**Cornell Scale for Depression in Dementia (CSDD)**

The CSDD is specially designed for assessing depression in elderly residents with dementia. Answer the items in each section and enter the value of the answer in the column labeled Score. Sum the scores of the items to determine the total score, and apply the interpretation rule that appears at the bottom of the page.

The ratings should be based on symptoms and signs occurring during the week prior to this assessment. No score should be given if symptoms result from physical disability or illness.

Resident Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Mood-Related Signs** | **Absent\*** | **Mild or Intermittent** | **Severe** | **Score** |
| 1. Anxiety (anxious expression, ruminations, worrying) | 0 | 1 | 2 | \_\_\_\_ |
| 2. Sadness (sad expression, sad voice, tearfulness) | 0 | 1 | 2 | \_\_\_\_ |
| 3. Lack of reactivity to pleasant events | 0 | 1 | 2 | \_\_\_\_ |
| 4. Irritability (easily annoyed, short tempered) | 0 | 1 | 2 | \_\_\_\_ |
| **Behavioral Disturbance** | | | |  |
| 5. Agitation (restlessness, handwringing, hairpulling) | 0 | 1 | 2 | \_\_\_\_ |
| 6. Retardation (slow movements, slow speech, slow reactions) | 0 | 1 | 2 | \_\_\_\_ |
| 7. Multiple physical complaints (score 0 if GI symptoms only) | 0 | 1 | 2 | \_\_\_\_ |
| 8. Loss of interest (less involved in usual activities; score only if change occurred acutely, that is, in less than one month) | 0 | 1 | 2 | \_\_\_\_ |
| **Physical Signs** | | | |  |
| 9. Appetite loss (eating less than usual) | 0 | 1 | 2 | \_\_\_\_ |
| 10. Weight loss (score 2 if greater than 5 lb in one month) | 0 | 1 | 2 | \_\_\_\_ |
| 11. Lack of energy (fatigues easily, unable to sustain activities; score only if change occurred acutely, that is, in less than one month) | 0 | 1 | 2 | \_\_\_\_ |
| **Cyclic Functions** | | | |  |
| 12. Diurnal variation of mood symptoms worse in the morning | 0 | 1 | 2 | \_\_\_\_ |
| 13. Difficulty falling asleep later than usual for the resident | 0 | 1 | 2 | \_\_\_\_ |
| 14. Multiple awakening during sleep | 0 | 1 | 2 | \_\_\_\_ |
| 15. Early morning awakening earlier than usual for this individual | 0 | 1 | 2 | \_\_\_\_ |
| **Ideational Disturbance** | | | |  |
| 16. Suicide (feels life is not worth living, has suicidal wishes, or makes suicide attempt) | 0 | 1 | 2 | \_\_\_\_ |
| 17. Poor self-esteem (self-blame, self-depreciation, feelings of failure) | 0 | 1 | 2 | \_\_\_\_ |
| 18. Pessimism (anticipation of the worst) | 0 | 1 | 2 | \_\_\_\_ |
| 19. Mood-congruent delusions (delusions of poverty, illness, or loss) | 0 | 1 | 2 | \_\_\_\_ |
| **Total Score =** | | | | \_\_\_\_ |

\* Assign the item a score of 0 if you cannot detect or evaluate the sign or symptom.   
  
Adapted from: Alexopoulos, et al. Cornell Scale for Depression in Dementia. Biological Psychiatry 1988;23(3):271-284.