

## **P-1476 - DEVELOPMENT AND VALIDATION OF THE PORTUGUESE SHORT VERSION OF THE POSTPARTUM DEPRESSION SCREENING SCALE TO SCREEN FOR ANTENATAL DEPRESSION**

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**Introduction:** Although developed for postpartum depression, the Postpartum Depression Screening Scale (PDSS; Beck & Gable, 2002) is accurate to screen for antenatal depression (Pereira et al., 2011). Nonetheless, as any screening instrument should be valid, short and easy it is important to develop a PDSS short form to use in pregnancy.

**Objectives:** To develop PDSS short version to use in pregnancy and to determine its cut-off points and associated conditional probabilities to screen for antenatal depression according to DSM-IV and ICD-10 criteria.

**Methods:** 441 pregnant women in their last trimester of pregnancy ( $M=32.6\pm 3.47$  weeks of gestation) completed the Portuguese PDSS adapted to pregnancy and were interviewed using the Mood Disorders Section/Diagnostic Interview for Genetic Studies. A factor analysis was performed to select the items (factor loadings  $>.60$ ). ROC analysis was applied and cut-off points adjusted to the prevalence were determined.

**Results:** Four factors were extracted, making a total of 24 items selected to the short version (PDSS-24). For major depression/DSM-IV the cut-off point (CO) of 44, resulted in sensitivity 83.3%, specificity 78.9%, positive predictive value (PPV) 8.5% and negative predictive value (NPV) 99.7%; for depressive disorder/ICD-10 the CO of 42 determined sensitivity 85.7%, specificity 79.2%, PPV 11.9%, NPV 99.4%; for mild/moderate depression with somatic syndrome or severe depression without psychotic symptoms/ICD-10 the CO of 46 was associated to sensitivity 87.5%, specificity 82.2%, PPV 9.3% and NPV 99.7%.

**Conclusions:** The PDSS-24 is a good alternative to the 35-items version, equally valid, but more economic, faster and easier.