## Title: Impact of screening and treatment of depression in pregnancy on obstetric outcomes

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**Synopsis:** Increasing efforts have been underway to recommend universal screening for depression in pregnancy, as depression may affect up to 15% of pregnant women. While improvement in maternal mental health outcomes is one rationale for universal screening and subsequent treatment, the potential link between maternal depression and poor obstetric outcomes, particularly preterm birth, is another. In light of conflicting data about the association between maternal depression and obstetric outcomes as well as uncertainty regarding the risk/benefit ratio of antidepressant utilization in pregnancy, estimating the value of screening in the context of treatment is of particular importance to clinical providers. Given the prevalence of both depression and antidepressant medication exposure during pregnancy, it is important to understand not only the association between depression and adverse pregnancy outcome, but also the impact of antidepressant treatment on the risk of preterm birth.

The current observational study examines the relationship between antenatal depressive symptoms with preterm delivery and a small for gestational age infant at birth in a large, well-characterized clinical cohort undergoing routine antepartum depression screening to better understand the consequences of such symptoms and the influence of treatment.