## Comparison: Screening for common mental disorders (CMDs: depression, anxiety) in the postpartum period compared with no screening or usual care

Source: Waqas A, Kokab A, Meraj H, Dua T, Chowdhary N, Fatima B, et al. Screening programs for common maternal mental health disorders among perinatal women: report of the systematic review evidence. BMC Psychiatry. 2022;22(1):54. doi:10.1186/s12888-022-03694-9.

	Certainty assessment						№ of patients		Effect			
№ of studies	Study design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Screening for CMDs	No screening or usual care	Relative (95% CI)	Absolute (95% CI)	Certainty (GRADE)	Importance
Rate of postpartum depression – RCTs												
4	randomized trials	very serious <sup>a</sup>	not serious	not serious	not serious	none	500/1648 (30.3%)	604/1516 (39.8%)	OR 0.53 (0.45 to 0.62)	<b>67 fewer per 1000</b> (from 79 fewer to 53 fewer)	⊕⊕○○ LOW	CRITICAL
Rate of po	Rate of postpartum depression – quasi-RCTs											
2	observational studies	serious <sup>b</sup>	not serious	not serious	not serious	strong association	76/3359 (0.2%)	73/1651 (4.4%)	OR 0.30 (0.24 to 0.48)	31 fewer per 1000 (from 33 fewer to 22 fewer)	⊕⊕○○ LOW	CRITICAL
Postpartur	Postpartum anxiety rate – RCTs											
1	randomized trials	not serious	not serious	not serious	not serious	none	271	294	-	SMD <b>0.28 SD fewer</b> (0.44 fewer to 0.11 fewer)	⊕⊕⊕⊕ HIGH	CRITICAL
Postpartur	m anxiety rate –	quasi-RCTs			,		-					· · · · · · · · · · · · · · · · · · ·
1	observational studies	very serious <sup>a</sup>	not serious	not serious	not serious	none	1843	1540	-	SMD <b>0.17 SD fewer</b> (0.24 fewer to 0.09 fewer)	⊕○○○ VERY LOW	CRITICAL
Quality of	life – RCTs		,	,								
2	randomized trials	very serious <sup>a</sup>	not serious	not serious	not serious	none	1072	996	-	SMD <b>0.24 SD more</b> (0.11 more to 0.38 more)	⊕⊕○○ LOW	CRITICAL

	Certainty assessment						Nº of patients		Effect			
Nº of studies	Study design	Risk of bias	Inconsistency	Indirectness	Imprecision	Other considerations	Screening for CMDs	No screening or usual care	Relative (95% CI)	Absolute (95% CI)	Certainty (GRADE)	Importance
Quality of	life – quasi-RCTs	,										
1	observational studies	very serious <sup>a</sup>	not serious	not serious	not serious	none	1843	1246	-	SMD <b>0.04 SD more</b> (0.12 more to 0.26 more)	⊕○○○ VERY LOW	CRITICAL
Marital sat	tisfaction – RCTs											
2	randomized trials	not serious	not serious	not serious	serious <sup>c</sup>	none	-/553	-/464	OR 0.56 (0.205 to 1.525)	not reported <sup>d</sup>	⊕⊕⊕○ MODERATE	CRITICAL
Parental st	ress – RCTs											
3	randomized trials	not serious	not serious	not serious	not serious	none	-/758	-/824	OR 0.57 (0.45 to 0.74)	not reported <sup>d</sup>	⊕⊕⊕⊕ HIGH	CRITICAL
Parental st	ress – quasi-RC1	īs .							•			
1	observational studies	serious <sup>b</sup>	not serious	not serious	serious <sup>c</sup>	none	128	626	-	MD <b>0.14 SD fewer</b> (0.39 fewer to 0.13 more)	⊕○○○ VERY LOW	CRITICAL
Treatment	seeking practice	es – RCTs										
2	randomized trials	not serious	very serious <sup>e</sup>	not serious	not serious	none	231/553 (41.8%)	81/464 (17.5%)	OR 3.45 (2.52 to 4.70)	<b>247 more per 1000</b> (from 173 more to 324 more)	⊕⊕○○ LOW	CRITICAL

CI: confidence interval; OR: odds ratio; RCT: randomized controlled trial; RR: risk ratio; SMD: standardized mean difference.

a. Most of the pooled effect provided by trials "B" or "C" but with a substantial proportion (i.e. > 50%) from studies "C".

b. Most of the pooled effect provided by studies "B" or "C" but without a substantial proportion (i.e. < 50%) from studies "C".

c. Wide confidence interval crossing the line of no effect.

d. Information on total number of events not available from original trials.

e. Statistical heterogeneity ( $I^2 \ge 60\%$  or  $Chi^2 \le 0.05$ ).