

# Hamilton Depression Rating Scale<sup>1,2</sup> (HAM-D) also HDRS or HRSD

Identifier

Date

This is a practitioner-rated form. Please rate each statement and select a number 0, 1, 2, 3 or 4 which indicates symptoms severity over the past week. This assessment is not intended to be a diagnosis.

4-item 0 = Absent      1 = Mild      2 = Moderate      3 = Severe      4 = Very Severe

2-item 0 = Absent      1 = Mild      2 = Definite

## 1 DEPRESSED MOOD - Sad, hopeless, helpless, worthless

0 = Absent

1 = Gloomy attitude, pessimism, hopelessness

2 = Occasional weeping

3 = Frequent weeping

4 = Patient reports virtually only those feeling states in his / her spontaneous verbal and non-verbal communication

## 2 FEELINGS OF GUILT

0 = Absent

1 = Self reproach, feels he / she has let people down

2 = Ideas of guilt or rumination over past errors or sinful deeds

3 = Present illness is punishment

4 = Hears accusatory or denunciatory voices and / or experiences, threatening visual hallucinations. Delusions of guilt

## 3 SUICIDE

0 = Absent

1 = Feels life is not worth living

2 = Wishes he / she were dead or any thoughts of possible death to self

3 = Suicide, ideas or half-hearted attempt

4 = Attempts at suicide (any serious attempt rates 4)

## 4 INSOMNIA [Early]

0 = No difficulty falling asleep

1 = Complains of occasional difficulty falling asleep; i.e. more than ½ hour

2 = Complains of nightly difficulty falling asleep

## 5 INSOMNIA [Middle]

0 = No difficulty

1 = Patient complains of being restless and disturbed during the night

2 = Waking during the night: any getting out of bed rates 2 (except for voiding)

## 6 INSOMNIA [Late]

0 = No difficulty

1 = Waking in early hours of the morning but goes back to sleep

2 = Unable to fall asleep again if he / she gets out of bed

## 7 WORK & ACTIVITIES

0 = No difficulties

1 = Thoughts and feelings of incapacity related to activities, work and hobbies

2 = Loss of interest in activity, hobbies or work either directly reported by patient, or indirectly seen in listlessness, indecision and vacillation (feels he / she has to push self to work or activities)

## 8 RETARDATION

Slowness of thought and speech; impaired ability to concentrate, decreased motor activity

0 = Normal speech and thought

1 = Slight retardation at interview

2 = Obvious retardation at interview

3 = Interview difficult

4 = Interview impossible

## 9 AGITATION

0 = None

1 = Fidgeting

2 = Playing with hands, hair, obvious restlessness

3 = Moving about, can't sit still

4 = Hand wringing, nail biting, hair pulling, biting of lips, patient is 'on the run'

## 10 ANXIETY [Psychic]

Demonstrated by: Subjective tension and irritability, loss of concentration, worrying about minor matters, apprehension, fears expressed without questioning, feelings of panic, feeling jumpy

0 = Absent

1 = Mild

2 = Moderate

3 = Severe

4 = Incapacitating

## 11 ANXIETY [Somatic]

Physiological concomitants of anxiety, e.g. dry mouth, wind, indigestion, diarrhoea, cramps, belching, palpitations, headaches, hyperventilation, sighing, urinary frequency, sweating, giddiness, blurred vision, tinnitus

0 = Absent

1 = Mild

2 = Moderate

3 = Severe

4 = Incapacitating

## 12 SOMATIC SYMPTOMS [Gastrointestinal]

0 = None

1 = Loss of appetite but eating without staff encouragement

2 = Difficulty eating without staff urging. Requests or requires laxatives or medication for GI symptoms

## 13 SOMATIC SYMPTOMS [General]

0 = None

1 = Heaviness in limbs, back or head, backaches, headaches, muscle aches, loss of energy, fatigability

2 = Any clear-cut symptom rates 2

**14 GENITAL SYMPTOMS**

Symptoms such as loss of libido / menstrual disturbances

0 = Absent

1 = Mild

2 = Severe

**15 HYPOCHONDRIASIS**

0 = Not present

1 = Self absorption (bodily)

2 = Preoccupation with health

3 = Strong conviction of some bodily illness

4 = Hypochondriacal delusions

**16 LOSS OF WEIGHT**

0 = No weight loss

1 = Probable weight loss associated with present illness

2 = Definite (according to patient) weight loss

**17 INSIGHT**

0 = Acknowledges being depressed and ill

1 = Acknowledges illness but attributes cause to bad food, overwork, virus, need for rest, etc.

2 = Denies being ill at all

**18 DIURNAL VARIATION**

**18(a).** Note whether symptoms are worse in morning or evening.

If no diurnal variation, mark 'none'

0= No variation

1= Worse in A.M.

2= Worse in P.M.

**18(b).** When present, mark the severity of the variation. Mark 'None' if no variation

0= None

1= Mild

2= Severe

**19 DEPERSONALIZATION AND DEREALIZATION**

(e.g. feelings of unreality; nihilistic ideas)

0= Absent

1= Mild

2= Moderate

3= Severe

4= Incapacitating

**20 PARANOID SYMPTOMS**

0= None

1= Suspicious

2= Ideas of reference

3= Delusions of reference and persecution

**21 OBSESSIVE AND COMPULSIVE SYMPTOMS**

0= Absent

1= Mild

2= Severe

**Total Score**

The Hamilton Depression (HAM-D) Rating Scale provides an indication of depression and, over time, a guide to recovery. It is one of the most widely used and accepted outcome measures for evaluating the severity of depression symptoms. The HAM-D was designed to be administered by a trained professional using a semi-structured interview. Even though Hamilton provided no specific guidelines regarding the administration and scoring of the scale, nor any standardised questions for eliciting information from patients, high inter-rater reliability has been observed.<sup>3</sup> A structured interview guide is available which has been shown to improve reliability further<sup>4</sup>. Several versions of the HAM-D are available, some with additional questions (which are not scored). The HAM-D is also known as the HAM-D<sub>17</sub>, HRSD and the HDRS. Although this version of the HAM-D lists 21 items, only the first 17 are scored. The remainder provide additional clinical information. It takes about 20 minutes to complete the interview and score the results. Eight items are scored on a 5-point scale, ranging from 0 = not present to 4 = severe. Nine items are scored from 0 - 2. Sum the total of the first seventeen items to arrive at the total score.

<b>Normal</b>	<b>Mild</b>	<b>Moderate</b>	<b>Severe</b>	<b>Very Severe</b>
0 - 7	8 - 13	14 - 18	19 - 22	>=23

Privacy - please note - this form does not transmit any information about you or your assessment scores. If you wish to keep your results, either print this document or save this file locally to your computer. If you click 'save' before closing, your results will be saved in this document. These results are intended as a guide to your health and are presented for educational purposes only. They are not intended to be a clinical diagnosis. If you are concerned in any way about your health, please consult with a qualified health professional.

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1. Hamilton, M. J. (1960). *Neurology Neurosurgery and Psychiatry*. Vol. 23: p. 56–62.
2. Bech, P. (1996). *The Bech, Hamilton and Zung Scales for Mood Disorders: Screening and Listening*. 2nd Ed. Berlin: Springer-Verlag p. 43–52.
3. Müller, M.J. & Dragicevic, A. (2003). *Journal of Affective Disorders*. Vol. 77(1) p. 65–9.
4. Williams, J.B.W. (1988). A Structured Interview Guide for the Hamilton Depression Rating Scale. *Archives of General Psychiatry, American Medical Association*, August 1988, Vol. 45, Num. 8, p. 742-747.