

# Edinburgh Postnatal Depression Scale<sup>1</sup> (EPDS)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Your Date of Birth: \_\_\_\_\_

\_\_\_\_\_

Baby's Date of Birth: \_\_\_\_\_

Phone: \_\_\_\_\_

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As you are pregnant or have recently had a baby, we would like to know how you are feeling. Please check the answer that 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:

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| <p>1. I have been able to laugh and see the funny side of things<br/>As much as I always could<br/>Not quite so much now<br/>Definitely not so much now<br/>Not at all</p> <p>2. I have looked forward with enjoyment to things<br/>As much as I ever did<br/>Rather less than I used to<br/>Definitely less than I used to<br/>Hardly at all</p> <p>*3. I have blamed myself unnecessarily when things went wrong<br/>Yes, most of the time<br/>Yes, some of the time<br/>Not very often<br/>No, never</p> <p>4. I have been anxious or worried for no good reason<br/>No, not at all<br/>Hardly ever<br/>Yes, sometimes<br/>Yes, very often</p> <p>*5. I have felt scared or panicky for no very good reason<br/>Yes, quite a lot<br/>Yes, sometimes<br/>No, not much<br/>No, not at all</p> | <p>*6. Things have been getting on top of me<br/>Yes, most of the time I haven't been able to cope at all<br/>Yes, sometimes I haven't been coping as well as usual<br/>No, most of the time I have coped quite well<br/>No, I have been coping as well as ever</p> <p>*7. I have been so unhappy that I have had difficulty sleeping<br/>Yes, most of the time<br/>Yes, sometimes<br/>Not very often<br/>No, not at all</p> <p>*8. I have felt sad or miserable<br/>Yes, most of the time<br/>Yes, quite often<br/>Not very often<br/>No, not at all</p> <p>*9. I have been so unhappy that I have been crying<br/>Yes, most of the time<br/>Yes, quite often<br/>Only occasionally<br/>No, never</p> <p>*10. The thought of harming myself has occurred to me<br/>Yes, quite often<br/>Sometimes<br/>Hardly ever<br/>Never</p> |
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Administered/Reviewed by \_\_\_\_\_ Date \_\_\_\_\_

<sup>1</sup>Source: 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 .

<sup>2</sup>Source: K. L. Wisner, B. L. Parry, C. M. Piontek, Postpartum Depression N Engl J Med vol. 347, No 3, July 18, 2002, 194-199

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