

Edinburgh Postnatal Depression Scale (EPDS)

Name: _____ Date: _____

We would like to know how you have been feeling in the past week so we can better support you.

Please check the response under each statement that best describes how you have been feeling **over the past 7 days**, not just how you feel today.

Example

I have felt happy:

- Yes, most of the time
- Yes, some of the time**
- No, not very often
- No, not at all

This would mean: "I have felt happy some of the time during the past week".

In the past 7 days:	
<p>1. I have been able to laugh and see the funny side of things: As much as I always could Not quite so much now Definitely not so much now Not at all</p>	<p>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, most of the time I have coped quite well No, I have been coping as well as ever</p>
<p>2. I have looked forward with enjoyment to things: As much as I ever did Rather less than I used to Definitely less than I used to Hardly at all</p>	<p>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</p>
<p>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</p>	<p>8. I have felt sad or miserable: Yes, most of the time Yes, quite often Not very often No, not at all</p>
<p>4. I have been anxious or worried for no good reason: No, not at all Hardly ever Yes, sometimes Yes, very often</p>	<p>9. I have been so unhappy that I have been crying: Yes, most of the time Yes, quite often Only occasionally No, never</p>
<p>5. I have felt scared or panicky for no good reason: Yes, quite a lot Yes, sometimes No, not much No, not at all</p>	<p>10. The thought of harming myself has occurred to me: Yes, quite often Sometimes Hardly ever Never</p>
<p>Total Score <input style="width: 50px; height: 30px; border: 1px solid black;" type="text"/></p>	

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