

P-1465 - EPDS BY TELEPHONE: WHAT CUTOFF POINT USE

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Background and aims: The EPDS (Edinburg Postpartum Depression Scale) is a scale widely used for postpartum depression screening. Its application has been made usually in face to face situation. Because of problems that may hamper the contact with patients, alternative strategies for its application have been used, such as telephone contact. This study aims to establish the cutoff point of EPDS which provides the best sensitivity and specificity rates for telephone use.

Methods: It is a cross-sectional study, using data collected from a cohort of women followed in the third trimester of pregnancy and in the postpartum period in Ribeirão Preto, SP, Brazil. EPDS was applied by telephone on 176 women, of whom 147 were interviewed face to face. The SCID (Strutured Clinical Diagnostic Interview for DSM-IV) data were correlated with the EPDS data, and sensitivity and specificity were calculated using ROC-curve.

Results: The diagnosis of major depressive episode was confirmed by the SCID in 77 participants. For EPDS values ≥ 10 the sensitivity rate was of 70.1%, specificity of 74.3%, positive predictive value of 75.0% and negative predictive value of 69.3%. With a EPDS cutoff point ≥ 12 , sensitivity was 55.8%, specificity was 84.3% and positive predictive value was 79.6%.

Conclusions: The cutoff point of 10 was more appropriate than the cutoff point of 12 when using EPDS by telephone, as a measure of population screening for postpartum depression.