Print this page

page 1 of 3

HAMILTON DEPRESSION RATING SCALE (HAM-D17)

Br. J. Soc. Clin. Psychol. 6: 278-296 (1967)

For each item write in the box the number that best characterises the patient during the past week

	PRESSED MOOD (Sadness, hopeless, helpless, worthless) Absent.	
1		
	These feeling states spontaneously reported verbally.	
	Communicates feeling states non-verbally i.e., through facial expression,	
J	posture, voice, and tendency to weep	L
4	Patient report VIRTUALLY ONLY these feeling states in his spontaneous verbal and non-verbal communication.	
2 - FEE	LING OF GUILT	tito magazini
0	Absent.	
1	Self reproach, feels he has let people down.	
2	Ideas of guilt or rumination over past errors or sinful deeds.	
	Present illness is a punishmnent. Delusions of guilt.	
4	Hears accusatory or denunciatory voices and/or experiences threatening visual hallucinations.	
3 - SUI	CIDE	
	Absent.	
	Feels life is not worth living.	
	Wishes he were dead or any thoughts of possible death to self.	
	Suicide ideas or gesture.	I
4	Attempts at suicide (any serious attempt rates 4).	
	OMNIA EARLY	ereng meneral againgt a garte
	No difficulty falling asleep.	
	Complains of occasional difficulty falling asleep - i.e., more than 1/2 hour,	
2	Complains of nightly difficulty falling asleep.	d
	OMNIA MIDDLE	
	No difficulty	
	Patient's complains of being restless and disturbed during the night.	
2	Waking during the night - any getting out of bed rates 2 (except for purposes of voiding).	L
6 - INSC	DMNIA LATE	er en salade del angles esane.
0	No difficulty.	
1	Waking in early hours of the morning but goes back to sleep.	
2	Unable to fall asleep again if he gets out of bed.	<u> </u>
	The state of the s	

go to page 2

Print this page

page 2 of 3

HAMILTON DEPRESSION RATING SCALE (Page 2)

/ - VVC	JRK AND ACTIVITIES	
(9 No difficulty	
•	1 Thoughts and feelings of incapacity, fatigue or weakness related to activities; work or hobbies.	
2	2 Loss of interest in activity; hobbies or work - either directly reported by patient, or indirect in listlessness, indecision and vacillation (feels he has to push self to work or activities).	ghamanan arang
3	Decrease in actual time spent in activities or decrease in productivity. In hospital, rate 3 if patient does not spend at least three hours a day in activities	
4	(hospital job or hobbies) exclusive of ward chores Stopped working because of present illness. In hospital, rate 4 if patient engages in no activities except ward chores, or if patient fails to perform ward chores unassisted.	18 53 4
8 - RE	TARDATION (Slowness of thought and speech; impaired ability to concentrat ased motor activity.)	:e;
	Normal speech and thought	
1	and the second s	
-	2 Obvious retardation at interview	[
	Interview difficult.	L
	Complete stupor.	
9 - AG	ITATION	in a pro do e un go
0	None.	
	Fidgetiness	
2	Playing with hands, hair,etc.	***************************************
3	Moving about, can't sit still.	**********
4	Hand wringing, nail biting, hair-pulling, biting of lips.	
10 - AN	VXIETY PSYCHIC	econoción este s
	No difficulty.	
	Subjective tension and irritability.	
	Worrying about minor matters	
3	Apprehensive attitude apparent in face or speech.	
4	Fears expressed without questioning.	
: dry mo	IXIETY SOMATIC (Physiological concomitants of anxiety, such as: - Gastro-intes outh, wind, indigestion, diarrhea, cramps, belching Cardio-vascular: palpitation; hes Respiratory: hyperventilation, sighing Urinary frequency - Sweating.) Absent	tinal s,
1	Mild.	
2	Moderate	

Print this page

page 3 of 3

HAMILTON DEPRESSION RATING SCALE (Page 3.)

	OMATIC SYMPTOMS GASTRO-INTESTINAL None.			
1	Loss of appetite but eating without staff encouragement. Heavy feelings in abdomen.			
2	2 Difficulty eating without staff urging. Requests or requires laxatives or medication for bowels or medication for gastro-intestinal symptoms.			
	OMATIC SYMPTOMS GENERAL	w wood dayinig		
	None			
•	Heaviness in limbs, back or head. Backaches, headache, muscle aches. Loss of energy and fatigability.			
2	Any clear-cut symptom rates 2.	d		
1 4 - G I	ENITAL SYMPTOMS (Symptoms such as : loss of libido, menstrual disturban Absent.	ces)		
1	Mild.			
2	Severe.	<u> </u>		
15 - HY	POCHONDRIASIS	1000179-100017-100-100		
	Not present.			
	Self-absorption (bodily).			
	Preoccupation with health.			
	Frequent complaints, requests for help, etc Hypochondriacal delusions.			
a to a company management		· Over Seinson, or		
	PSS OF WEIGHT			
	When rating by history :			
	No weight loss			
	Probable weight loss associated with present illness. Definite (according to patient) weight loss.			
-	OR			
B) (mea	On weekly rating by ward psychiatrist, when actual weight changes are asured :			
0	Less than 1 lb (500 g), weight loss in week			
	Greater than 1lb (500 g), weight loss in week.			
	Greater than 2 lb (1000 g), weight loss in week.			
17 - INS	BIGHT	agandan ak-san ak		
	Acknowledges being depressed and ill			
1	Acknowledges illness but attributes cause to bad food, climate, overwork, virus, [need for rest, etc.			

2 Denies being ill at all.	
	and appropriate the second section of the section of the second section of the section of the second section of the section
	TOTAL SCORE

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