

# Edinburgh Postnatal Depression Scale

## Escala Edinburgo para la Depresión Postnatal



Patient Name

DOB

Mother's Name

**In the past 7 days (Durante los últimos 7 días) :**

- |   |   |
|---|---|
| 1. I have been able to laugh and see the funny side of things<br>(He podido reír y ver el lado bueno de las cosas)                  | <input type="checkbox"/> As much as I always could (Tanto como siempre)<br><input type="checkbox"/> Not quite so much now (No tanto ahora)<br><input type="checkbox"/> Definitely not so much now (Sin duda, mucho menos ahora)<br><input type="checkbox"/> Not at all (No, en absoluto)  |
| 2. I have looked forward with enjoyment to things<br>(He mirado al futuro con placer para hacer cosas)                              | <input type="checkbox"/> As much as I ever did (Tanto como siempre)<br><input type="checkbox"/> Rather less than I used to (Algo menos de lo que solía hacerlo)<br><input type="checkbox"/> Definitely less than I used to (Definitivamente menos de lo que solía hacerlo)<br><input type="checkbox"/> Hardly at all (Prácticamente nunca)  |
| 3*. I have blamed myself unnecessarily when things went wrong<br>(Me he culpado sin necesidad cuando las cosas marchaban mal)       | <input type="checkbox"/> Yes, most of the time (Si, casi siempre)<br><input type="checkbox"/> Yes, some of the time (Si, algunas veces)<br><input type="checkbox"/> Not very often (No muy a menudo)<br><input type="checkbox"/> No, never (No, nunca)  |
| 4. I have been anxious or worried for no good reason<br>(He estado ansiosa y preocupada sin motivo alguno)                          | <input type="checkbox"/> No, not at all (No, en absoluto)<br><input type="checkbox"/> Hardly ever (Casi nada)<br><input type="checkbox"/> Yes, sometimes (Si, a veces)<br><input type="checkbox"/> Yes, very often (Si, muy a menudo)   |
| 5*. I have felt scared or panicky for no very good reason<br>(He sentido miedo o pánico sin motivo alguno)                          | <input type="checkbox"/> Yes, quite a lot (Si, bastante)<br><input type="checkbox"/> Yes, sometimes (Si, a veces)<br><input type="checkbox"/> No, not much (No, no mucho)<br><input type="checkbox"/> No, not at all (No, en absoluto)  |
| 6*. Things have been getting on top of me<br>(Las cosas me oprimen o agobian)   | <input type="checkbox"/> Yes, most of the time I haven't been able to cope at all<br>(Si, la mayor parte del tiempo no he podido sobrellevarlas)<br><input type="checkbox"/> Yes, sometimes I haven't been coping as well as usual<br>(Si, a veces no he podido sobrellevarlas de la manera)<br><input type="checkbox"/> No, most of the time I've coped quite well<br>(No, la mayoría de las veces he podido sobrellevarlas bastante bien)<br><input type="checkbox"/> No, I have been coping as well as ever<br>(No, he podido sobrellevarlas tan bien como lo hecho siempre) |
| 7*. I have been so unhappy that I have had difficulty sleeping<br>(Me he sentido tan infeliz, que he tenido dificultad para dormir) | <input type="checkbox"/> Yes, most of the time (Si, casi siempre)<br><input type="checkbox"/> Yes, sometimes (Si, a veces)<br><input type="checkbox"/> Not very often (No muy a menudo)<br><input type="checkbox"/> No, not at all (No, en absoluto)  |
| 8*. I have felt sad or miserable<br>(Me he sentido triste y desgraciada)  | <input type="checkbox"/> Yes, most of the time (Si, casi siempre)<br><input type="checkbox"/> Yes, quite often (Si, bastante a menudo)<br><input type="checkbox"/> Not very often (No muy a menudo)<br><input type="checkbox"/> No, not at all (No, en absoluto)  |
| 9*. I have been so unhappy that I have been crying<br>(Me he sentido tan infeliz que he estado llorando)                            | <input type="checkbox"/> Yes, most of the time (Si, casi siempre)<br><input type="checkbox"/> Yes, quite often (Si, bastante a menudo)<br><input type="checkbox"/> Only occasionally (Ocasionalmente)<br><input type="checkbox"/> No, never (No, nunca)   |
| 10*. The thought of harming myself has occurred to me<br>(He pensado en hacerme dano)   | <input type="checkbox"/> Yes, quite often (Si, bastante a menudo)<br><input type="checkbox"/> Sometimes (A veces)<br><input type="checkbox"/> Hardly ever (Casi nunca)<br><input type="checkbox"/> Never (Nunca)  |

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Score:

Referral N/Y

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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.

Como usted esta embarazada o hace poco que tuvo un bebe, nos gustaria saber como se siente actualmente. Por favor marque la respuesta que mas se acerca a como se ha sentido durante LOS ULTIMOS 7 DIAS, y no solo como se ha sentido hoy. A continuacion se muestra un ejemplo completado.

I have felt happy  
(Me he sentido feliz)

- Yes, all the time (Si, todo el tiempo)
- Yes, most of the time (Si la mayor parte del tiempo)
- No, not very often (No, no muy a menudo)
- No, not at all (No, en absoluto)

This would mean: 'I have felt happy most of the time' during the past week. Please complete the other questions in the same way.  
Esto significa: 'Me he sentido feliz la mayor parte del tiempo' durante la ultima semana. Por favor complete las otras preguntas de la misma manera.

1. 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.

2. Source: Wisner, K.L., Parry, B.L., Piontek, C.M. 2002. Postpartum Depression. *New England Journal of Medicine* 347(3):194-199.

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