

# Lay It On Thick

Ayotunde Ayobello, MD



I came across my first clinical case of peripartum depression during adult psychiatry training. I was struck by the debilitating nature of the illness and quickly recognized the immediate impact it had on my patient. As I went on to fellowship training, I recognized, in a way I hadn't before, the far-reaching, generational impact of the condition. I was sobered by its lasting effects on children – and energized by opportunities to intervene and make a difference in their lives.

I am a trainee in child and adolescent psychiatry and a self-taught oil painter whose work focuses on the intersection of art and mental health. My background provides me with an opportunity to view peripartum depression from a unique perspective. As I worked on the portrait of a pregnant woman with depression, I made connections between the process of painting and that of attachment. I learned early on in my painting apprenticeship about the “thick over thin” rule: straight out the bottle, oil paint is pigment particles dispersed

in a binder, usually linseed oil. By applying paint with a higher oil-to-pigment ratio (“thick”) over paint with a lower ratio (“thin”), paint *bonds* and *attaches* to the canvas. The reason for this graduated approach is that drying times vary between thick and thin paints. Thinner layers dry faster than thicker ones. If this fundamental rule is not adhered to, it can lead to “cracking” of the painting as it ages.

In similar fashion, I recognized that a solid emotional base serves as the foundation for subsequent layers of trust, regulation and frustration tolerance. One out of 7 women experience peripartum depression and face an uphill battle to provide a stable base for attachment. Left unaddressed, this can lead to the kind of “psychological cracking” that can bring children and families to our clinical attention years later. As child and adolescent psychiatrists, we must recognize and be attentive to the impact of peripartum depression: not just on affected parents, but on the future of their at-risk children.

## About the Author

**Ayotunde Ayobello, MD**, is a second-year child and adolescent psychiatry fellow at Yale University, Child Study Center, New Haven, Connecticut. He has developed interests in gender-affirming health care and medical humanities, particularly the intersection of visual arts and psychiatry.

**Disclosure:** Dr. Ayobello has reported no biomedical financial interests or potential conflicts of interest..

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