## Young mania rating scale



The Young Mania Rating Scale (Young et al. 1978) is comprised of 11 items and used to rate symptoms of mania. Seven items have a score range of 0 to 4 while four items have scores ranging from 0 to 8. The total score ranges from 0 to 56 with lower scores representing fewer symptom and higher scores representing more symptoms. Scores are based on clinician-assessment and self-report by the patient. Young et al. (1978) reported a correlation between raters of 0. 93 in 20 subjects based on YMRS. An acceptable internal consistency ( $\alpha = .80$ ) was demonstrated by Fristad et al. (1995) in 30 participants evaluated on YMRS whereas Youngstrom et al. (2002) reported a high internal consistency ( $\alpha = .91$ ). Gracious et al. (2002) evaluated a parent version of the YMRS in which the custodial parent also completed the rating scale and found an acceptable internal consistency ( $\alpha = .75$ ). The Young Mania Rating Scale also differentiates bipolar disorder from attention deficit hyperactivity disorder (Fristad et al. 1992)

YMRS is not ideal to evaluate mixed episode bipolar disorder as depressed mood is not assessed by this scale. Also, YMRS is partly subjective and it is difficult to obtain a reliable assessment at a time when the thoughts are disordered. Another drawback of this scale is that four items have double rating in it. These four items are irritability, speech (rate and amount), thought content and disruptive-aggressive behaviour. Double rating could affect the reliability of the outcome assessment.

Psychiatric Rating Scale (BPRS)

The Brief Psychiatric Rating Scale (Lachar et al. 2001) constitutes 18 items and evaluates mood symptoms, positive symptoms of schizophrenia and

general psychopathology symptoms. It involves assessment by a clinician and patient self-report. For each item, score can range from 1 to 7 (severe). Hughes et al. (2001) developed a revised anchored version of the Brief Psychiatric Rating Scale for Children (BPRS-C) which evaluates 21 symptoms. They reported a better inter-rater reliability and good internal consistency ( $\alpha$  = .83). The BPRS does not evaluate negative symptoms and a separate tool has to be used to measure the same.

Children's Depression Rating Scale (CDRS)

The Children's Depression Rating Scale (Poznanski et al. 1979, 1983) is comprised of 16 items. It evaluates the severity of depression in children and involves a semi-structured interview with the patient. A score of 30 and above on the CDRS implies significant depression whereas a score of 20 to 29 is considered borderline. Poznanski et al. (1979) evaluated 30 inpatient children based on CDRS and reported good inter-rater reliability.

Children's Global Assessment Scale (CGAS)

The Children's Global Assessment Scale (Shaffer et al. 1983) evaluates the general level of functioning in children. This scale is adapted from the Global Assessment Scale (Endicott et al. 1976). The scores on CGAS range from 1 (impaired) to 100 (healthy). Scores above 80 suggest a good level of functioning whereas a score below 10 indicate that the patient needs constant supervision. The authors report that the scale has an inter-rater reliability of 0. 95 and a test-retest reliability of 0. 85.

Child Mania Rating Scale - Parent Version (CMRS-P)

The Children Mania Rating Scale – Parent Version (Pavuluri et al. 2006) is a 21-item rating tool. Scores on each item can range from 0 (never/rarely) to 3 (very often). Higher score on the CMRS-P represents a worse condition. Information is gathered from the parents to screen their children for bipolar disorder. This rating scale also helps in differentiating bipolar disorder from attention deficit hyperactivity disorder. The authors reported an internal consistency and test-retest reliability of 0. 96 for this scale.

Hamilton Anxiety Rating Scale (HAM-A)

The Hamilton Anxiety Rating Scale (Hamilton. 1959) is a 14-item scale which measures the severity of anxiety. Scores on each item can range from 0 (not present) to 4 (very severe). Total scores on this scale can range from 0 to 56. A score of below 17 is considered as mild anxiety whereas a score of 25 to 30 and above is considered as moderate to severe anxiety. An inter-rater reliability of 0. 89 is reported by the author.

Kutcher Adolescent Depression Scale (KADS)

The Kutcher Adolescent Depression Scale (Brooks et al. 2003) consists of 16 items. It assesses the severity of depression in adolescents and involves patient self-report. Each item on the KADS is scored on a scale of 0 (hardly ever) to 4 (all of the time). Higher scores on the KADS represent worsening of depressive symptomatology. An eleven-item KADS scale and a six-item KADS scale have also been described by the authors. The internal consistency of 16-item, 11-item and 6-item KADS were reported to be 0. 82, 0. 84 and 0. 80 respectively.

Nisonger Child Behavior Rating Form (NCBRF)

The Nisonger Child Behavior Rating Form (Tasse et al. 1996) evaluates behavioural problems in children and adolescents. The NCBRF constitutes a social competence section and a problem behaviours section. The social competence section of the NCBRF consists of 10 items with scores ranging from 0 (not true) to 3 (always true). Higher score represent better behaviour in the social competence section. Problem behaviour section is comprised of 60 items with scores ranging from 0 (did not occur) to 3 (occurred a lot). Higher scores in the problem behaviour section of the NCBRF represent greater behavioural disturbances.

Positive and Negative Syndrome Scale (PANSS)

The Positive and Negative Syndrome Scale (Kay et al. 1989) is a 30-item scale which evaluates positive symptoms, negative symptoms and general psychopathology in patients with schizophrenia. Each item has a score ranging from 1 (absent) to 7 (extreme) with higher score representing worse functioning. The authors reported good inter-rater reliability and internal consistency for this scale.