The Edinburgh Postnatal Depression Scale (EPDS)* is a screening questionnaire that can indicate whether a new mother has symptoms that are commonly seen in women with Depression during pregnancy and in the year following the birth of a child. The EPDS was developed to assist primary care health professionals in detecting mothers suffering from Postpartum Depression, a distressing disorder more prolonged than the "baby blues," which occurs in the first week after delivery, and resolves within two to three weeks postpartum. Previous studies have shown that Postpartum Depression affects as many as 20% of new mothers, and that many depressed mothers remain untreated. These mothers may find ways to cope with parenting their baby and other household tasks, but their enjoyment of life is seriously affected, and it is very possible that untreated postpartum mood disturbances can have long-term impacts on the entire family.

In this 10-item screening scale, the mother chooses which of the 4 possible responses is closest to how she has been feeling during the past week. All 10 items must be completed, and it is important that the mother not discuss her responses with anyone until she has completed all of the items. Most women complete the scale without difficulty in less than 5 minutes. The EPDS has a high rate of reliability; nevertheless, it should not override professional clinical judgment. A careful assessment by a skilled clinician familiar with Postpartum Mood Disorders should be carried out to confirm a diagnosis and facilitate connection with appropriate treatment resources.

* The Edinburgh Postnatal Depression Scale (EPDS) (J.L. Cox, J.M. Holden, & R. Sagovsky; Department of Psychiatry, University of Edinburgh)
Name _______________________________________                     Today’s Date ______________

( ) Pregnancy  ( ) Pregnancy loss  ( ) Postpartum __________ days/weeks/months

Please circle the answer which comes closest to how you have felt in the **past 7 days**.

1. I have been able to laugh and see the funny side of things.
   - 0 As much as I always could
   - 1 Not quite so much now
   - 2 Not so much now
   - 3 Not at all

2. I have looked forward with enjoyment to things.
   - 0 As much as I ever did
   - 1 Somewhat less than I used to
   - 2 A lot less than I used to
   - 3 Hardly at all

3. I have blamed myself unnecessarily when things went wrong.
   - 0 No, not at all
   - 1 Hardly ever
   - 2 Yes, sometimes
   - 3 Yes, very often

4. I have been anxious or worried for no good reason.
   - 0 No, not much
   - 1 No, not at all
   - 2 Yes, sometimes
   - 3 Yes, often

5. I have felt scared or panicky for no good reason.
   - 0 No, not at all
   - 1 No, not much
   - 2 Yes, sometimes
   - 3 Yes, often

6. Things have been too much for me.
   - 0 No, I have been coping as well as ever
   - 1 Not so much now
   - 2 Not quite so much now
   - 3 As much as I always could

7. I have been so unhappy that I have had difficulty sleeping.
   - 0 No, not at all
   - 1 Not very often
   - 2 Yes, sometimes
   - 3 A lot less than I used to

8. I have felt sad or miserable.
   - 0 No, not at all
   - 1 Only occasionally
   - 2 Yes, quite often
   - 3 Yes, very often

9. I have been so unhappy that I have been crying.
   - 0 No, never
   - 1 Only occasionally
   - 2 Yes, quite often
   - 3 Yes, often

10. The thought of harming myself has occurred to me.
    - 0 Never
    - 1 Hardly ever
    - 2 Sometimes
    - 3 Yes, quite often

**Total Score: ______________**

( ) Initial screening  ( ) Follow-up screening
Scoring

The total score is calculated by adding together the numbers you selected for each of the 10 items. A score of 10 may require a repeat assessment, as symptoms of Depression may be present. A score of 12 indicates that Depression is likely, and further assessment by a trained healthcare provider is recommended. **If any number other than “0” is circled for item number 10, further assessment is required right away. Please contact your healthcare provider immediately.**

The EPDS is a screening tool and should not override clinical judgment. A comprehensive clinical assessment by a professional skilled in working with Postpartum Mood Disorders should confirm the diagnosis.

References