

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

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

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

Delivery date or estimated due date: \_\_\_\_\_

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 of the time \_\_\_\_\_(0)

Yes, most of the time x (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.*

**In the past 7 days:**

**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 Score

<sup>1</sup> Edinburgh Postnatal Depression Scale (EPDS). Adapted from the *British Journal of Psychiatry*, June, 1987, vol. 150 by J.L. Cox, J.M. Holden, R. Segovsky