**HAM-A [1]**

**Purpose & Evidence:**

- **Purpose:** The Hamilton Anxiety Scale (HAM-A) assesses the severity of anxiety symptoms (Hamilton 1959). It measures overall anxiety, psychic anxiety, and somatic anxiety.
- **Target population:** Children, adolescents, and adults
- **Evidence:**
  - The reliability and the concurrent validity of the HAM-A and its sub-scales proved to be sufficient (Maier et al. 1988)
  - The most widely used semi-structured assessment scale in treatment outcome studies of anxiety (Bruss et al. 1994)
- **Advantages/Limitations**
  - **Advantages**
    - Shows a satisfactory degree of consistency (Beneke 1987)
  - **Limitations**
    - Anxiolytic and antidepressant effects cannot be clearly distinguished (Maier et al. 1988)
    - Unsuitable for differential diagnosis-- has relatively poor resolution (Beneke 1987)
    - Poor ability to discriminate between anxiolytic and antidepressant effects

**Test features:**

- **Estimated time:** 10-15 minutes to administer and score
- **Length:** 14 items
- **Administered by:** Patient Interview
- **Intended settings:** Clinical and research
- **Scoring and Interpretation:** Total score range is 0-56, with the following question scale on feelings and symptoms: 0=not present, 1=mild, 2=moderate, 3=severe, 4=very severe. Results:

(Printable version)

**References:**
- Methodological investigations of the Hamilton Anxiety Scale [3]
The assessment of anxiety states by rating [5]
The Hamilton Anxiety Scale: reliability, validity and sensitivity to change in anxiety and depressive disorders [6]

Source URL: https://www.opioidrisk.com/node/1212

Links:
[1] https://www.opioidrisk.com/node/1212