

Edinburgh Postnatal Depression Scale¹

The Edinburgh Postnatal Depression Scale (EPDS) has been developed to assist primary care health professionals to detect mothers suffering from postnatal depression; 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 postnatal depression affects at least 10% 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 ten 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 of 12/13 were likely to be suffering from a depressive illness of varying severity. Nevertheless, the EPDS score should *not* override clinical judgment. A careful clinical assessment should be carried out to confirm the diagnosis. The scale indicates how the mother has 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.

1. The mother is asked to underline the response which comes closest to how she has been feeling in the previous 7 days.

2. All ten 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 6-8 weeks to screen postnatal women. The child health clinic, postnatal check-up or a home visit may provide suitable opportunities for its completion.

Scoring

Response categories are scored 0, 1, 2, and 3 according to increased severity of the symptom. Items marked with an asterisk 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.

Instructions for users

¹ Reprinted with permission from: Cox, J.L., Holder, J.M., & Sagovsky, R. (1987). Detection of postnatal depression: Development of the 10-item Edinburgh Postnatal Depression Scale. *British Journal of Psychiatry*, 150, 782-786.

EPDS

As you have recently had a baby, we would like to know how you are feeling. Please UNDERLINE the answer which comes closest to how you have felt **IN THE PAST 7 DAYS**, not just how you feel today.

Here is an example already completed.

I have felt happy:

Yes, all the time

Yes, most of the time

No, not very often

No, not at all

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

In the past 7 days:

1. I have been able to laugh and see the funny side of things:

As much as I always have

Not quite so much now

Definitely not so much now

Not at all

2. I have looked forward with enjoyment to things:

As much as I ever did

Somewhat less than I used to

Definitely less than I used to

Hardly at all

*3. I have blamed myself unnecessarily when things went wrong:

Yes, most of the time

Yes, some of the time

Not very often

No, never

4. I have been anxious or worried for no good reason:

No, not at all

Hardly ever

Yes, sometimes

Yes, very often

*5. I have felt scared or panicky for no very good reason:

Yes, quite a lot

Yes, sometimes

No, not much

No, not at all

*6. Things have been getting on top of me:

Yes, most of the time I haven't been able to cope at all

Yes, sometimes I haven't been coping as well as usual

No, I have been coping as well as ever

No, most of the time I have coped quite well

*7. I have been so unhappy that I have had difficulty sleeping:

Yes, most of the time

Yes, sometimes

Not very often

No, not at all

*8. I have felt sad or miserable:

Yes, most of the time

Yes, quite often

Not very often

No, not at all

*9. I have been so unhappy that I have been crying:

Yes, most of the time

Yes, quite often

Only occasionally

No, never

*10. The thought of harming myself has occurred to me:

Yes, quite often

Sometimes

Hardly ever

Never