



Investigation of C-reactive Protein (CRP) in Never-Treated Depressed Patients

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Cite as: Elrassas H, Mohamed A, Shaker N, Sultan M, Zeidan T, Abdeen M. Investigation of C-reactive Protein (CRP) in Never-Treated Depressed Patients. Open Psychol J, 2026; 19: e18743501453955. <http://dx.doi.org/10.2174/0118743501453955260830101707>



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Received: November 27, 2025

Revised: May 16, 2026

Accepted: June 03, 2026

Published: September 02, 2026



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Hamilton Anxiety Rating Scale (HAM-A)

Reference: Hamilton M. The assessment of anxiety states by rating. Br J Med Psychol 1959; 32:50-55.

Rating Clinician-rated

Administration time 10-15 minutes

Main purpose To assess the severity of symptoms of anxiety

Population Adults, adolescents and children

Commentary

The HAM-A was one of the first rating scales developed to measure the severity of anxiety symptoms, and is still widely used today in both clinical and research settings. The scale consists of 14 items, each defined by a series of symptoms, and measures both psychic anxiety (mental agitation and psychological distress) and somatic anxiety (physical complaints related to anxiety). Although the HAM-A remains widely used as an outcome measure in clinical trials, it has been criticized for its sometimes poor ability to discriminate between anxiolytic and antidepressant effects, and somatic anxiety versus somatic side effects. The HAM-A does not provide any standardized probe questions. Despite this, the reported levels of interrater reliability for the scale appear to be acceptable.

Scoring

Each item is scored on a scale of 0 (not present) to 4 (severe), with a total score range of 0-56, where <17 indicates mild severity, 18-24 mild to moderate severity and 25-30 moderate to severe.

Versions

The scale has been translated into: Cantonese for China, French and Spanish. An IVR version of the scale is available from Healthcare Technology Systems.

Additional references

Maier W, Buller R, Philipp M, Heuser I. The Hamilton Anxiety Scale: reliability, validity and sensitivity to change in anxiety and depressive disorders. J Affect Disord 1988;14(1):61-8.

Borkovec T and Costello E. Efficacy of applied relaxation and cognitive behavioral therapy in the treatment of generalized anxiety disorder. J Clin Consult Psychol 1993; 61(4):611-19

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The HAM-A is in the public domain.

Hamilton Anxiety Rating Scale (HAM-A)

Below is a list of phrases that describe certain feeling that people have. Rate the patients by finding the answer which best describes the extent to which he/she has these conditions. Select one of the five responses for each of the fourteen questions.

0 = Not present, 1 = Mild, 2 = Moderate, 3 = Severe, 4 = Very severe.

1 Anxious mood

Worries, anticipation of the worst, fearful anticipation, irritability.

2 Tension

Feelings of tension, fatigability, startle response, moved to tears easily, trembling, feelings of restlessness, inability to relax.

3 Fears

Of dark, of strangers, of being left alone, of animals, of traffic, of crowds.

4 Insomnia

Difficulty in falling asleep, broken sleep, unsatisfying sleep and fatigue on waking, dreams, nightmares, night terrors.

5 Intellectual

Difficulty in concentration, poor memory.

6 Depressed mood

Loss of interest, lack of pleasure in hobbies, depression, early waking, diurnal swing.

7 Somatic (muscular)

Pains and aches, twitching, stiffness, myoclonic jerks, grinding of teeth, unsteady voice, increased muscular tone.

8 Somatic (sensory)

Tinnitus, blurring of vision, hot and cold flushes, feelings of weakness, pricking sensation.

9 Cardiovascular symptoms

Tachycardia, palpitations, pain in chest, throbbing of vessels, fainting feelings, missing beat.

10 Respiratory symptoms

Pressure or constriction in chest, choking feelings, sighing, dyspnea.

11 Gastrointestinal symptoms

Difficulty in swallowing, wind abdominal pain, burning sensations, abdominal fullness, nausea, vomiting, borborygmi, looseness of bowels, loss of weight, constipation.

12 Genitourinary symptoms

Frequency of micturition, urgency of micturition, amenorrhea, menorrhagia, development of frigidity, premature ejaculation, loss of libido, impotence.

13 Autonomic symptoms

Dry mouth, flushing, pallor, tendency to sweat, giddiness, tension headache, raising of hair.

14 Behavior at interview

Fidgeting, restlessness or pacing, tremor of hands, furrowed brow, strained face, sighing or rapid respiration, facial pallor, swallowing, etc.

Name:

Date:

Beck Depression Inventory II

Select the **one statement** that best describes the way you have been feeling during the **past two weeks, including today**.

Sadness

- ☐ 0 I do not feel sad.
- ☐ 1 I feel sad much of the time.
- ☐ 2 I am sad all the time.
- ☐ 3 I am so sad or unhappy that I can't stand it.

Pessimism

- ☐ 0 I am not discouraged about my future.
- ☐ 1 I feel more discouraged about my future than I used to be.
- ☐ 2 I do not expect things to work out for me.
- ☐ 3 I feel my future is hopeless and will only get worse.

Past Failure

- ☐ 0 I do not feel like a failure.
- ☐ 1 I have failed more than I should have.
- ☐ 2 As I look back, I see a lot of failures.
- ☐ 3 I feel I am a total failure as a person.

Loss of Pleasure

- ☐ 0 I get as much pleasure as I ever did from the things I enjoy.
- ☐ 1 I don't enjoy things as much as I used to.
- ☐ 2 I get very little pleasure from the things I used to enjoy.
- ☐ 3 I can't get any pleasure from the things I used to enjoy.

Guilty Feelings

- ☐ 0 I don't feel particularly guilty.
- ☐ 1 I feel guilty over many things I have done or should have done.
- ☐ 2 I feel quite guilty most of the time.
- ☐ 3 I feel guilty all of the time.

Punishment Feelings

- ☐ 0 I don't feel I am being punished.
- ☐ 1 I feel I may be punished.
- ☐ 2 I expect to be punished.
- ☐ 3 I feel I am being punished.

Self-Dislike

- ☐ 0 I feel the same about myself as ever.
- ☐ 1 I have lost confidence in myself.
- ☐ 2 I am disappointed in myself.
- ☐ 3 I dislike myself.

Self-Criticalness

- ☐ 0 I don't criticize or blame myself more than usual.
- ☐ 1 I am more critical of myself than I used to be.
- ☐ 2 I criticize myself for all of my faults.
- ☐ 3 I blame myself for everything bad that happens.

Suicidal Thoughts or Wishes

- ☐ 0 I don't have any thoughts of killing myself.
- ☐ 1 I have thoughts of killing myself, but I would not carry them out.
- ☐ 2 I would like to kill myself.
- ☐ 3 I would kill myself if I had the chance.

Crying

- ☐ 0 I don't cry any more than I used to.
- ☐ 1 I cry more than I used to.
- ☐ 2 I cry over every little thing.
- ☐ 3 I feel like crying, but I can't.

Agitation

- ☐ 0 I am no more restless or wound up than usual.
- ☐ 1 I feel more restless or wound up than usual.
- ☐ 2 I am so restless or agitated that it's hard to stay still.
- ☐ 3 I am so restless or agitated that I have to keep moving or doing something.

Loss of Interest

- ☐ 0 I have not lost interest in other people or activities.
- ☐ 1 I am less interested in other people or things than before.
- ☐ 2 I have lost most of my interest in other people or things.
- ☐ 3 It's hard to get interested in anything.

Indecisiveness

- ☐ 0 I make decisions about as well as ever.
- ☐ 1 I find it more difficult to make decisions than usual.
- ☐ 2 I have much greater difficulty in making decisions than I used to.
- ☐ 3 I have trouble making any decisions.

Worthlessness

- ☐ 0 I do not feel I am worthless.
- ☐ 1 I don't consider myself as worthwhile and useful as I used to.
- ☐ 2 I feel more worthless as compared to other people.
- ☐ 3 I feel utterly worthless.

Loss of Energy

- ☐ 0 I have as much energy as ever.
- ☐ 1 I have less energy than I used to have.
- ☐ 2 I don't have enough energy to do very much.
- ☐ 3 I don't have enough energy to do anything.

Changes in Sleeping Pattern

- ☐ 0 I have not experienced any change in my sleeping pattern.
- ☐ 1 I sleep somewhat more than usual.
- ☐ 2 I sleep somewhat less than usual.
- ☐ 3 I sleep a lot more than usual.
- ☐ 4 I sleep a lot less than usual.
- ☐ 5 I sleep most of the day.
- ☐ 6 I wake up 1-2 hours early and can't get back to sleep.

Irritability

- ☐ 0 I am no more irritable than usual.
- ☐ 1 I am more irritable than usual.
- ☐ 2 I am much more irritable than usual.
- ☐ 3 I am irritable all the time.

Changes in Appetite

- ☐ 0 I have not experienced any changes in my appetite.
- ☐ 1 My appetite is somewhat less than usual.
- ☐ 2 My appetite is somewhat greater than usual.
- ☐ 3 My appetite is much less than before.
- ☐ 4 My appetite is much greater than usual.
- ☐ 5 I have no appetite at all.
- ☐ 6 I crave food all the time.

Concentration Difficulty

- ☐ 0 I can concentrate as well as ever.
- ☐ 1 I can't concentrate as well as usual.
- ☐ 2 It's hard to keep my mind on anything for very long.
- ☐ 3 I find I can't concentrate on anything.

Tiredness or Fatigue

- ☐ 0 I am no more tired or fatigued than usual.
- ☐ 1 I get more tired or fatigued more easily than usual.
- ☐ 2 I am too tired or fatigued to do a lot of the things I used to do.
- ☐ 3 I am too tired or fatigued to do most of the things I used to do.

Loss of Interest in Sex

- ☐ 0 I have not noticed any recent change in my interest in sex.
 - ☐ 1 I am less interested in sex than I used to be.
 - ☐ 2 I am much less interested in sex now.
 - ☐ 3 I have lost interest in sex completely.
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Total Score _____

0 – 13 Minimal depression

14 - 19 Mild depression

20 – 28 moderate depression

29 – 69 severe depression

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