

# Hamilton Rating Scale for Depression

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The HRSD is a tool with which to monitor the fluctuation and severity of symptoms of depression over time. Max Hamilton originally published the HDS in 1960 and reviewed and evaluated it in 1966, 1967, 1969, and 1980. The HRSD was originally developed for hospital inpatients, thus the emphasis on melancholic and physical symptoms of depression.

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

HRSD Score: Level of depression:	0 - 7	Normalcy
	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 HRSD system. Patients should be assessed at regular intervals (usually weekly) following the initial assessment.

## 1) Falling Asleep:

- I never took more than 30 minutes to fall asleep.
- I took at least 30 minutes to fall asleep, less than half the time (3 days or less out of the past 7 days).
- I took at least 30 minutes to fall asleep, more than half the time (4 days or more out of the past 7 days).
- I took more than 60 minutes to fall asleep, more than half the time (4 days or more out of the past 7 days).

## 2) Sleep During the Night:

- I did not wake up at night.
- I had a restless, light sleep, waking up briefly a few times each night.
- I woke up at least once a night, but I went back to sleep easily.
- I woke up more than once a night and stayed awake for 20 minutes or more, more than half the time (4 days or more out of the past 7 days).

## 3) Waking Up Too Early:

- Most of the time, I woke up no more than 30 minutes before I needed to get up.
- More than half the time (4 days or more out of the past 7 days), I woke up more than 30 minutes before I needed to get up.
- I almost always woke up at least one hour or so before I needed to get up, but I went back to sleep eventually.
- I woke up at least one hour before I needed to get up, and could not go back to sleep.

## 4) Sleeping Too Much:

- I slept no more than 7-8 hours/night, without napping during the day.
- I slept no more than 10 hours in a 24-hour period including naps.
- I slept no more than 12 hours in a 24-hour period including naps.
- I slept more than 12 hours in a 24-hour period including naps.

5) Feeling Sad:

- I did not feel sad.
- I felt sad less than half the time (3 days or less out of the past 7 days).
- I felt sad more than half the time (4 days or more out of the past 7 days).
- I felt sad nearly all the time.

6) Feeling Irritable:

- I did not feel irritable.
- I felt irritable less than half the time (3 days or less out of the past 7 days).
- I felt irritable more than half the time (4 days or more out of the past 7 days).
- I felt extremely irritable nearly all the time.

7) Feeling Anxious or Tense:

- I did not feel anxious or tense.
- I felt anxious (tense) less than half the time (3 days or less out of the past 7 days).
- I felt anxious (tense) more than half the time (4 days or more out of the past 7 days).
- I felt extremely anxious (tense) nearly all the time.

8) Response of Your Mood to Good or Desired Events:

- My mood brightened to a normal level which lasted for several hours when good circumstances occurred.
- My mood brightened but I did not feel like my normal self when good circumstances occurred.
- My mood brightened only somewhat to a rather limited range of desired circumstances.
- My mood did not brighten at all, even when very good or desired circumstances occurred in my life.

9) Mood in Relation to the Time of Day:

- There was no regular relationship between my mood and the time of day.
- My mood was often related to the time of day because of environmental circumstances (e.g., being alone, working).
- In general, my mood was more related to the time of day than to environmental circumstances.
- My mood was clearly and predictably better or worse at a particular time each day.

10) The Quality of Your Mood:

- The mood (internal feelings) that I experienced was very much a normal mood.
- My mood was sad, but this sadness was pretty much like the sad mood I would feel if someone close to me had died or left.
- My mood was sad, but this sadness was a little bit different from the sadness I would feel if someone close to me had died or left.
- My mood was sad, but this sadness was very different from the type of sadness associated with grief or loss.

11) ANXIETY, SOMATIC (psychological concomitants of anxiety such as gastro-intestinal, dry mouth, wind, indigestion, diarrhoea, cramps, belching. Cardiovascular: palpitations, headaches. Respiratory: hyperventilation, sighing. Urinary frequency. Sweating.)

- Absent.
- Mild.
- Moderate.
- Severe.
- Incapacitating.

12) SOMATIC SYMPTOMS, GASTROINTESTINAL

- None.
- Loss of appetite but eating without staff encouragement. Heavy feelings in abdomen.
- Difficulty eating without staff urging. Requests or requires laxatives or medication for bowels or medication for GI symptoms.

13) SOMATIC SYMPTOMS, GENERAL

- None.
- Heaviness in limbs, back of head. Backaches, headache, muscle aches, loss of energy, fatiguability.
- Any clear-cut symptom rates 2.

14) GENITAL SYMPTOMS (such as loss of libido and menstrual disturbances)

- Absent.
- Mild.
- Severe.

15) HYPOCHONDRIASIS

- Not present.
- Self-absorption (bodily).
- Preoccupation with health.
- Frequent complaints, requests for help, etc.

16) LOSS OF WEIGHT - Rate either A (by history/patient report) or B (actual measurement)

- |   |  |
|---|--|
| <input type="checkbox"/> A: No weight loss.                                       | B: Less than 0.5 kg weight loss in week    |
| <input type="checkbox"/> A: Probable weight loss associated with present illness. | B: Greater than 0.5 kg weight loss in week |
| <input type="checkbox"/> A: Definite (according to patient) weight loss.          | B: Greater than 1 kg weight loss in week   |
| <input type="checkbox"/> A: Not assessed.   | B: Not assessed.                           |

17) INSIGHT

- Acknowledges being depressed and ill.
- Acknowledges illness but attributes cause to bad food, climate, overwork, virus, need for rest, etc.
- Denies being ill at all.

Select a date to score

Date

Rater (Your initials)

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1) DEPRESSED MOOD	___	___	___	___	___	___	___	___
2) FEELINGS OF GUILT	___	___	___	___	___	___	___	___
3) SUICIDE	___	___	___	___	___	___	___	___
4) INSOMNIA, EARLY	___	___	___	___	___	___	___	___
5) INSOMNIA, MIDDLE	___	___	___	___	___	___	___	___
6) INSOMNIA, LATE	___	___	___	___	___	___	___	___
7) WORK AND ACTIVITIES	___	___	___	___	___	___	___	___
8) RETARDATION	___	___	___	___	___	___	___	___
9) AGITATION	___	___	___	___	___	___	___	___
10) ANXIETY, PSYCHIC	___	___	___	___	___	___	___	___
11) ANXIETY, SOMATIC	___	___	___	___	___	___	___	___
12) SOMATIC SYMPTOMS, GI	___	___	___	___	___	___	___	___
13) SOMATIC SYMPTOMS, GEN	___	___	___	___	___	___	___	___
14) GENITAL SYMPTOMS	___	___	___	___	___	___	___	___
15) HYPOCHONDRIASIS	___	___	___	___	___	___	___	___
16) WEIGHTLOSS	___	___	___	___	___	___	___	___
17) INSIGHT	___	___	___	___	___	___	___	___

Total HRSD Score

Remember to save the document as: Surname, Initials and NHI!

Questionnaire data, whilst of great value in the diagnostic process can never render a conclusive diagnosis. Many diseases are associated with symptoms as recorded in questionnaires of this sort, and where significant scores are registered on any of them, more specific and specialized assessment and investigation is indicated.

**ALL questionnaire data must be evaluated for clinical significance by a clinician qualified to do so.**

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