11-ITEM Kutcher Adolescent Depression Scale: KADS-11

NAME: ___________________________________________________

CHART NUMBER: _________________________________________

DATE: ___________________________ ASSESSMENT COMPLETED BY: ________________________________________

OVER THE LAST WEEK, HOW HAVE YOU BEEN "ON AVERAGE" OR "USUALLY" REGARDING THE FOLLOWING ITEMS:

1. Low mood, sadness, feeling blah or down, depressed, just can't be bothered.

   □ 0 - Hardly Ever  □ 1 - Much of The Time  □ 2 - Most of The Time  □ 3 - All of The Time

2. Irritable, loosing your temper easily, feeling pissed off, loosing it.

   □ 0 - Hardly Ever  □ 1 - Much of The Time  □ 2 - Most of The Time  □ 3 - All of The Time

3. Sleep Difficulties - different from your usual (over the years before you got sick): trouble falling asleep, lying awake in bed.

   □ 0 - Hardly Ever  □ 1 - Much of The Time  □ 2 - Most of The Time  □ 3 - All of The Time

4. Feeling Decreased Interest In: hanging out with friends; being with your best friend; being with your partner / boyfriend / girlfriend; going out of the house; doing school work or work; doing hobbies or sports or recreation.

   □ 0 - Hardly Ever  □ 1 - Much of The Time  □ 2 - Most of The Time  □ 3 - All of The Time

5. Feelings of worthlessness, hopelessness, letting people down, not being a good person.

   □ 0 - Hardly Ever  □ 1 - Much of The Time  □ 2 - Most of The Time  □ 3 - All of The Time
6. Feeling tired, feeling fatigued, low in energy, hard to get motivated, have to push to get things done, want to rest or lie down a lot.

   □  □  □  □
   0 - Hardly Ever  1 - Much of The Time  2 - Most of The Time  3 - All of The Time

7. Trouble concentrating, can't keep your mind on schoolwork or work, daydreaming when you should be working, hard to focus when reading, getting "bored" with work or school.

   □  □  □  □
   0 - Hardly Ever  1 - Much of The Time  2 - Most of The Time  3 - All of The Time

8. Feeling that life is not very much fun, not feeling good when usually (before getting sick) would feel good, not getting as much pleasure from fun things as usual (before getting sick).

   □  □  □  □
   0 - Hardly Ever  1 - Much of The Time  2 - Most of The Time  3 - All of The Time


   □  □  □  □
   0 - Hardly Ever  1 - Much of The Time  2 - Most of The Time  3 - All of The Time

10. Physical feelings of worry like: headaches, butterflies, nausea, tingling, restlessness, diarrhea, shakes or tremors.

    □  □  □  □
    0 - Hardly Ever  1 - Much of The Time  2 - Most of The Time  3 - All of The Time

11. Thoughts, plans or actions about suicide or self-harm.

    □  □  □  □
    0 - No thoughts or plans or actions  1 - Occasional thoughts, no plans or actions  2 - Frequent thoughts, no plans or actions  3 - Plans and/or actions that have hurt

TOTAL SCORE:
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OVERVIEW

The Kutcher Adolescent Depression Scale (KADS) is a self-report scale specifically designed to diagnose and assess the severity of adolescent depression, and versions include a 16-item, a 11-item and an abbreviated 6-item scale.

SCORING INTERPRETATION

There are no validated diagnostic categories associated with particular ranges of scores. All scores should be assessed relative to an individual patient's baseline score (higher scores indicating worsening depression, lower scores suggesting possible improvement).

REFERENCE


Self-report instruments commonly used to assess depression in adolescents have limited or unknown reliability and validity in this age group. We describe a new self-report scale, the Kutcher Adolescent Depression Scale (KADS), designed specifically to diagnose and assess the severity of adolescent depression. This report compares the diagnostic validity of the full 16-item instrument, brief versions of it, and the Beck Depression Inventory (BDI) against the criteria for major depressive episode (MDE) from the Mini International Neuropsychiatric Interview (MINI). Some 309 of 1,712 grade 7 to grade 12 students who completed the BDI had scores that exceeded 15. All were invited for further assessment, of whom 161 agreed to assessment by the KADS, the BDI again, and a MINI diagnostic interview for MDE. Receiver operating characteristic (ROC) curve analysis was used to determine which KADS items best identified subjects experiencing an MDE. Further ROC curve analyses established that the overall diagnostic ability of a six-item subscale of the KADS was at least as good as that of the BDI and was better than that of the full-length KADS. Used with a cutoff score of 6, the six-item KADS achieved sensitivity and specificity rates of 92% and 71%, respectively—a combination not achieved by other self-report instruments. The six-item KADS may prove to be an efficient and effective means of ruling out MDE in adolescents.