EDINBURGH POSTNATAL DEPRESSION SCALE (EPDS) GUIDELINES

Postpartum depression (PPD) is one of the most common complications of the postpartum period. PPD affects up to 20% of postnatal women and up to 10% of pregnant women. Recent studies have shown that approximately 48% of adolescents develop postpartum depression.

Postpartum depression often goes undetected by health care providers, as it can sometimes be difficult to distinguish between normal postpartum adjustment and postpartum depression (Clay and Seehusen, 2004). A woman may also be reluctant to share her signs and symptoms, due to fear of being stigmatized.

Routine screening using the EPDS, a validated tool, assists in early detection and identification of those at risk or suffering from PPD. The EPDS is a quick, self completed, 10 item questionnaire that indicates if there is a need for further assessment and/or intervention.

Instructions for use:

- 1. Ask the mother to **underline/circle the response** that comes closest to how she has been feeling in the previous 7 days.
- 2. Ask the mother to complete all ten items.
- 3. Try to avoid the possibility of the mother discussing her answers with others, as this has been found to influence the results.
- 4. Whenever possible, the mother should complete the scale herself, unless she has limited English or has difficulty reading.

Scoring:

- Response categories are scored 0, 1, 2, and 3 according to increased severity of the symptom.
- All items except 1, 2 & 4 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.
- Any positive answer to item 10 indicates need for further assessment
- Validation studies have shown that mothers who scored above 12 were likely to be suffering from a depressive illness of varying severity. A careful clinical assessment should be completed by a physician to confirm the diagnosis.
- The EPDS may be administered anytime prenatally or postnatally and may be re-administered in doubtful cases

References:

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