

# The Patient Health Questionnaire (PHQ-9)

NAME (PRINT) \_\_\_\_\_

DATE \_\_\_\_\_

Over the last 2 weeks, how often have you been bothered by any of the following problems? (Circle your answer. Please complete all 10 items.)	Not at all	Several days	More than half the days	Nearly every day
1 Little interest or pleasure in doing things	0	1	2	3
2 Feeling down, depressed, or hopeless	0	1	2	3
3 Trouble falling or staying asleep, or sleeping too much	0	1	2	3
4 Feeling tired or having little energy	0	1	2	3
5 Poor appetite or overeating	0	1	2	3
6 Feeling bad about yourself or that you are a failure or have let yourself or your family down	0	1	2	3
7 Trouble concentrating on things, such as reading the newspaper or watching television	0	1	2	3
8 Moving or speaking so slowly that other people could have noticed. Or the opposite: being so fidgety or restless that you have been moving around a lot more than usual	0	1	2	3
9 Thoughts that you would be better off dead, or of hurting yourself	0	1	2	3

**FOR HEALTHCARE PROFESSIONALS ONLY**

COLUMN TOTALS      \_\_\_\_\_ + \_\_\_\_\_ + \_\_\_\_\_  
 TOTAL SCORE      \_\_\_\_\_

10 If you circled any problems, how difficult have these problems made it for you to do your work, take care of things at home, or get along with other people?

Not difficult at all       Very difficult  
 Somewhat difficult       Extremely difficult

# ABOUT POSTPARTUM DEPRESSION



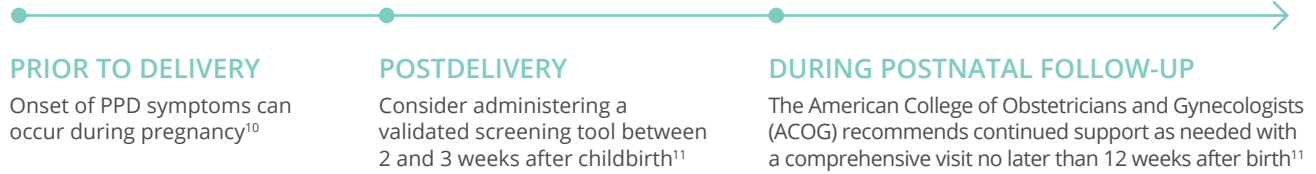
It is estimated that postpartum depression (PPD) affects approximately **1 in 9** new mothers in the US annually.<sup>1</sup>



Unaddressed PPD can have harmful, long-term effects on mothers, their babies, and their family members.<sup>2-9</sup>

## BE PREPARED

Consider screening your patients at multiple time points:



The American Academy of Pediatrics recommends integrating PPD screening and surveillance at the 1-, 2-, 4-, and 6-month well-child visits.<sup>12,13</sup>

**If PPD is not addressed, symptoms may persist for months or up to a year.<sup>2,14,15</sup>**

## ABOUT THE PHQ-9 AND INSTRUCTIONS FOR USE



The Patient Health Questionnaire (PHQ-9) is a simple-to-administer, effective screening tool specifically designed to assess symptoms of major depressive disorder, but commonly used to assess symptoms of PPD. Clinicians can quickly score the PHQ-9 once the patient has completed its **9 questions**. Administering the PHQ-9 repeatedly allows for assessment of improvement or worsening of depression in response to treatment.

### SCORING<sup>16</sup>

Count the number (#) of boxes circled in a column. Multiply that number by the value indicated below, then add the subtotal to produce a total score. The possible range is 0–27. Use the table below to interpret the PHQ-9 score.

Not at all	(#) ____ x 0 = ____	More than half the days	(#) ____ x 2 = ____	
Several days	(#) ____ x 1 = ____	Nearly every day	(#) ____ x 3 = ____	Total score: ____

### INTERPRETING PHQ-9 SCORES<sup>16</sup>

DIAGNOSIS	TOTAL SCORE	FOR SCORE	ACTION
Minimal Depression	0–4	≤4	The score suggests the patient may not need treatment for depression.
Mild Depression	5–9	5–14	Physician uses clinical judgment about treatment, based on patient’s duration of symptoms and functional impairment.
Moderate Depression	10–14		
Moderately Severe Depression	15–19	>14	Warrants treatment for depression, using antidepressant, psychotherapy, and/or a combination of treatment.
Severe Depression	20–27		

### Any woman answering the self-harm question affirmatively should be referred to a psychiatrist immediately.<sup>17</sup>

**References:** 1. Ko JY, Rockhill KM, Tong VT, Morrow B, Farr SL. Trends in postpartum depressive symptoms – 27 states, 2004, 2008, and 2012. *MMWR Morb Mortal Wkly Rep.* 2017;66(6):153-158. 2. Netsi E, Pearson RM, Murray L, Cooper P, Craske MG, Stein A. Association of persistent and severe postnatal depression with child outcomes. *JAMA Psychiatry.* 2018;75(3):247-253. 3. Goodman JH. Paternal postpartum depression, its relationship to maternal postpartum depression, and implications for family health. *J Adv Nurs.* 2004;45(1):26-35. 4. Matthey S, Barnett B, Ungerer J, Waters B. Paternal and maternal depressed mood during the transition to parenthood. *J Affect Disord.* 2000;60(2):75-85. 5. Postmontier B. Functional status outcomes in mothers with and without postpartum depression. *J Midwifery Womens Health.* 2008;53(4):310-318. 6. Barkin JL, Wisner KL, Bromberger JT, Beach SR, Wisniewski SR. Factors associated with postpartum maternal functioning in women with positive screens for depression. *J Womens Health (Larchmt).* 2016;25(7):707-713. 7. Da Costa D, Dritsa M, Rippen N, Lowensteyn I, Khalife S. Health-related quality of life in postpartum depressed women. *Arch Womens Ment Health.* 2006;9(2):95-102. 8. Kerstis B, Aarts C, Tillman C, et al. Association between parental depressive symptoms and impaired bonding with the infant. *Arch Womens Ment Health.* 2016;19(1):87-94. 9. Lilja G, Edhborg M, Nissen E. Depressive mood in women at childbirth predicts their mood and relationship with infant and partner during the first year postpartum. *Scand J Caring Sci.* 2012;26:245-253. 10. Screening for Perinatal Depression. ACOG Committee Opinion No. 757. American College of Obstetricians and Gynecologists. *Obstet Gynecol.* 2018;132:e208-212. 11. Optimizing Postpartum Care. ACOG Committee Opinion No. 736. American College of Obstetricians and Gynecologists. *Obstet Gynecol.* 2018;131:e140-150. 12. Screening Recommendations. American Academy of Pediatrics website. <https://www.aap.org/en-us/advocacy-and-policy/aap-health-initiatives/Screening/Pages/Screening-Recommendations.aspx>. Accessed May 24, 2018. 13. Earls MF; Committee on Psychosocial Aspects of Child and Family Health American Academy of Pediatrics. Incorporating recognition and management of perinatal and postpartum depression into pediatric practice. *Pediatrics.* 2010;126(5):1032-1039. 14. Vliegen N, Casalin S, Luyten P. The course of postpartum depression: a review of longitudinal studies. *Harv Rev Psychiatry.* 2014;22(1):1-22. 15. Mayberry LJ, Horowitz JA, Declercq E. Depression symptom prevalence and demographic risk factors among US women during the first 2 years postpartum. *J Obstet Gynecol Neonatal Nurs.* 2007;36(6):542-549. 16. University of Michigan Health Services. Guidelines for clinical care: depression. 2016. <http://www.med.umich.edu/1info/FHP/practiceguides/depress/depression.pdf>. Accessed August 9, 2018. 17. Moses-Kolko EL, Roth EK. Antepartum and postpartum depression: healthy mom, healthy baby. *J Am Med Womens Assoc.* 2004;59(3):181-191.

