



UNC CFAR Social and Behavioral Science Research Core SABI Database

INSTRUMENT TITLE: Hospital Anxiety and Depression Scale (HADS)

SOURCE ARTICLE: Zigmond, A.S., Snaith, R.P. (1983). The hospital anxiety and depression scale. *Acta Psychiatr Scand*, 67(6): 361-370.

RESPONSE OPTIONS: 0= No, not at all; 1= No, not much; 2= Yes sometimes; 3= Yes definitely

SURVEY ITEMS:

1. I wake early and then sleep badly for the rest of the night.
2. I get very frightened or have panic feelings for apparently no reason at all.
3. I feel miserable and sad.
4. I feel anxious when I got out of the house on my own
5. I have lost interest in things
6. I get palpitations, or sensations of 'butterflies' in my stomach or chest.
7. I have a good appetite
8. I feel scared of frightened.
9. I feel life is not worth living
10. I still enjoy things I used to do.
11. I am restless and can't keep still.
12. I am more irritable than usual.

TERMS OF USE:

Individuals may use this information for research or educational purposes only and may not use this information for commercial purposes. When using this instrument, please cite:

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13. I feel as if I have slowed down.

14. Worrying thoughts constantly go through my mind.

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