

HAMILTON DEPRESSION RATING SCALE

NAME: _____

| | Pre-treatment | 1st review 2 weeks later | 2nd review 2 weeks later |
|----------------------------------|---------------|-----------------------------|-----------------------------|
| SYMPTOMS | DATE: | DATE: | DATE: |
| 1. Depressed Mood | | | |
| 2. Feelings of guilt | | | |
| 3. Suicide | | | |
| 4. Insomnia – early | | | |
| 5. Insomnia – middle | | | |
| 6. Insomnia – late | | | |
| 7. Work & Activities | | | |
| 8. Retardation | | | |
| 9. Agitation | | | |
| 10. Anxiety – psychic | | | |
| 11. Anxiety – somatic | | | |
| 12. Somatic symptoms – GI | | | |
| 13. Somatic symptoms | | | |
| 14. Genital symptoms | | | |
| 15. Hypochondrias | | | |
| 16. Weight loss either A Or B | | | |
| 17. Insight | | | |
| TOTAL SCORE: | | | |

SCORING THE HAMILTON DEPRESSION RATING SCALE

The total HDRS score provides an indication of the level of a patient's depression and over time, provides a valuable guide to your patient's progress.

In general, the higher the total score, the more severe is the depression. While it is not realistic to categorically assign a specific level of depression to a specific HDRS score, it is possible to give the following general guidelines:

| HDRS Score: | Level of depression: |
|--------------------|-----------------------------|
| 10 – 13 | Mild |
| 13 – 17 | Mild to Moderate |
| > 17 | Moderate to severe |

Ongoing assessment is an important aspect of the management of depression and a key feature of the HDRS system. On the forms provided, the newly diagnosed patient should be assessed at 2 weekly intervals following the initial assessment.

| |
|--|
| <p>1. Depressed Mood:</p> <p>0 Absent</p> <p>1 These feeling states indicated only on questioning</p> <p>2 These feeling states spontaneously reported verbally</p> <p>3 Communicates feeling state, nonverbal, ie: facial expression, posture, voice and crying</p> <p>4 Patient reports virtually only these feeling states in their spontaneous verbal and nonverbal communication</p> |
| <p>2. Feelings of guilt:</p> <p>0 Absent</p> <p>1 Self-reproach, feels they have let people down</p> <p>2 Ideas of guilt or rumination over past errors or sinful deeds</p> <p>3 Present illness is a punishment; delusion of guilt</p> <p>4 Hears accusatory or denunciatory voices and / or experiences threatening visual hallucinations</p> |
| <p>3. Suicide:</p> <p>0 Absent</p> <p>1 Feels it is not worth living</p> <p>2 Wishes he / she were dead or nay thoughts of possible death to self</p> <p>3 Suicide ideas or gesture</p> <p>4 Attempts at suicide (any serious attempt rates 4)</p> |
| <p>4. Insomnia Early</p> <p>0 No difficulty falling asleep</p> <p>1 Complains of occasional difficulty falling asleep, ie: more than ½ hour</p> <p>2 Complains of nightly difficulty falling asleep</p> |
| <p>5. Insomnia Middle:</p> <p>0 No difficulty</p> <p>1 Patient complains of being restless and disturbed during the night</p> <p>2 Waking during the night; any getting out of bed rates 2 (except to go to the toilet)</p> |
| <p>6. Insomnia Late:</p> <p>0 No difficulty</p> <p>1 Waking in early hours of the morning but goes back to sleep</p> <p>2 Unable to fall asleep again if gets out of bed</p> |
| <p>7. Works and Activities:</p> <p>0 No difficulty</p> <p>1 Thoughts and feelings of incapacity, fatigue or weakness related to activities, work or hobbies</p> <p>2 Loss of interest in activities, hobbies or work, either directly reported by patient, or indirectly by listlessness, indecision & vacillation; feels he/she has to push self to work or activities</p> <p>3 Decrease in actual time spent in activities or decrease in productivity. (For Hospitalised patients, rate 3 if he / she does not spend at least 3 hours a day in activity).</p> <p>4 Stopped working because of present illness. (In hospitalized patients, rate 4 if patient engages in no activities except ward chores, or if patient fails to perform chores unassisted.</p> |
| <p>8. Retardation:</p> <p>0 Normal speech and thought</p> <p>1 Slight retardation at interview</p> <p>2 Interview difficult</p> <p>3 Obvious retardation at interview</p> <p>4 Complete stupor</p> |

9. Agitation:

- 0 None
- 1 Fidgetiness
- 2 Playing with hands, hair etc
- 3 Moving about, cannot sit still
- 4 Hand wringing, nail biting, hair pulling, biting of lips

10 Anxiety – psychic

- 0 No difficulty
- 1 Some tension and irritability
- 2 Worrying about minor matters
- 3 Apprehensive attitude apparent in patient's face or speech
- 4 Fears expressed without questioning

11. Anxiety – Somatic

Symptoms can be Gastrointestinal (dry mouth, wind, indigestion, diarrhea, cramps, belching); Cardiovascular (palpitations, headaches); Respiratory (hyperventilation, sighing); Other symptoms include: urinary frequency, sweating)

- 0 Absent
- 1 Mild
- 2 Moderate
- 3 Severe
- 4 Incapacitating

12. Somatic symptoms – Gastrointestinal

- 0 None
- 1 Loss of appetite but continuing to eat; heavy feelings in abdomen
- 2 Difficulty eating; request or requires laxatives or medication for bowels or for GI symptoms

13. Somatic symptoms – General

- 0 None
- 1 Heaviness in limbs, back or head; backaches, headaches, muscle aches; loss of energy and fatigability
- 2 Any clear-cut symptom rates 2

14. Genital symptoms (such as loss of libido, menstrual disturbances)

- 0 Absent
- 1 Mild
- 2 Severe

15. Hypochondrias

- 0 Not present
- 1 Self-absorption (bodily)
- 2 Preoccupation with health
- 3 Frequent complaints, requests for help etc
- 4 Hypochondriacal delusions

16. Loss of weight Check A or B

- A: Rating by history
- 0 No weight loss
 - 1 Probable weight loss associated with present illness
 - 2 Definite weight loss (according to patient)
- B: Rating by measurement
- 0 Less than ½ kg weight loss
 - 1 Greater than ½ kg weight loss
 - 2 Greater than 1 kg weight loss

17. Insight:

- 0 Acknowledges being depressed and ill
- 1 Acknowledges illness but attributes to bad food, climate, overwork, virus, need for a rest
- 2 Denies being ill