



TWEAK Score

Questionnaire on Alcohol Use During Pregnancy

*To be completed **early** in **all** pregnancies*

When having a baby one of the areas your care provider will talk about is your use of alcohol. The following questions will help with the discussion.

- How many drinks does it take to make you feel high? Number of drinks _____
- Have close friends or relatives worried or complained about your drinking in the past year? No Yes
- Do you sometimes have a drink in the morning when you first get up? No Yes
- Has a friend or family member ever told you about things you said or did while you were drinking that you could not remember? No Yes
- Do you sometimes feel the need to cut down on your drinking? No Yes

Talk about your answers to the above questions with your health care provider.

Source: Russell, M (1994). New Assessment tools for risk drinking during pregnancy: T-ACE, TWEAK and others. Alcohol Health and Research World.

Edinburgh Perinatal/Postnatal Depression Scale (EPDS)

SCORING GUIDE

1. I have been able to laugh and see the funny side of things
 - 0 As much as I always could
 - 1 Not quite so much now
 - 2 Definitely not so much now
 - 3 Not at all
2. I have looked forward with enjoyment to things
 - 0 As much as I ever did
 - 1 Rather less than I used to
 - 2 Definitely less than I used to
 - 3 Hardly at all
3. I have blamed myself unnecessarily when things went wrong
 - 3 Yes, most of the time
 - 2 Yes, some of the time
 - 1 Not very often
 - 0 No, never
4. I have been anxious or worried for no good reason
 - 0 No, not at all
 - 1 Hardly ever
 - 2 Yes, sometimes
 - 3 Yes, very often
5. I have felt scared or panicky for no very good reason
 - 3 Yes, quite a lot
 - 2 Yes, sometimes
 - 1 No, not much
 - 0 No, not at all
6. Things have been getting on top of me
 - 3 Yes, most of the time I haven't been able to cope
 - 2 Yes, sometimes I haven't been coping as well as usual
 - 1 No, most of the time I have coped quite well
 - 0 No, I have been coping as well as ever
7. I have been so unhappy that I have had difficulty sleeping
 - 3 Yes, most of the time
 - 2 Yes, sometimes
 - 1 Not very often
 - 0 No, not at all
8. I have felt sad or miserable
 - 3 Yes, most of the time
 - 2 Yes, quite often
 - 1 Not very often
 - 0 No, not at all
9. I have been so unhappy that I have been crying
 - 3 Yes, most of the time
 - 2 Yes, quite often
 - 1 Only occasionally
 - 0 No, never
10. The thought of harming myself has occurred to me
 - 3 Yes, quite often
 - 2 Sometimes
 - 1 Hardly ever
 - 0 Never

A score of 1–3 to item 10 indicating a risk of self-harm, requires immediate mental health assessment and intervention as appropriate.

Scoring of 11–13 range, monitor, support, and offer education.

Scoring of 14 or higher, follow up with comprehensive biopsychosocial diagnostic assessment for depression.

*Source: Cox, JL Cox, Holden, JM, Sagovsky, R (1987)
Department of Psychiatry, University of Edinburgh*

TWEAK SCORING GUIDE

T	<p>Tolerance: “How many drinks does it take to make you feel high?” (Or this can be modified to “How many drinks can you hold?”) Record number of drinks.</p>	3 or more drinks = 2 points
W	<p>Worry: “Have close friends or relatives worried or complained about your drinking in the past year?”</p>	Yes = 2 points
E	<p>Eye-Opener: “Do you sometimes have a drink in the morning when you first get up?”</p>	Yes = 1 point
A	<p>Amnesia (Blackout): Has a friend or family member ever told you about things you said or did while you were drinking that you could not remember?</p>	Yes = 1 point
K (C)	<p>Cut Down: “Do you sometimes feel the need to cut down on your drinking?”</p>	Yes = 1 point

A score of 2 or more points indicates a risk of a drinking problem.

Source: Russell, M (1994). New Assessment tools for risk drinking during pregnancy: T-ACE, TWEAK and others. Alcohol Health and Research World.