatically know how to be a mother. Men do not automatically know how to be a father.**

This booklet is intended to give you information about some of the emotional changes that you may experience after having a baby. But it will mainly focus upon postnatal depression and will outline possible symptoms and treatments. In addition it provides advice to the depressed woman, her partner, family and friends.

The information should help you decide if the emotions you (or your partner) are experiencing after having your baby are usual or whether you may need some extra support. At the back of this booklet is a list of useful support groups and organisations for parents.

Remember - if you are depressed after your baby is born, do not despair. Most women will recover completely.

Postnatal mood changes

There are three kinds of mood changes which can develop after the birth of a baby; some common, some rare and more serious.

The Baby Blues

Baby blues affects more than 70% of women, but only lasts for a short period of time.

It usually begins within a few days of the baby's birth. Common reactions are to burst into tears for no obvious reason,or to feel on top of the world one minute and miserable the next. It is not unusual to feel anxious or tense, lacking in confidence or worried.

Remember that having a baby can turn your world upside down. In the first few weeks and months you are likely to be feeling emotionally and physically drained. Becoming a parent for the first time can feel like an overwhelming responsibility and it is very easy to feel inadequate when other parents around you seem to be coping well. You may expect to love your baby immediately, but this can take a while and is not always instinctive. Not loving your baby straight away does not mean that you are not a 'good mother' or a 'natural mother'. In fact you may feel the same if this is your second, third or fourth baby.

Every time you have a baby your life will change.

So don't be too hard on yourself, you are only human. We all learn to be a parent when we actually have a baby, not before. Give yourself plenty of time to adjust to your new life. Find time to rest and eat a good diet as this will help you become and stay physically and emotionally healthy.

Talk to someone you can trust, like your partner, your mum, a friend, or to your midwife or health visitor about how you are feeling. It can help a lot just to confide in someone else. Once they know how you are feeling they will be able to give you the support you feel you want or need.

If you think that you are becoming more unhappy or upset,or if the low moods last more than one week, then you are probably experiencing something other than the baby blues.

Talk to your midwife, health visitor or doctor - help from these health care professionals should be sought, especially if, as a mother, you had depression before.

Postnatal Depression



Postnatal depression affects 1 in 7 women following the birth of their babies.

This illness usually begins in the first six months after childbirth, although for some women, the depression begins in pregnancy during the antenatal period.

It is important to know that postnatal depression can occur at anytime within the first year of the birth of your baby.

However, postnatal depression can last for longer than a year if help is not sought and treatment not received.

Untreated postnatal depression can lead to the breakdown of relationships with partners, children, friends and family.

On an optimistic note, early diagnosis and treatment of postnatal depression will result in a faster recovery. Quite often a close family friend or perhaps your partner will recognise that there is something wrong before the mother herself.

The possible causes, the likely symptoms, and the types of help and support that are available for women and their families will be described in detail in this booklet.

Puerperal Psychosis



This is a very much more rare and serious mood change, affecting about 1 or 2 in every 1,000 new mothers. Women with a family history of mental illness or who have suffered from puerperal psychosis in previous pregnancies are at a higher risk of developing this illness.

Symptoms include hallucinations (seeing or hearing things that others can not) delusions (incredible beliefs such as thinking she must save the world) and mania (extremely energetic and bizarre activity like washing and ironing clothes in the middle of the night).

The symptoms of this illness can be very severe and sometimes very frightening for you, your partner, and your family. In fact your partner may be the first to know that you are unwell. It is important that your partner, or if you do not have a partner, someone close to you knows the symptoms to look out for.

These symptoms will appear suddenly, often within the first two weeks following the birth of the baby. It will be very obvious that the mother needs medical help and it should be sought immediately from her GP or the Emergency Services. Seeking help quickly will make sure that you are well again quickly.

Women with the illness are often treated in hospital and will usually make a full recovery.

The symptoms of postnatal depression

Please be honest with yourself
when reading through the following list.

If you feel any of the following **more than usual** please do talk to someone you feel you can trust about these feelings.

If this person is not your midwife, health visitor or GP then also speak to them as soon as possible. They will then be able to help you get well again.

Quite simply, the sooner you ask for help, the sooner you will receive help, feel better and be able to enjoy your life as a mother/parent.

The symptoms of postnatal depression are different for each individual. No two women will feel quite the same. There are many signs and symptoms of depression; feelings some women may experience are shown below.

You may recognise yourself in some of the following symptoms.

Symptoms

- Low mood or feeling depressed
- Feeling emotional and irrational
- Tearful for no apparent reason
- Feeling anxious or panicky
- Feeling touchy or irritable
- Loss of enjoyment
- Feeling unable to enjoy the baby
- Being unable to concentrate
- Generally feeling unwell
- Feeling resentment to the baby or your partner

Anxiety: you may feel anxious, sometimes you can become obsessed with fears about your baby, yourself or your partner. You may only feel safe if someone is with you at all times.

Panic Attacks: this is when your heart beats faster, the palms of your hands become sweaty and you may feel sick. You may feel that you are going to faint. These attacks occur at any time, but they are most common in stressful situations.

Tension: you may feel tense, your neck might feel tight and you may be unable to unwind and relax.

Irritability: you may find yourself shouting at your baby or you children, partner and others who cannot understand what they have done to deserve your anger.

Depression: Feeling depressed can vary from feeling low or sad, to being as severe as feeling as if your world is an empty place and you are unable to look forward to things anymore. Your thoughts may be negative and focus on your feelings of failure and have no interest in your everyday life.

Going out might be difficult for you and you may even find talking to people is too much for you to do. You may experience mixed emotions about your baby, and this can cause you some distress. You might even feel that your baby or partner would be better off without you.

Exhaustion: you may feel constantly tired and drained of energy, unable to cope with daily tasks. You may be uninterested in your appearance and surroundings. You may have difficulty sleeping, either getting off to sleep, or waking up very early and being unable to get back to sleep.

Some women describe wanting to sleep all the time no matter how much they have - this is not just expected sleepless nights that all new parents experience.

Lack of concentration: you may feel confused, finding it difficult to read or watch TV.

Inability to make decisions: making a simple decision such as what to wear may seem impossible. You may spend a lot of time making lists in an attempt to get organised - but never appear to succeed.

Physical symptoms: these can include appetite disturbance, tiredness, lethargy, headaches, blurred vision and stomach pains. These may be signs of tension and your body's way of saying something does not feel right.

Strange thoughts: for example you may believe that if you do not walk on the cracks in the pavement your baby will sleep through the night, or you may be convinced that if you do walk on the cracks in the pavement your baby will die.

These thoughts can be very frightening; you may be worried that you are going mad. This can make you scared to tell anyone how you feel and you may think that your baby will be taken away from you. (This is unlikely to happen).

Lack of interest in sex: for many women it takes some time for them to be interested in sex after their baby is born. They may need time to heal after the birth and may be too tired in the early weeks and months following the birth. However with postnatal depression it may take longer to regain an interest in a sexual relationship and this can become another source of stress for both parents.

Guilt, shame and blame: one of the many emotions women describe is an overwhelming sense of guilt. They may feel that they should be "grateful for their beautiful baby" or all the help they are getting and should just "pull themselves together".

It is difficult because sometimes the people who are nearest to you may be saying these things and then you may feel ashamed and blame yourself. This is one of the most common feelings associated with depression and it is difficult to admit feeling this way. It is not your fault; these are real emotions and have happened because you have postnatal depression.

The most important thing you can do is to believe that you <u>will</u> get better.

Seeking and accepting help is the first stage to recovery.

If you think you could be depressed, talk to a health care professional as soon as you can.

<u>Please</u> don't feel ashamed of how you are feeling. You are not alone.

Your midwife, health visitor and GP are all trained to help you.

They want to help you.

Many people find it difficult to ask others for help but it is very important that you do.

It is unlikely that your depression will just get better on it's own, no matter how much you wish that it would.

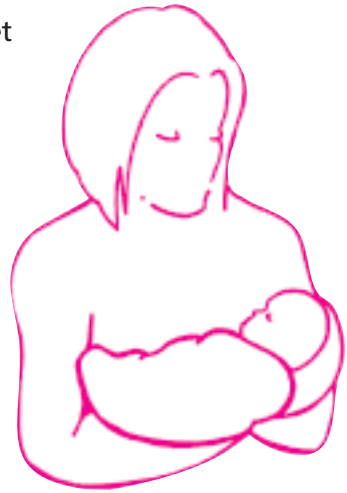
It is an illness.
It is not your fault you feel the way that you do.

You would not expect a broken arm to get better without the help of health professionals.

Don't expect your feelings to get better without their help either.

If you do not feel able to cope with explaining to them how you feel on your own then ask someone that you trust to be with you.

You can ask your midwife, health visitor or GP to come and see you at home if you prefer.



There are lots of different ways you can be helped and they are discussed later in the booklet.

The causes of postnatal depression

Due to a large amount of research, many possible causes of postnatal depression have been identified. Some of the potential causes have been listed below. **As each woman and her personal circumstances are unique, the cause of her depression is also likely to be specific to her.**

You are an individual and one of, or a combination of, the following may cause your depression:



- Feeling you have no-one to confide in
- Feeling isolated
- Living away from your family
- The death of someone close to you
- You or your partner losing your job
- Financial worries
- Housing problems
- Difficult pregnancy
- Difficult birth
- Feeling depressed in your pregnancy
- Illness of the baby or a family member
- Unrealistic expectations of what it is like to be a parent
- A previous history or family history of depression
- Experiencing violence in the home including arguments and disputes
- Sexual abuse past or present
- A previous history of miscarriages/still births

Not everyone who experiences any or some of the above will experience postnatal depression.

Also some women will experience depression without any of the above factors. It is difficult to predict just who will experience PND. However, it is possible not to have any of the above factors but still find yourself with the illness.

Treatment options for postnatal depression

Early detection of postnatal depression is important in ensuring a quick recovery.

The first and most important step on the road to recovery is that you, your partner and your family accept that this is temporary and that given time you will recover.

The sooner you get support, the sooner you will recover.

The methods of treatment most widely offered and found to be helpful are talking therapies such as counselling and psychotherapy, and medication in the form of antidepressants. **These treatments can be combined**. An enhanced rate of recovery has been found for some individuals when both anti-depressants and counselling are received.

There are a number of treatments that are available to treat postnatal depression.

Counselling and Psychotherapy

These terms apply to a range of different therapies which all involve talking to someone. Your doctor may be able to recommend you to a trained professional, which may include your midwife.

Professional counselling can be a great help if you are depressed. Many GP practices locally now have access to a counselling or psychotherapy service.

Your health visitor will offer you 'listening visits' in your home to talk through your difficulties.

Being able to confide in someone who is not related to you, or a close friend of yours, may seem awkward at first but it does have some advantages.

Counselling and Psychotherapy (continued)



In particular, you may feel more able to be honest with the counsellor or health visitor, as they are not going to take offense if you don't take their advice.

In counselling, the opportunity to talk about your troubles to a sympathetic, understanding person can provide a great sense of relief and release.

For mild to moderate depression, psychotherapy can be very beneficial.

One form of psychotherapy, Cognitive Behavioural Therapy (CBT), has been shown to be as effective as antidepressants.

CBT involves looking at how you think about things, confronting negative thoughts and focusing your attention on positive thoughts and actions.

Medication

If you are prescribed medication by a GP or healthcare professional, you must take them as instructed. This covers a range of possible drug therapies including, firstly, anti-depressants of which there are a wide range available.

They are generally considered not to be addictive and work for many people. Your doctor will advise which is suitable for you and will take into consideration such thing as whether you are breastfeeding and wish to continue breastfeeding.

Secondly there is hormone therapy. Some people believe that postnatal depression is due to a huge rise and fall in hormones during and after pregnancy.

However treatment with hormones has not proven to be beneficial and as a result may not be available from your GP.

Hospital Based Care

About one in four women suffering from postnatal depression develop more severe symptoms such as feeling suicidal and naturally need more specialised help. Although you may receive psychiatric treatment to help you recover, this must form part of a pathway of support and practical help involving partners, family members and friends. Your GP will refer you to a psychiatrist if necessary.

In-patient care is rare unless you have severe depression. In Leicester there is a special mother and baby facility so that mothers needing extra help do not have to be separated from their babies. You will need a lot of support around you both during your hospital stay and when you go home.

Professional and voluntary sector support, for example through Home-start and children centres, can be arranged.

Complementary Therapies

Complementary therapies, such as reflexology and aromatherapy, have also been found to help women become well again.

As their name suggests, they are most effective when used to complement other treatments. If you are feeling very unwell they should be used alongside treatment recommended by your doctor.

You may also like to learn how to massage your child. Infant massage has been found to help benefit both the mother and the baby as individuals, and to enhance the bond between you. Members of the Health Visiting Team will be able to support you with this along with Sure Start Children's Centres.

There are a number of therapies available locally. They are often only available privately and therefore cost may be a consideration. You need to be sure that the person offering the therapy is properly trained in its use.

Examples of some of the therapies available include:

- Aromatherapy
- Acupuncture
- Herbal Remedies
- Reflexology
- Homeopathy

Note (these are not suitable for children)

How you can help yourself through postnatal depression

You don't need to wait until you are feeling depressed to follow this advice.

You can follow these **suggestions to help you stay healthy**.

There are a number of ways you can start to help yourself feel better.

How can you help yourself

- Go for a walk outside with your baby, or alone if you have a partner, family member or friend to look after the baby
- Do some gentle exercise
- Try to relax and stay calm
- Cut down on caffeine and alcohol
- Keep well hydrated
- Eat fresh fruit and vegetables
- Take a long warm bath making sure baby is safe first
- Try to get as much sleep as possible
- Accept help when it is offered

It is important that you get some rest and relaxation each day.

The relaxation techniques taught antenatally are just as useful after the baby is born.

Local leisure centres and Sure Start centres may have classes for relaxation and exercise, such as postnatal exercise groups or yoga. There are often creche facilities available.

Doing some gentle exercise is good as it can help you start to feel better about yourself.

They are also a good way of getting out and meeting other mothers with young babies and/or children. If you don't feel ready to meet other mothers yet, just getting out of the house and going for a walk can help you feel better.

Live life one day at a time.

Try to find the positive in things. Not **everything** in your life is **always** negative, even if it feels like it at the moment.

Making yourself find positive aspects of your day will be very difficult at first. But please do try as it is a very simple way of helping yourself to notice when you start to feel better. If you don't look for the positive things in your life you won't see them. Let yourself and your partner be intimate, even if you don't yet feel like sex - a kiss and cuddle can be a source of great comfort and reassurance of the love you feel for each other.

It is equally important that you eat a balanced diet.

Mothers often are so busy looking after the needs of their babies that they forget about themselves.

Women are often keen to lose the weight they have gained in pregnancy and start to diet soon after the baby is born.

Remember you need time to recover and a good diet and exercise will help you regain your health and wellbeing.

Be open about your feelings and worries.

This will help others understand what you need.

Talk to your midwife, health visitor or GP - **no question is ever too small or too silly.**

There may be postnatal support groups local to where you live.

These are a good way of meeting up with other mothers, sharing information, relaxing and building up confidence about skills such as breastfeeding and baby care.

Your local health visitor or midwife is always able to help you make contact with groups in your area.

How your partner and your family can help you through postnatal depression



Living with a depressed woman/parent can be very difficult and frustrating. It might be useful to think of the baby's arrival as a crisis that will pass.

Give support, encouragement and hope. Be patient and understanding. Your help at this time of crisis is absolutely invaluable.

Most importantly, be prepared to seek help, both for her and for yourself if you feel you need it.

There are a number of things you as a member of the depressed mother's family can do to help.

- Offer help with practical child care arrangements.
- Offer to do the cleaning/washing/ironing whilst she spends some time relaxing and getting to know her baby.
- Be patient. Please remember that depression is an illness.
- Let her express her true feelings.
  Be aware that it may not be easy for you to hear what she has to say. Treat her fears and feelings seriously.
- Be sympathetic. It will have taken great courage to admit these feelings to herself; saying them aloud to you will have taken a great deal more courage.
- Find out more facts about depression and postnatal depression. She may be too ill to do this for herself or too frightened of what she may find out. It will also help you to continue supporting her in a sympathetic way.

As the depressed mother's partner or family, you are perhaps the most pivotal person in terms of helping her to recover. Whilst this may seem very flattering, it may also feel like a burden at times.

Try and remember that she does not want to be a burden to you. She does not want to be ill.

Together you can help her to become well again. Hopefully when she feels better you will feel that your relationship is stronger for the experience of surviving this difficult time. **All of the previous suggestions will help in addition to the following suggestions.**

- Frequently reassure her that her illness is temporary and that she will get well.
- Reassure her of your love and support. Let her know that you will not abandon her.
- Ensure that she gets enough food and rest.
- Encourage her to be active, even though she might resist. Going for a short walk together will help you feel better too.
- Point out to her any small improvements you notice in her wellbeing to give her hope and courage to continue.
- Give her a massage. Don't worry, you don't need to be an expert, try some gentle stroking to start with. It will help her to relax and restore her feelings of wellbeing.
- Make time for yourselves as a couple without your children.

Look after yourself. It would be a good idea for you to follow the 'suggestions to help you to stay healthy' mentioned on page 16. If you are following those simple steps as well it will make it easier for her to do them with you. Get help if you need it - please don't keep it to yourselves.

Depression after the birth of a baby can effect the mother and partner's health, marriage, friendships and career, as well as the parents bonding and attachment with the baby. Dealing with it on a day-to-day basis can be a huge challenge for family and friends.

With support and patience, together you can help the depressed mother to recover.

Who can help?

Local services
Your health visitor, midwife or GP
Children's Centres and Sure Start Centres

Health and Medical Advice and Information

NHS Direct: a 24 hour nurse-led helpline providing confidential healthcare advice and information.
Telephone: 0845 46 47.
www.nhsdirect.nhs.uk

Pregnancy, birth and postnatal support and advice

NCT (National Childbirth Trust): offers antenatal classes, befriending, coffee groups, postnatal classes, and breastfeeding counsellors. For information contact the Leicester branch on 0844 243 6185. Helpline: 0300 330 0700
www.nct.org.uk

Twins and Multiple Births Association (TAMBA) Twin Line:
a national, confidential, support, listening and information service for all parents of twins, triplets or more.
Telephone: 0800 138 0509. Staffed during the following hours: Weekdays 7pm - 11pm and Weekends 10am - 11pm.
www.tamba.org.uk

Breastfeeding support and advice

National Breastfeeding Helpline: Telephone 0300 100 0212
9.30am to 9.30pm every day of the year.

Association of Breastfeeding Mothers: Information and advice on breastfeeding and support for breastfeeding mothers.
Telephone 0300 330 5453 - 9.30am to 10.30pm every day.
www.abm.me.uk

Breastfeeding Network Supportline:
Telephone 0300 100 0210 - 9.30am to 9.30pm every day of the year.

Breastfeeding Network Supportline in Bengali/Sylheti:
Telephone 0300 456 2421 - 9.30am to 9.30pm every day of the year.

La Leche League: Information on breastfeeding and support for breastfeeding mothers.
Telephone 0845 120 2918
www.laleche.org.uk

National Childbirth Trust Breastfeeding / Shared Experiences Helpline:
Telephone 0300 330 0700 - 8.00am to 10.00pm seven days a week.

Emotional support, advice and befriending

Home-start Schemes: provide trained volunteers who offer support, friendship and practical help to families with young children in the family's own home.
Telephone Info Line on 0800 068 63 68
www.home-start.org.uk

Blaby	Telephone: 0116 263 0270
Charnwood	Telephone: 01509 239 786
Hinckley and District	Telephone: 01455 617 678
Leicester, Oadby & Wigston	Telephone: 0116 254 9937
Melton Mowbray & Rutland	Telephone: 01664 561 247
North West Leicestershire	Telephone: 01530 812 327
South Leicestershire	Telephone: 01858 467 982

Association for Postnatal Illness: information and support for women suffering from postnatal depression.
Telephone: 020 7386 0868
www.apni.org (free downloadable leaflets).

Rethink Focusline: a telephone helpline for anyone affected by mental health issues. Telephone: 0800 027 2127 5.00pm to 1.00am seven days a week.

Useful Organisations (continued)

The Samaritans: a confidential listening service for any person who is suicidal or despairing.
Telephone: 08457 90 90 90 24 hours a day every day of the year, or Lei: 0116 270 0007
www.samaritans.org

The British Association for Counselling and Psychotherapy: information and advice on all matters related to counselling.
For general enquiries telephone: 01455 883300
www.bacp.co.uk

Relationships, support and advice

National domestic violence helpline: offers support to anyone experiencing domestic violence. Telephone: 0808 2000 247.

Relate: counselling service for couples experiencing problems with their relationship. Telephone: 0300 100 1234

Victim Support Line: provides information and support to victims of all reported and unreported crime, including sexual crimes, racial harassment, and domestic violence. Telephone: 0845 30 30 900

Parenting support and advice

CRY-SIS: support for parents whose children cry excessively, have sleep problems or behaviour difficulties.
Telephone: 08451 228 669 - 9.00am to 10.00pm 7 days a week.
www.cry-sis.org.uk

Gingerbread: support for lone parent families and women facing pregnancy on their own. Helpline: 0808 802 0925.
www.gingerbread.org.uk

Family Lives: a confidential freephone helpline for anyone caring for children. Telephone: 0808 800 2222.
www.familylives.org.uk

Netmums: a family of local sites that cover the UK, each site offering information to mothers on everything from where to find playgroups and how to eat healthily to where to meet other mothers.
www.netmums.com



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If you need this information in another language or format please telephone 0116 295 0903 or email: Patient.Information@leicspart.nhs.uk

Arabic

إذا كنت في حاجة إلى قراءة هذه المعلومات بلغة أخرى أو بتنسيق مختلف، يرجى الاتصال بهاتف رقم 0116 295 0903 أو إرسال بريد إلكتروني إلى: Patient.Information@leicspart.nhs.uk

Bengali

যদি এই তথ্য অন্য কোন ভাষায় বা ফরমেটে আপনার দরকার হয় তাহলে দয়া করে 0116 295 0903 নম্বরে ফোন করুন বা Patient.Information@leicspart.nhs.uk ঠিকানায় ই-মেইল করুন।

Traditional Chinese

如果您需要將本資訊翻譯為其他語言或用其他格式顯示，請致電 0116 295 0903 或發電子郵件至：Patient.Information@leicspart.nhs.uk

Gujarati

જો તમારે આ માહિતી અન્ય ભાષા અથવા ફોર્મેટમાં જોઇતી હોય તો 0116 295 0903 પર ટેલિફોન કરો અથવા Patient.Information@leicspart.nhs.uk પર ઇમેઇલ કરો.

Hindi

अगर आप यह जानकारी किसी अन्य भाषा या प्रारूप में चाहते हैं तो कृपया 0116 295 0903 पर हमें फोन करें या Patient.Information@leicspart.nhs.uk पर हमें ईमेल करें

Polish

Jeżeli są Państwo zainteresowani otrzymaniem niniejszych informacji w innym języku lub formacie, prosimy skontaktować się z nami telefonicznie pod numerem 0116 295 0903 lub za pośrednictwem poczty elektronicznej na adres: Patient.Information@leicspart.nhs.uk

Punjabi

ਜੇ ਤੁਹਾਨੂੰ ਇਹ ਜਾਣਕਾਰੀ ਕਿਸੇ ਹੋਰ ਭਾਸ਼ਾ ਜਾਂ ਫਾਰਮੈਟ ਵਿਚ ਚਾਹੀਦੀ ਹੈ ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ 0116 295 0903 ਤੇ ਟੈਲੀਫ਼ੋਨ ਕਰੋ ਜਾਂ ਇੱਥੇ ਈਮੇਲ ਕਰੋ: Patient.Information@leicspart.nhs.uk

Somali

Haddii aad rabto in aad warbixintan ku hesho luqad ama nuskhad kale fadlan soo wac lambarka 0116 295 0903 ama email u dir: Patient.Information@leicspart.nhs.uk

Urdu

اگرآپ کو یہ معلومات کسی اور زبان یا صورت میں درکار ہوں تو براہ کرم اس ٹیلی فون نمبر 0116 295 0903 یا ای میل پر رابطہ کریں Patient.Information@leicspart.nhs.uk