

**Table 3: Association of prenatal and postnatal anxiety or depressive symptoms and antenatal anxiety or depression diagnoses with infant irritability (MAP-DB) at 4-6 months of postnatal life**

Timepoint of mental health exposures <sup>1</sup>	Frequency of at least mild anxiety or depression <i>n/N (%)</i>	Adjusted mean difference in MAPS-TL score at 4-6 months <sup>2</sup>	95% CI	p-value <sup>3</sup>
<b>Visit 1 – 8-28 weeks’ gestational age</b>				
GAD7	22/107 (21)	18.3	3.9, 32.8	<b>0.01</b>
PHQ9	19/106 (18)	21.5	5.6, 37.3	<b>0.008</b>
<b>Visit 3<sup>4</sup> – 26-38 weeks’ gestational age</b>				
GAD7	24/107 (22)	13.0	-1.1, 27.1	0.07
PHQ9	21/101 (21)	22.2	6.0, 38.5	<b>0.008</b>
<b>Visit 5 – 4-8 weeks postpartum</b>				
GAD7	29/107 (27)	16.4	3.1, 29.7	<b>0.02</b>
PHQ9	27/106 (26)	14.4	0.6, 28.1	<b>0.04</b>
<b>Antenatal medical diagnoses</b>				
Anxiety	49/108 (45)	17.6	5.7, 29.6	<b>0.004</b>
Depression	30/108 (28)	14.3	0.4, 28.3	<b>0.04</b>
<p><i>Abbreviations: Generalized Anxiety Disorder-7 (GAD7), Patient Health Questionnaire-9 (PHQ9), Multidimensional Assessment Profile Temper Loss Scale (MAPS-TL, assessed as a continuous measure), Confidence interval (CI)</i></p> <p><sup>1</sup>Anxiety symptoms, assessed by the GAD-7, were categorized as no-to-minimal (score &lt; 5) versus mild or greater (score ≥ 5). Depressive symptoms, assessed by the PHQ-9, were categorized as no-to-minimal (score &lt; 5) versus mild or greater (score ≥ 5). Antenatal medical diagnoses were abstracted from the medical record.</p> <p><sup>2</sup>Adjusted for participant age, household income, infant sex, and parity</p> <p><sup>3</sup>Bolded values denote p-value significance at p&lt;0.05.</p> <p><sup>4</sup>Visit 3 occurred at least 8 weeks after completion of Visit 1.</p>				