Practice Guidelines

ACOG Releases Recommendations on Screening for Perinatal Depression

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This series is coordinated by Sumi Sexton, MD, Associate Deputy Editor.

A collection of Practice Guidelines published in AFP is available at http:// www.aafp.org/afp/ practguide. Perinatal depression is one of the most common complications of pregnancy, affecting one in seven women. It includes minor and major depressive episodes occurring during pregnancy or the first 12 months after delivery. The American College of Obstetricians and Gynecologists (ACOG) has released recommendations on screening women for perinatal depression, with the purpose of increasing awareness of depression and lessening the effects it has on pregnant and postpartum women and their families.

Screening Recommendations

Patients should be screened for depression at least once during the perinatal period using a standardized screening tool. Validated tools include the Edinburgh Postnatal Depression Scale (http://www.fresno.ucsf. edu/pediatrics/downloads/edinburghscale. pdf) and the Patient Health Questionnaire 9 (http://www.integration.samhsa.gov/images/ res/PHQ%20-%20Questions.pdf), which consist of 10 or fewer items, take less than five minutes to complete, and are simple to score. More in-depth tools include the Postpartum Depression Screening Scale (http://www.postpartum.net/professionals/ professional-tools/) and the Beck Depression Inventory (http://www.beckinstitute.org/ beck-inventory-and-scales/), which have 20 or more questions and require more time to take and score.

Perinatal depression is often overlooked because symptoms, such as altered sleep and appetite patterns, are often attributed to normal behavior changes that occur during pregnancy and the postpartum period. It is important to ask the patient about her mood. Women who currently have, or have a history of, depression, anxiety, and mood disorders should be monitored closely. These women may require additional psychological or pharmacologic interventions.

Screening alone does not improve clinical outcomes. Physicians should provide appropriate follow-up for diagnosis and treatment, including initiating medical therapy and making referrals to behavioral health resources when indicated.

Guideline source: American College of Obstetricians and Gynecologists

Evidence rating system used? No

Literature search described? No

Guideline developed by participants without relevant financial ties to industry? Not reported

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Available at: http://www.acog.org/-/media/Committee-Opinions/Committee-on-Obstetric-Practice/co630.pdf?d mc=1&ts=20150717T0708172581

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