



Carroll Depression Scales-Revised

By Bernard Carroll, M.B., Ph.D., F.R.C. Psych.

Profile Report

Client Name:	Susan Sample
Age:	26
Gender:	Female
Ethnic Origin:	Other/Unknown
Duration:	7 min 12 sec
Administration Date:	Wednesday, January 12, 2005



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Introduction

CDS-R is a 61 statement scale that contains the original 52 CDS statements and 9 additional statements for the depression-related symptoms in DSM-IV.

This report is based on an algorithm that produces interpretations based on the individual's scores with best communality and strength. The individual's scores are compared to those of two norm groups: inpatients and outpatients with independent diagnoses of mild to extreme Major Depression; and normal respondents.

This computerized report is an interpretative aid and should not be used as the sole basis for intervention, clinical diagnosis, or decision making. Its contents are best utilized when combined with other sources of information, such as records on file, supportive psychometric assessment results, and/or references. While the responses reflect how the individual has felt during the past few days, other sources of information are required for a full assessment. It is critical that the scores and interpretations contained in this report be used only by professionals who are qualified to work in the area of depression. These professionals have a mandatory ethical responsibility to the individual assessed in this report.

Response Validation

The individual has 0 unanswered statement(s). This constitutes an irregular response rate of 0%. A percentage above 10% renders the responses invalid.

The Global Severity Score = 33

The individual's total score for overall symptom severity of depression is 33 (the range is 0-52). This score is often associated with an individual who has severe depression. This score can also be compared to that of the general population using depressed and control norm groups. The individual's score is compared to the two norm groups to determine the percentage of those who scored above and below the individual.

When compared to the control norm group, the individual's score of 33 converts to a T-score of 124 and a percentile of 100.

When compared to the depressed norm group, the individual's score of 33 converts to a T-score of 59 and a percentile of 82.5.

The results indicate that when compared to the control norm group, the individual's overall symptom severity of depression is very much above average. This description implies that the individual scored higher than 100% of the control norm group. This description should be read in the context of the individual having scored higher than 82.5% of the depressed norm group. In contrast, compared to the depressed norm group, the individual's overall symptom severity of depression is slightly above average.

These scores should be evaluated against other clinical information, and any discrepancies should be clarified. Care should be taken that general medical conditions associated with frequent symptoms contained in CDS do not result in misleadingly high scores.

Support Indexes

The support indexes provide categorical judgements for Major Depression, Melancholic Features, Dysthymia, and Atypical Features. Nevertheless, there is a correspondence between diagnostic confidence and severity. Hence the diagnosis is more likely to be correct when the symptoms are more numerous and severe.

(For typical signs and symptoms of Major Depression, Melancholic Features, Dysthymic Disorder, & Atypical Features, see Appendix A.)

Diagnostic Support™ Index for Major Depression

The symptomatic concordance between the CDS-R responses and the DSM-IV diagnostic criterion A indicates that Major Depression is present in the individual. In this case, 8 of 9 symptom groups are present.

Diagnostic Support™ Index for Melancholic Features of Major Depression

The crosswalk from the CDS-R responses to the DSM-IV diagnostic criteria A and B is used to determine that Melancholic Features as a modifier of Major Depression are present in the individual, and 8 out of 8 symptom groups are present.

Diagnostic Support™ Index for Dysthymic Disorder

Not present

Diagnostic Support™ Index for Atypical Features

Not present

Care should be taken that general medical conditions associated with frequent symptoms contained in the CDS-R do not result in misleadingly high scores. Specific target symptoms of depression can be identified by inspecting the CDS-R responses through the HDRS scoring grid (next page).

The Hamilton Depression Rating Scales (HDRS)

CDS-R is a direct, self-rated adaptation of the 17 clinical signs of HDRS. These signs (or items) each represent symptoms that together comprise the key clinical features of depression, including all the diagnostic criteria of DSM-IV for major depression and dysthymic disorder.

The HDRS total score can range from 0 to 52. The individual obtained a score of 33. The breakdown of HDRS into the 17 scores serves as a guideline when specific diagnoses are targeted (see Appendix B).

The individual's 17 HDRS scores and brief interpretations provided in the next section should be considered in the context of the item descriptions in Appendix B.

Individual's HDRS scores and brief interpretation

No	HDRS item and range of levels	Score	Interpretation
H1	Depressed Mood (0-4)	2	Mild, occasional weeping. Feeling states spontaneously reported.
H2	Pathological Guilt (0-4)	3	Moderate. Holds belief that illness might be a punishment. Ruminates over past errors and sins. States that illness and suffering are deserved.
H3	Suicidal Tendency (0-4)	0	Absent.
H4	Initial Insomnia (0-2)	2	Obvious and severe, more than 30 minutes on most nights.
H5	Middle Insomnia (0-2)	2	Obvious and severe, patient wakes once or more after being asleep and has difficulty sleeping again. Any getting out of bed (other than to void), smoking, or reading in bed upon waking rates level 2.
H6	Late Insomnia (0-2)	2	Obvious and severe. Patient wakes over 60 minutes before the usual time and is unable to return to sleep. This must occur more than twice per week, or the patient scores level 1 on this item.
H7	Work and Interests (0-4)	2	Mild. Has to push him/her self to undertake normal daily activities. Has lost interest, sees no point in undertaking tasks, obtains little satisfaction.
H8	Psychomotor Retardation (0-4)	2	Moderate. Monotonous voice, delayed in answers to questions.
H9	Psychomotor Agitation (0-4)	3	Severe. Includes features of level 2. In addition, patient cannot stay in chair during interview. Patient paces.
H10	Psychic Anxiety (0-4)	3	Moderate. Behavioral evidence of anxiety (distinguish from agitation); spontaneously expresses feeling states in significant number and frequency.
H11	Somatic Anxiety (0-4)	3	Moderate. Greater number and frequency of symptoms than those in level 2 accompanied by more subjective distress which impairs normal functioning.
H12	Gastrointestinal Symptoms (0-2)	0	Absent.
H13	General Somatic Symptoms (0-2)	2	Obvious, severe. Patient tires very quickly; is exhausted much of the time. He/she spontaneously mentions these symptoms.
H14	Loss of Libido (0-2)	2	Obvious, severe, complete loss of sexual appetite; functional impotence since onset of present illness.
H15	Hypochondriasis (0-4)	3	Severe. Expresses convictions of organic disease to explain present condition (e.g., brain tumor, cancer).
H16	Loss of Insight (0-2)	1	Doubtful, mild, some denial.
H17	Loss of Weight (0-2)	1	Doubtful, trivial, less than 5 pounds weight lost.

Crosswalk Between DSM-IV Symptoms of Criterion A for Major Depressive Episode and CDS-R Statements

DSM-IV Criteria	Criteria Met	Corresponding CDS-R Item Number and Statement
1. Depressed mood	<input checked="" type="checkbox"/> 32	<input checked="" type="checkbox"/> Good spirits (no)
	<input checked="" type="checkbox"/> 16	<input checked="" type="checkbox"/> Feels like crying (yes)
	<input type="checkbox"/> 34	<input type="checkbox"/> Feels hopeless (yes)
	<input type="checkbox"/> 48	<input type="checkbox"/> Perceives miserable future (yes)
2. Anhedonia	<input checked="" type="checkbox"/> 25	<input checked="" type="checkbox"/> Experiences pleasure and satisfaction from activities (no)
	<input type="checkbox"/> 42	<input type="checkbox"/> Outgoing and social (no)
	<input checked="" type="checkbox"/> 3	<input checked="" type="checkbox"/> Has dropped interests and activities (yes)
	<input type="checkbox"/> 7	<input type="checkbox"/> Able to function (no)
3. Weight loss	<input checked="" type="checkbox"/> 2	<input type="checkbox"/> Losing weight (yes)
	<input checked="" type="checkbox"/> 52	<input checked="" type="checkbox"/> Noticeable weight loss (yes)
or weight gain	<input type="checkbox"/> 58	<input type="checkbox"/> Noticeable weight gain (yes)
or decreased appetite	<input type="checkbox"/> 36	<input type="checkbox"/> Appetite unchanged (no)
	<input type="checkbox"/> 50	<input type="checkbox"/> Loss of appetite (yes)
or increased appetite	<input type="checkbox"/> 57	<input type="checkbox"/> Elevated appetite (yes)
4. Insomnia	<input checked="" type="checkbox"/> 22	<input checked="" type="checkbox"/> Falling asleep takes longer than usual (yes)
	<input checked="" type="checkbox"/> 8	<input checked="" type="checkbox"/> Falling asleep takes over half an hour (yes)
	<input checked="" type="checkbox"/> 27	<input checked="" type="checkbox"/> Sleep disturbances (yes)
	<input checked="" type="checkbox"/> 19	<input checked="" type="checkbox"/> Suffers sleep interruptions (yes)
	<input checked="" type="checkbox"/> 35	<input checked="" type="checkbox"/> Wakes up too early (yes)
	<input checked="" type="checkbox"/> 11	<input checked="" type="checkbox"/> Awakes earlier than necessary (yes)
or hypersomnia	<input type="checkbox"/> 59	<input type="checkbox"/> Gets excess sleep daily (yes)
5. Psychomotor agitation	<input checked="" type="checkbox"/> 43	<input type="checkbox"/> Calm appearance (no)
	<input checked="" type="checkbox"/> 10	<input checked="" type="checkbox"/> Restless and fidgety (yes)
	<input checked="" type="checkbox"/> 6	<input checked="" type="checkbox"/> Disturbed and agitated (yes)
	<input checked="" type="checkbox"/> 37	<input checked="" type="checkbox"/> Paces around (yes)
or retardation	<input checked="" type="checkbox"/> 30	<input checked="" type="checkbox"/> Voice lacks expression (yes)
	<input type="checkbox"/> 47	<input type="checkbox"/> Can't get anything done (yes)
	<input type="checkbox"/> 21	<input type="checkbox"/> Slowed down/needs assistance with bathing and dressing (yes)
6. Fatigue/loss of energy	<input checked="" type="checkbox"/> 1	<input checked="" type="checkbox"/> Energetic (no)
	<input checked="" type="checkbox"/> 51	<input checked="" type="checkbox"/> Feels exhausted (yes)
7. Worthlessness/guilt	<input checked="" type="checkbox"/> 44	<input type="checkbox"/> Positive self-worth (no)
	<input checked="" type="checkbox"/> 24	<input checked="" type="checkbox"/> Regrets about the past are a problem (yes)
	<input checked="" type="checkbox"/> 20	<input checked="" type="checkbox"/> Feels worthless and ashamed (yes)
	<input checked="" type="checkbox"/> 15	<input checked="" type="checkbox"/> Sense of being punished for past (yes)
8. Ability to think or concentrate;	<input checked="" type="checkbox"/> 9	<input checked="" type="checkbox"/> Able to concentrate (no)
	<input checked="" type="checkbox"/> 28	<input checked="" type="checkbox"/> Mentally alert (no)
9. Morbid/suicidal ideas	<input type="checkbox"/> 29	<input type="checkbox"/> Feel life is worth living (no)
	<input type="checkbox"/> 17	<input type="checkbox"/> Frequent death wish (yes)
	<input type="checkbox"/> 46	<input type="checkbox"/> Suicidal thoughts (yes)
	<input type="checkbox"/> 12	<input type="checkbox"/> Death viewed as solution (yes)

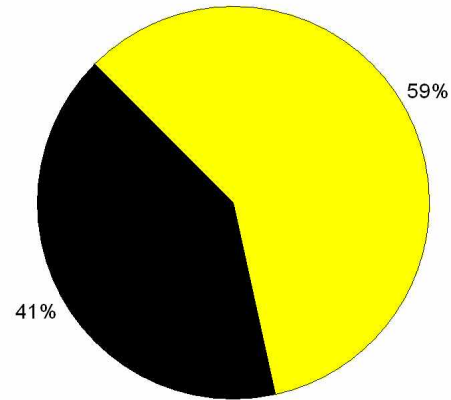
Crosswalk Between DSM-IV Symptoms of Criteria A and B for Melancholic Features and CDS-R Statements

DSM-IV Criteria	Criteria Met	Corresponding CDS-R Item Number and Statement
1. Pervasive anhedonia	<input checked="" type="checkbox"/> 3	<input checked="" type="checkbox"/> Has dropped interests and activities (yes)
2. Nonreactive mood	<input checked="" type="checkbox"/> 53	<input checked="" type="checkbox"/> Depressed mood irrespective of good events (yes)
3. Distinct quality	<input checked="" type="checkbox"/> 54	<input checked="" type="checkbox"/> Feelings of grief (no)
4. Diurnal variation	<input checked="" type="checkbox"/> 55	<input checked="" type="checkbox"/> Feels worst in the morning (yes)
5. Early awakening	<input checked="" type="checkbox"/> 11	<input checked="" type="checkbox"/> Awakes earlier than necessary (yes)
6. Retardation	<input checked="" type="checkbox"/> 47	<input type="checkbox"/> Can't get anything done (yes)
	21	<input type="checkbox"/> Slowed down/needs assistance with bathing and dressing (yes)
or Agitation	6	<input checked="" type="checkbox"/> Disturbed and agitated (yes)
	37	<input checked="" type="checkbox"/> Paces around (yes)
7. Anorexia	<input checked="" type="checkbox"/> 50	<input type="checkbox"/> Loss of appetite (yes)
or weight loss	52	<input checked="" type="checkbox"/> Noticeable loss of weight (yes)
8. Pathologic guilt	<input checked="" type="checkbox"/> 20	<input checked="" type="checkbox"/> Feels worthless/ashamed (yes)
	15	<input checked="" type="checkbox"/> Sense of being punished for past (yes)

Carroll Depression Scale-Revised (CDS-R) Responses

The following table lists CDS-R item responses. The pie graph shows the distribution of responses

Item	Response	Item	Response
1.	2	32.	2
2.	2	33.	1
3.	1	34.	2
4.	1	35.	1
5.	1	36.	1
6.	1	37.	1
7.	1	38.	2
8.	1	39.	2
9.	2	40.	2
10.	1	41.	2
11.	1	42.	1
12.	2	43.	1
13.	1	44.	1
14.	2	45.	1
15.	1	46.	2
16.	1	47.	2
17.	2	48.	2
18.	1	49.	1
19.	1	50.	2
20.	1	51.	1
21.	2	52.	1
22.	1	53.	1
23.	1	54.	2
24.	1	55.	1
25.	2	56.	2
26.	1	57.	2
27.	1	58.	2
28.	2	59.	2
29.	1	60.	1
30.	1	61.	2
31.	1		



Response 1 = Yes
 Response 2 = No

Appendix A – Signs and Symptoms of Disorders

1. Typical signs and symptoms of Major Depression are shown below.

- Sad mood
- Empty mood
- Loss of pleasure
- Loss of interest
- Weight loss/gain
- Increased/Decreased appetite
- Insomnia/Hypersomnia
- Psychomotor agitation/retardation
- Suicidal ideation
- Morbid ideation
- Fatigue/decreased energy
- Feeling worthless
- Pathologic guilt
- Diminished concentration
- Indecisiveness

2. Typical signs and symptoms of Melancholic Features of Major Depression are shown below.

- Pervasive anhedonia
- Non-reactive mood
- Distinct quality of depressed mood
- Diurnal morning worsening of mood
- Early morning awakening
- Marked psychomotor retardation/agitation
- Significant anorexia
- Significant weight loss
- Excessive or inappropriate guilt

3. Typical signs and symptoms of Dysthymic Disorder are the following.

- Depressed mood
- Overeating
- Insomnia/Hypersomnia
- Decreased appetite
- Low self-esteem
- Indecisiveness
- Fatigue/Decreased energy
- Weight gain
- Poor appetite
- Poor concentration
- Feeling hopeless

4. Typical signs and symptoms of Atypical Features for Major Depression or Dysthymic Disorder are shown below.

- Mood reactivity
- Increase in appetite
- Leaden paralysis
- Hypersomnia
- Significant weight gain
- Lifelong rejection sensitivity with social impairment

Appendix B – Hamilton Depression Rating Scales

HDRS interpretations should be placed in the context of the following item descriptions:

No	Item	Description
H1	Depressed Mood	Patient is/feels sad, hopeless, gloomy, pessimistic, weeping, worthless. Severely depressed patients may “go beyond” weeping.
H2	Pathological Guilt	Feelings of guilt and irrational self-blame.
H3	Suicidal Tendency	Rate for feelings or behavior of the past week.
H4	Initial Insomnia	Patient has difficulty getting to sleep, as part of present illness; distinguished from habitual insomnia, note where hypnotics are being used.
H5	Middle Insomnia	Patient is restless and disturbed or wakes during the night.
H6	Late Insomnia	Patient wakes in early hours of the morning and is unable to fall asleep again. Not often present without initial and/or middle insomnia.
H7	Work and Interests	Apathy; loss of pleasure and interest in work, hobbies, and social activities; inability to obtain satisfaction.
H8	Psychomotor Retardation	Slowing of thought, speech, and movement. Often shows diurnal variation.
H9	Psychomotor Agitation	In mild form, can be present together with mild retardation. May also have motor agitation with verbal retardation, often shows diurnal variation.
H10	Psychic Anxiety	Patient is tense, unable to relax or concentrate, irritable, easily startled, worried over trivia (distinguish from depressive ruminations); phobic symptoms, apprehension of impending doom, fear of loss of control, panic episodes.
H11	Somatic Anxiety	Physiological concomitants of anxiety, has “butterflies,” indigestion, stomach cramps, belching, diarrhea, palpitations. Patient faints, hyperventilates, has paresthesias, sweats, experiences flushing, tremor, headache, blurred vision, and/or urinary frequency.
H12	Gastrointestinal Symptoms	Loss of appetite and dry mouth (diminished salivary flow) are more common and characteristic than constipation. Heavy feelings in abdomen also occur. Distinguish from gastrointestinal somatic anxiety.
H13	General Somatic Symptoms	Fatigue, exhaustion, loss of energy, diffuse muscular aches, heavy dragging feelings in arms or legs.
H14	Loss of Libido	Difficult symptom to assess, especially in the elderly. Rate only definite change associated with illness.
H15	Hypochondriasis	Morbid preoccupation with real or imagined bodily symptoms or functions.
H16	Loss of Insight	Denial of “nervous” illness. Attributes illness to virus, overwork, climate, physical symptoms. Does not recognize, breaks with reality.
H17	Loss of Weight	Symptom occurred since onset of illness. Estimate weight loss in the absence of definite information.

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End of Report