

# Edinburgh Postnatal Depression Scale (EPDS)

Patient Label

Mother's OB or Doctor's Name:

Doctor's Phone #: \_\_\_\_\_

Since you are either pregnant or have recently had a baby, we want to know how you feel. Please place a **CHECK MARK (✓)** on the blank by the answer that comes closest to how you have felt **IN THE PAST 7 DAYS**—*not just how you feel today*. Complete all 10 items and find your score by adding each number that appears in parentheses (#) by your checked answer. This is a screening test; not a medical diagnosis. If something doesn't seem right, *call your health care provider regardless of your score*.

*Below is an example already completed.*

I have felt happy:  
 Yes, all of the time \_\_\_\_\_ (0)  
 Yes, most of the time  (1)  
 No, not very often \_\_\_\_\_ (2)  
 No, not at all \_\_\_\_\_ (3)

*This would mean: "I have felt happy most of the time" in the past week. Please complete the other questions in the same way.*

1. I have been able to laugh and see the funny side of things:  
 As much as I always could \_\_\_\_\_ (0)  
 Not quite so much now \_\_\_\_\_ (1)  
 Definitely not so much now \_\_\_\_\_ (2)  
 Not at all \_\_\_\_\_ (3)
2. I have looked forward with enjoyment to things:  
 As much as I ever did \_\_\_\_\_ (0)  
 Rather less than I used to \_\_\_\_\_ (1)  
 Definitely less than I used to \_\_\_\_\_ (2)  
 Hardly at all \_\_\_\_\_ (3)
3. I have blamed myself unnecessarily when things went wrong:  
 Yes, most of the time \_\_\_\_\_ (3)  
 Yes, some of the time \_\_\_\_\_ (2)  
 Not very often \_\_\_\_\_ (1)  
 No, never \_\_\_\_\_ (0)
4. I have been anxious or worried for no good reason:  
 No, not at all \_\_\_\_\_ (0)  
 Hardly ever \_\_\_\_\_ (1)  
 Yes, sometimes \_\_\_\_\_ (2)  
 Yes, very often \_\_\_\_\_ (3)
5. I have felt scared or panicky for no good reason:  
 Yes, quite a lot \_\_\_\_\_ (3)  
 Yes, sometimes \_\_\_\_\_ (2)  
 No, not much \_\_\_\_\_ (1)  
 No, not at all \_\_\_\_\_ (0)
6. Things have been getting to me:  
 Yes, most of the time I haven't been able to cope at all \_\_\_\_\_ (3)  
 Yes, sometimes I haven't been coping as well as usual \_\_\_\_\_ (2)  
 No, most of the time I have coped quite well \_\_\_\_\_ (1)  
 No, I have been coping as well as ever \_\_\_\_\_ (0)

7. I have been so unhappy that I have had difficulty sleeping:  
 Yes, most of the time \_\_\_\_\_ (3)  
 Yes, sometimes \_\_\_\_\_ (2)  
 No, not very often \_\_\_\_\_ (1)  
 No, not at all \_\_\_\_\_ (0)
8. I have felt sad or miserable:  
 Yes, most of the time \_\_\_\_\_ (3)  
 Yes, quite often \_\_\_\_\_ (2)  
 Not very often \_\_\_\_\_ (1)  
 No, not at all \_\_\_\_\_ (0)
9. I have been so unhappy that I have been crying:  
 Yes, most of the time \_\_\_\_\_ (3)  
 Yes, quite often \_\_\_\_\_ (2)  
 Only occasionally \_\_\_\_\_ (1)  
 No, never \_\_\_\_\_ (0)
10. The thought of harming myself has occurred to me: \*  
 Yes, quite often \_\_\_\_\_ (3)  
 Sometimes \_\_\_\_\_ (2)  
 Hardly ever \_\_\_\_\_ (1)  
 Never \_\_\_\_\_ (0)

**TOTAL YOUR SCORE HERE ▶**

Thank you for completing this survey. Your doctor will score this survey and discuss the results with you.

Verbal consent to contact above mentioned MD witnessed by:

# Edinburgh Postnatal Depression Scale (EPDS) Scoring & Other Information

## ABOUT THE EPDS

Studies show that postpartum depression (PPD) affects at least 10 percent of women and that many depressed mothers do not get proper treatment. These mothers might cope with their baby and with household tasks, but their enjoyment of life is seriously affected, and it is possible that there are long term effects on the family.

The Edinburgh Postnatal Depression Scale (EPDS) was developed to assist health professionals in detecting mothers suffering from PPD; a distressing disorder more prolonged than the “blues” (which can occur in the first week after delivery).

The scale consists of 10 short statements. A mother checks off one of four possible answers that is closest to how she has felt during the past week. Most mothers easily complete the scale in less than five minutes.

Responses are scored 0, 1, 2 and 3 based on the seriousness of the symptom. Items 3, 5 to 10 are reverse scored (i.e., 3, 2, 1, and 0). The total score is found by adding together the scores for each of the 10 items.

Mothers scoring above 12 or 13 are likely to be suffering from depression and should seek medical attention. A careful clinical evaluation by a health care professional is needed to confirm a diagnosis and establish a treatment plan. The scale indicates how the mother felt during the previous week, and it may be useful to repeat the scale after two weeks.

## INSTRUCTIONS FOR USERS

1. The mother checks off the response that comes closest to how she has felt during the previous seven days.
2. All 10 items must be completed.
3. Care should be taken to avoid the possibility of the mother discussing her answers with others.
4. The mother should complete the scale herself, unless she has limited English or reading difficulties.
5. The scale can be used at six to eight weeks after birth or during pregnancy.

*Please note:* Users may reproduce this scale without further permission providing they respect the copyright (which remains with the *British Journal of Psychiatry*), quote the names of the authors and include the title and the source of the paper in all reproduced copies. Cox, J.L., Holden, J.M. and Sagovsky, R. (1987). Detection of postnatal depression: Development of the 10-item Edinburgh Postnatal Depression Scale. *British Journal of Psychiatry*, 150, 782-786.

## Escala Edinburgh para la Depresión Postnatal (Spanish Version)

Patient Label

OB de la madre o el nombre del médico

Número de teléfono del médico

Como usted está embarazada o hace poco que tuvo un bebé, nos gustaría saber como se siente actualmente. Por favor MARQUE (✓) la respuesta que más se acerca a como se ha sentido durante LOS ÚLTIMOS 7 DÍAS y no sólo como se ha sentido hoy.

*A continuación se muestra un ejemplo completado:*

Me he sentido feliz:

Sí, todo el tiempo \_\_\_\_\_ 0

Sí, la mayor parte del tiempo  1

No, no muy a menudo \_\_\_\_\_ 2

No, en absoluto \_\_\_\_\_ 3

*Esto significa: "Me he sentido feliz la mayor parte del tiempo" durante la última semana. Por favor complete las otras preguntas de la misma manera.*

1. He podido reír y ver el lado bueno de las cosas:
- Tanto como siempre he podido hacerlo \_\_\_\_\_ 0
- No tanto ahora \_\_\_\_\_ 1
- Sin duda, mucho menos ahora \_\_\_\_\_ 2
- No, en absoluto \_\_\_\_\_ 3

2. He mirado al futuro con placer para hacer cosas:
- Tanto como siempre \_\_\_\_\_ 0
- Algo menos de lo que solía hacerlo \_\_\_\_\_ 1
- Definitivamente menos de lo que solía hacerlo \_\_\_\_\_ 2
- Prácticamente nunca \_\_\_\_\_ 3

3. Me he culpado sin necesidad cuando las cosas marchaban mal:
- Sí, casi siempre \_\_\_\_\_ 3
- Sí, algunas veces \_\_\_\_\_ 2
- No muy a menudo \_\_\_\_\_ 1
- No, nunca \_\_\_\_\_ 0

4. He estado ansiosa y preocupada sin motivo alguno:
- No, en absoluto \_\_\_\_\_ 0
- Casi nada \_\_\_\_\_ 1
- Sí, a veces \_\_\_\_\_ 2
- Sí, muy a menudo \_\_\_\_\_ 3

5. He sentido miedo o pánico sin motivo alguno:
- Sí, bastante \_\_\_\_\_ 3
- Sí, a veces \_\_\_\_\_ 2
- No, no mucho \_\_\_\_\_ 1
- No, en absoluto \_\_\_\_\_ 0

6. Las cosas me oprimen o agobian:
- Sí, la mayor parte del tiempo no he podido sobrellevarlas \_\_\_\_\_ 3
- Sí, a veces no he podido sobrellevarlas de la manera \_\_\_\_\_ 2
- No, la mayoría de las veces he podido sobrellevarlas bastante bien \_\_\_\_\_ 1
- No, he podido sobrellevarlas tan bien como lo hecho siempre \_\_\_\_\_ 0

7. Me he sentido tan infeliz, que he tenido dificultad para dormir:
- Sí, casi siempre \_\_\_\_\_ 3
- Sí, a veces \_\_\_\_\_ 2
- No muy a menudo \_\_\_\_\_ 1
- No, en absoluto \_\_\_\_\_ 0

8. Me he sentido triste y desgraciada:
- Sí, casi siempre \_\_\_\_\_ 3
- Sí, bastante a menudo \_\_\_\_\_ 2
- No muy a menudo \_\_\_\_\_ 1
- No, en absoluto \_\_\_\_\_ 0

9. Me he sentido tan infeliz que he estado llorando:
- Sí, casi siempre \_\_\_\_\_ 3
- Sí, bastante a menudo \_\_\_\_\_ 2
- Ocasionalmente \_\_\_\_\_ 1
- No, nunca \_\_\_\_\_ 0

10. He pensado en hacerme daño:
- Sí, bastante a menudo \_\_\_\_\_ 3
- A veces \_\_\_\_\_ 2
- Casi nunca \_\_\_\_\_ 1
- No, nunca \_\_\_\_\_ 0

Total Score: \_\_\_\_\_

Consentimiento verbal para contacto arriba mencionado MD presenciada por:

\_\_\_\_\_

# Edinburgh Postnatal Depression Scale (EPDS) Scoring & Other Information

## ABOUT THE EPDS

Response categories are scored 0, 1, 2 and 3 according to increased severity of the symptom. Items 3, 5-10 are reverse scored (i.e., 3, 2, 1, and 0). The total score is calculated by adding together the scores for each of the ten items. Users may reproduce the scale without further permission providing they respect copyright (which remains with the *British Journal of Psychiatry*) quoting the names of the authors, the title and the source of the paper in all reproduced copies.

The Edinburgh Postnatal Depression Scale (EPDS) was developed to assist primary care health professionals in detecting mothers suffering from postpartum depression (PPD); a distressing disorder more prolonged than the “blues” (which occur in the first week after delivery), but less severe than puerperal psychosis.

Previous studies have shown that PPD affects at least 10 percent of women and that many depressed mothers remain untreated. These mothers may cope with their baby and with household tasks, but their enjoyment of life is seriously affected and it is possible that there are long term effects on the family.

The EPDS was developed at health centers in Livingston and Edinburgh. It consists of 10 short statements. The mother underlines which of the four possible responses is closest to how she has been

feeling during the past week. Most mothers complete the scale without difficulty in less than five minutes.

The validation study showed that mothers who scored above a threshold 12/13 were likely to be suffering from a depressive illness of varying severity. Nevertheless, the EPDS score should not override clinical judgement. A careful clinical assessment should be carried out to confirm the diagnosis. The scale indicates how the mother felt during the previous week, and in doubtful cases it may be usefully repeated after two weeks. The scale will not detect mothers with anxiety neuroses, phobias or personality disorders.

## INSTRUCTIONS FOR USERS

1. The mother is asked to underline the response that comes closest to how she has felt during the previous seven days.
2. All 10 items must be completed.
3. Care should be taken to avoid the possibility of the mother discussing her answers with others.
4. The mother should complete the scale herself, unless she has limited English or has difficulty with reading.
5. The EPDS may be used at six to eight weeks to screen postnatal women or during pregnancy. The child health clinic, postpartum check-up or a home visit may provide suitable opportunities for its completion.