



# THE PERISCOPE PROJECT

PERINATAL SPECIALTY CONSULT PSYCHIATRY EXTENSION

This toolkit was produced by the Medical College of Wisconsin and is provided to health care providers through The Periscope Project. The goal of this toolkit is to provide practitioners with an up-to-date, reliable, and easy to use source of information for mental health conditions during the perinatal period. The content is based on the latest available evidence-based guidelines and research whenever possible. If you are aware of new guidelines or research, or if you have suggestions that can help improve this toolkit, please contact [cwichman@mcw.edu](mailto:cwichman@mcw.edu). Please read our disclaimer before using our toolkit.

**This toolkit is for educational purposes only and does not constitute medical advice. The toolkit is not a replacement for careful medical judgments by qualified medical personnel. There may be information in the toolkit that does not apply to or may be inappropriate for the medical situation at hand.**

## GAD-7 EVALUATION AND TREATMENT ALGORITHM

## GENERAL ANXIETY DISORDER-7 (GAD-7)

Over the **last 2 weeks**, how often have you been bothered by the following problems (*circle*)?

	<i>Not at all</i>	<i>Some days</i>	<i>More than half the days</i>	<i>Nearly every day</i>
1. Feeling nervous, anxious or on edge	0	1	2	3
2. Not being able to stop or control worrying	0	1	2	3
3. Worrying too much about different things	0	1	2	3
4. Trouble relaxing	0	1	2	3
5. Being so restless that it is hard to sit still	0	1	2	3
6. Becoming easily annoyed or irritable	0	1	2	3
7. Feeling afraid as if something awful might happen	0	1	2	3
<b>Add scores from each column for total:</b> _____	= _____	+ _____	+ _____	+ _____

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

Not difficult at all	
Somewhat difficult	
Very difficult	
Extremely difficult	

*Adapted from Source:*

Spitzer RL, Kroenke K, Williams JBW, Lowe B. A brief measure of assessing generalized anxiety disorder. *Arch Intern Med.* 2006; 166: 1092-1097.

## OVERALL EVALUATION

**Complete PHQ-9 or EPDS. Complete PASS or GAD-7 if significant anxiety symptoms reported.**

- To score PHQ-9:
  - Sum total.
  - Score >10 is considered positive for moderate to severe depression.
- To score EPDS:
  - Questions 1, 2, & 4 (without an \*) are scored 0, 1, 2, or 3 (top answer = 0, bottom = 3).
  - Questions 3, 5-10 (with an \*) are reverse-scored (top answer = 3, bottom = 0).
  - Score of >10 is considered potentially positive.
- To score PASS:
  - Sum total.
  - Score >26 is considered positive.
- To score GAD-7:
  - Sum total.
  - Score >10 is considered positive.

***Remember that a patient's score may not correlate with symptom severity.***

*\*Discussion points to consider...*

▣ **Counsel patient about antidepressant use.**

- No medication is risk-free; SSRIs are the best studied class of antidepressants in pregnancy and lactation.

▣ **Data shows that use of antidepressants in pregnancy may increase risk of:**

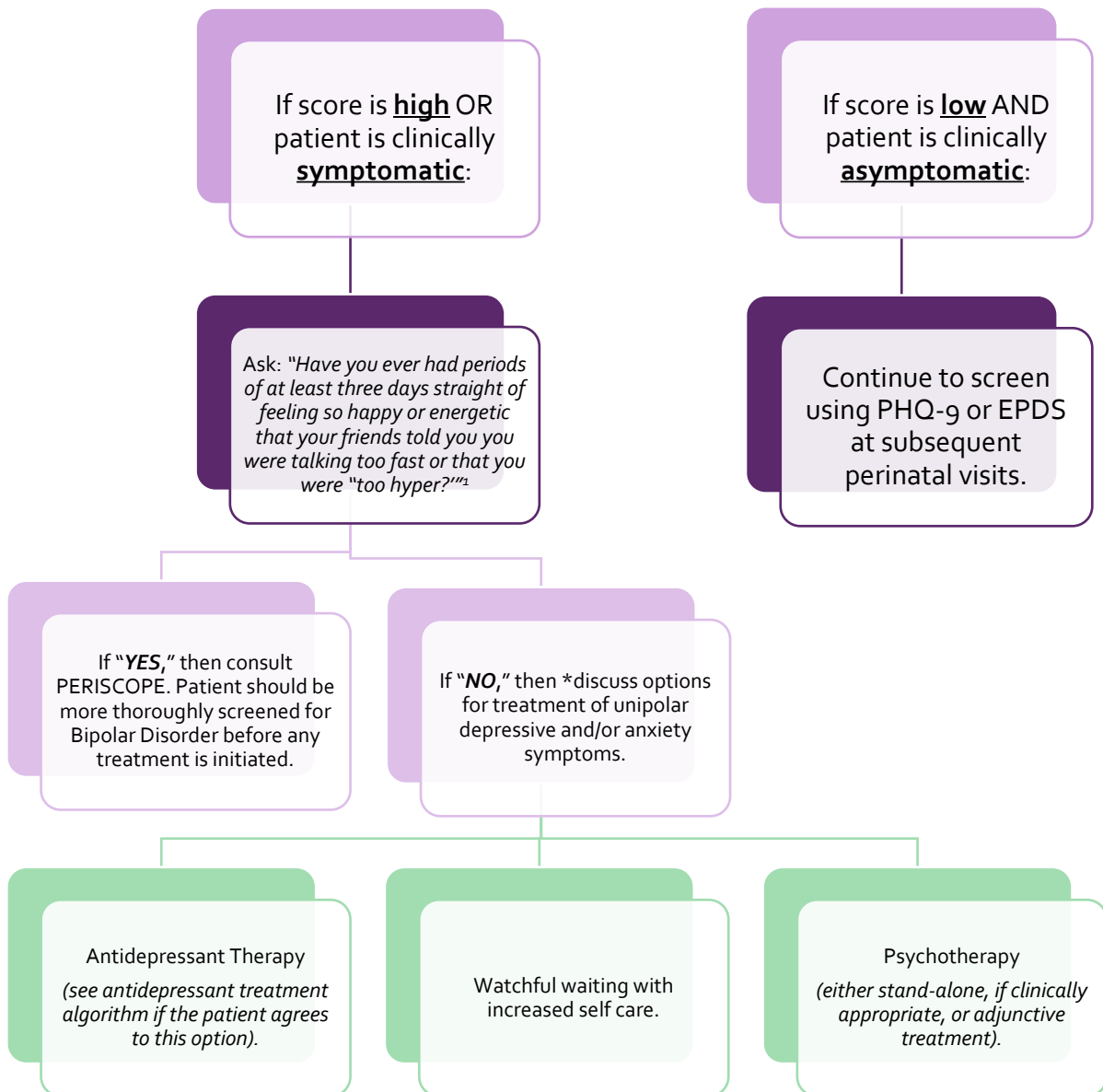
- Persistent Pulmonary hypertension of the newborn (absolute risk of PPHN is low), pre-term labor, poor neonatal adaptation syndrome (PNAS is typically mild and self-limited).
- Risks are NOT dose-dependent.

▣ **Data shows risk of under- or non-treatment of depression in pregnancy may increase risk of:**

- Impaired bonding with baby, poor self-care, postpartum depression (which is associated independently with multiple potential negative outcomes for mother, baby, and family), pre-eclampsia, pre-term labor, substance abuse, suicide.

<sup>3</sup>Adapted from Daniel J. Carlat. (1998) *Am Fam Physician*, 58(7), 1617-1624.

## OVERALL TREATMENT ALGORITHM



<sup>1</sup>Adapted from Daniel J. Carlat. (1998) *Am Fam Physician*, 58(7), 1617-1624.