HAM-A: Hamilton Anxiety Scale [1]

Developed by Dr. Max Hamilton, 1959

Description

- **Length/Time**: 14 items, 10-15 minutes to administer and score
- **Developed by**: Max Hamilton, 1959
- **Target Population**: Children, adolescents, and adults
- **Intended Settings**: Clinical and research
- **Assesses**: The severity of anxiety symptoms
- **Administered by**: Patient Interview

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)

Indications

- A test that measures overall anxiety, psychic anxiety, and somatic anxiety. It is also known as the Hamilton Anxiety Rating Scale (HARS)

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

View References


Source URL: [https://www.opioidrisk.com/node/951](https://www.opioidrisk.com/node/951)

Links:
[1] [https://www.opioidrisk.com/node/951](https://www.opioidrisk.com/node/951)