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Montgomery-Asberg Depression Rating Scale (MADRS)**

Availability:	Please visit this website for more information about the instrument: Montgomery-Asberg Depression Rating Scale .
Classification:	Supplemental: Mitochondrial Disease (Mito) and Parkinson’s Disease (PD)
Short Description of	The Montgomery-Asberg Depression Rating Scale (MADRS) is a 10-item rater-administered instrument that was developed to measure changes in depressive symptoms in secondary treatment and it is widely used in that regard. A self-report version is also available.
Rationale/Justification	<p>Strengths/Weaknesses: As noted above, the instrument was designed originally to measure change in depression symptoms in response to intervention for research purposes. Over time it has also come to be used as a brief screening tool in clinical populations. There have been some concerns raised, however, that the measure may lack sufficient construct validity, and may therefore not be sufficiently unidimensional to provide a reliable assessment of depression severity (Bech et al., 2014). Similarly, concordance between self and physician ratings is only moderate to good, and therefore caution must be taken to ensure they are not used interchangeably (Cunningham et al., 2011).</p> <p>Specific to Mitochondrial Disease: Given the prevalence of mood concerns in mitochondrial disease, this is a useful tool in providing a brief method to screen for symptoms and to measure change over time in response to intervention.</p> <p>Advantages: The measure is very brief and can be completed by a physician or other provider familiar with the individual for those who may be too impaired to complete a self-report measure.</p> <p>Limitations: Research suggests the 10 item scale may be comprised of 4 underlying factors: sadness, negative thoughts, detachment and neurovegetative symptoms (Quilty et al., 2013). The latter may be inflated in individuals with mitochondrial disease, and therefore results must be interpreted with caution whether they represent fatigue and other physical consequences of the disease or whether they represent symptoms of depression. Removal of physical symptoms reduces specificity and increases specificity in other populations with neurological and physical impairment, and it is may therefore be recommended that a higher cutoff score be utilized in populations in which physical symptoms of the disorder and depression may overlap (Reijnders et al., 2010)</p>
Scoring:	Each item is rated on a 0-6 scale, with scores running from 0-60. Higher scores indicate a greater severity of depression. Generally a cut score of 12 has been suggested to represent the presence of clinically significant depression symptoms, though some groups have suggested that a cut score of 8 produces more acceptable sensitivity and specificity (Kjaergaard et al., 2014)

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References:	<p>Bech, P., Allerup, P., Larsen, E.R., Csillag, C., and Licht, R.W. (2014). The Hamilton Depression Scale (HAM-D) and the Montgomery-Asberg Depression Scale (MADRS). A psychometric re-analysis of the European genome-based therapeutic drugs for depression study using Rasch analysis. <i>Psychiatry Research</i> 217: 226-232.</p> <p>Cunningham, J.L., Wernroth, L., vonKnorring, L., Berglund, L., and Ekselius, L. (2011). Agreement between physicians' and patient's ratings on the Montgomery-Asberg Depression Rating Scale. <i>Journal of Affective Disorders</i> 135: 148-153.</p> <p>Kjaergaard, M., Elisabeth, C., Wang, A., Waterloo, K and Jorde, R (2014). A study of the psychometric properties of the Beck Depression Inventory-II, the Montgomery and Asberg Depression Rating Scale, and the Hospital Anxiety and Depression Scale in a sample from a healthy population. <i>Scandinavian Journal of Psychology</i> 55: 83-89.</p> <p>Montgomery SA, Asberg M (April 1979). "A new depression scale designed to be sensitive to change". <i>British Journal of Psychiatry</i> 134: 382-89.</p> <p>Quilty, L.C., Robinson, J.J., Rolland, J.P., De Fruyt, F., Rouillon, F., and Bagby, R.M. (2013). The structure of the Montgomery-Asberg depression rating scale over the course of treatment for depression. <i>International Journal of Methods in Psychiatric Research</i>. 22(3): 175-184.</p> <p>Reijnders, J.S.A.M., Lousberg, R., Leentjens, A.F.G. (2010). Assessment of depression in Parkinson's disease: the contribution of somatic symptoms to the clinimetric performance of the Hamilton and Montgomery-Asberg rating scales. <i>Journal of Psychomatic Research</i> 68: 561-565.</p>
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