## Depressive Disorders Variable List
(symptoms and diagnoses)

<table>
<thead>
<tr>
<th>Name</th>
<th>Label</th>
<th>Symptom</th>
<th>Diagnosis</th>
</tr>
</thead>
<tbody>
<tr>
<td>J4NDEP1</td>
<td>Period of depressed/irritable mood</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>J4NDEP2</td>
<td>Anhedonia or loss of interest</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>J4NDEP3</td>
<td>Weight loss / gain or appetite disturbance</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>J4NDEP4</td>
<td>Insomnia or hypersomnia nearly every day</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>J4NDEP5</td>
<td>Psychomotor agitation / retardation</td>
<td>X</td>
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</tr>
<tr>
<td>J4NDEP6</td>
<td>Fatigue or loss of energy</td>
<td>X</td>
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<tr>
<td>J4NDEP7</td>
<td>Worthlessness or guilt</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>J4NDEP8</td>
<td>Problems with thinking / deciding</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>J4NDEP9</td>
<td>Think about, plan or attempt suicide</td>
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</table>

### dysthymia symptoms

| J4NDYS1 | Dysthymia                                        | X       |           |
| J4NDYS2 | Poor appetite weight change dysthymia            | X       |           |
| J4NDYS3 | Insomnia                                         | X       |           |
| J4NDYS4 | Fatigue/ tiredness/ dysthymia                    | X       |           |
| J4NDYS5 | Low self-esteem/ dysthymia                       | X       |           |
| J4NDYS6 | Difficulty making decisions, poor concentration dysthymia | X       |           |
| J4NDYS7 | Hopelessness dysthymia                           | X       |           |

### Major Depressive Disorders

<p>| J4 DEP   | Major depressive episode / dsm-4                | X       |           |
| J4 DYS   | Dysthymia                                       | X       |           |
| J4 DNOS  | Depressive Disorder NOS (not otherwise specified) | X       |           |
| J4 ANYD  | Any Depression                                  | X       |           |
| J4 DD    | Double Depression                               | X       |           |
| J4 DIRR  | Depression with Irritable Mood                  | X       |           |</p>
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<tr>
<th>variable</th>
<th>description</th>
<th>PAPA</th>
<th>Weighted %</th>
<th>N</th>
<th>CAPA (cohage &lt; 16)</th>
<th>Weighted %</th>
<th>N</th>
<th>YAPA (cohage 19 – 21)</th>
<th>Weighted %</th>
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<td>1.28</td>
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</table>
J4NDEP1: Period of depressed / irritable mood
J4NDYS1: Dysthyemia

Depressive Disorders Variable List
Description
Raw Variable(s)
CAPA Interview Section
Glossary Notes
Additional Variables
N, Weighted Prevalence, and Missing Data
Citations
SAS CODE
Depression (symptom list)
Dysthyemia (symptom list)

DESCRIPTION

Definition: Presence of Depressed / Irritable Mood
Dysthyemia

Informant: PAPA- Parent only.
CAPA- Parent and child either/or rule.
YAPA- Self-report.

Note: 

<table>
<thead>
<tr>
<th>PAPA</th>
<th>CAPA</th>
<th>YAPA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Y</td>
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J4NDYS1= J4NDEP1.

RAW VARIABLE(S)

<table>
<thead>
<tr>
<th>Variable</th>
<th>PAPA</th>
<th>CAPA</th>
<th>YAPA</th>
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<tr>
<td>p/cda4f01 (reported tearfulness and crying)</td>
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<td>Y</td>
<td>Y</td>
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<tr>
<td>p/cda6f01 (touchy or easily annoyed)</td>
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<td>Y</td>
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<td>plk5f01 (irritability during activities)</td>
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<td>p/cda0f01 (depressed mood -frequency)</td>
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<td>p/cda8f01 (irritability -frequency)</td>
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<td>Y</td>
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<tr>
<td>p/cda8d01 (irritability -duration)</td>
<td>Y</td>
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</tr>
</tbody>
</table>
p/cda6f01 is used in the PAPA algorithms but not CAPA/YAPA.
### REPORTED TEARFULNESS AND CRYING

Eyes filling with tears or actual shedding of tears as a response to an internal state of unhappiness or misery.

Do not rate crying precipitated by usual precipitants (such as sad situations or anger or being spanked or disciplined).

**Does s/he ever feel so "miserable" that s/he wants to cry?**

**Even when it seems that nothing has happened to warrant crying?**

**What happens then?**
**Does s/he actually cry?**

**Can s/he stop him/herself?**
**What does s/he do?**
**How?**

**How long does it last?**
**When was the last time?**
**Tell me about it.**
**Does s/he cry more easily than s/he used to?**
**Does s/he cry more than other children?**

**When did s/he start being tearful?**

### EASILY FRUSTRATED

The child is generally more prone to feelings of frustration, under minor provocation than most children.

This pattern need not represent a change in behavior.

**Does s/he become frustrated very easily?**

**What sorts of things frustrate him/her?**
**Does s/he get frustrated more easily than most children his/her age, do you think?**

**What happens?**
**How often does that sort of thing happen?**
**How long has s/he been like that?**

### Coding rules

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<th>CODE</th>
<th>DESCRIPTION</th>
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<tr>
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<td>Frequency</td>
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<tr>
<td>FDA4D01</td>
<td>Duration</td>
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<tr>
<td>FDA4001</td>
<td>Onset</td>
</tr>
</tbody>
</table>

### Codes

- **0** = Absent
- **2** = Present

### HOURS : MINUTES

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<tr>
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<th>DESCRIPTION</th>
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<tbody>
<tr>
<td>FDA7D01</td>
<td>Duration</td>
</tr>
<tr>
<td>FDA7001</td>
<td>Onset</td>
</tr>
</tbody>
</table>

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Depression  
7
ANGER AND IRRITABILITY

The three items making up this section may lead to confusion unless careful attention is paid to the definitions. In essence, anger and irritability are being assessed at two levels: that of proneness to feelings of anger (as in Touchy or Easily Annoyed), and that of angry behavior (as in Angry or Resentful). For these first two items, a change does not have to have been noted, so that a child who had always been like this would be coded positively here. Irritability requires the presence of both increased proneness to feelings of anger and angry behavior. It also requires that a change must have been observed, but does not stipulate that the mood or behavior need occur more than in most children. Thus all three of these items may be rated as being present in the same person.

TOUCHY OR EASILY ANNOYED

The child is generally more prone to feelings of anger (bad temper, short temper, resentment, sulking or annoyance) under minor provocation than most children. This pattern need not represent a change in behavior.

Do things get on his/her nerves easily?

What sorts of things?
Does s/he get annoyed more easily than most people, do you think?

What does s/he do?

How often does that sort of thing happen?

How long has s/he been like that?
Definitions and questions

IRRITABILITY

Increased ease of precipitation of externally directed feelings of anger, bad temper, short temper, resentment, annoyance, extreme fussiness, or temper tantrums.

Since "life event" have things "gotten on his/her nerves" more easily?

What kinds of things?
Is that more than usual?
Or has s/he been more irritable?

Does s/he get more annoyed or upset than s/he did before the "life event"?

Has this affected how s/he gets along with people?
How does s/he feel this way?
How so?
When s/he is irritable, how long does it last?
Is it worse when s/he has been thinking about "life event"?

Coding rules

IRRITABILITY

0 = Absent
2 = Irritability occurs in at least 2 activities.
3 = Irritability occurs in most activities.

HOURS : MINUTES

PLK3D01 Duration

PHASIC EXACERBATION

0 = Absent
2 = Irritability occurs or increases in response to cues prompting recall or reliving of the "life event".

Codes

PLK5D01 Intensity
PLK5F01 Frequency
PLK5O01 Onset
LOOKS UNHAPPY

Parent's evaluation that the child characteristically looks unhappy to an extent abnormal for the child's age or developmental stage.

Does s/he often look unhappy?

Does his/her face seem sad?

How much does s/he laugh or smile?

Is that similar to other children her age?

Is it less?

What about when nice things happen?

Does she look more cheerful then?

IF "DEPRESSED MOOD" OR "LOOKS UNHAPPY" PRESENT, CONTINUE. OTHERWISE, SKIP TO "REPORTED TEARFULNESS AND CRYING", (PAGE 7).
DEPRESSED AFFECT

N.B. GET EXAMPLES OF BEHAVIOR AND CONSIDER CODING FOR INCAPACITY

DEPRESSED MOOD
Includes feeling unhappy, miserable, blue, low spirited, being down in the dumps or dejected; daily total duration of at least 1 hour.

Distinguish from other unpleasant affects e.g. Nervous Tension or Anxiety, and from Apathy and Anhedonia. Do not include Depressed Mood induced solely by drug or alcohol use.

"Have you been feeling "down" at all?
"Have you been feeling down in the dumps, unhappy, or depressed?"

"Have you cried at all because of this feeling?"

What was that like?
Was it serious?

If I had seen you then would I have been able to tell?
What made you feel "miserable"?

How much of the time do you feel like that?
Is that on your mind all the time?
Or only some of the time?

What happens when you're doing something else?
When you feel "miserable", how long does it last?
When did it start?

IF PRESENT, ASK
"Was there a week when you felt "miserable" most days?"
"Were there two weeks when you were "miserable" on at least 8 days?"

"Has there been a period of at least 2 months in the last year when you didn't feel like that?"

IF DEPRESSED MOOD IS PRESENT, THEN COMPLETE THIS SECTION. OTHERWISE SKIP TO REPORTED TEARFULNESS AND CRYING, PAGE 95.

Coding rules

DEPRESSED MOOD
2 = The depressed mood is sometimes intrusive but also sometimes alleviated by enjoyable events or activities
3 = Scarcey anything is able to lift the mood

EPISODE OF DEPRESSED MOOD
2 = At least 1 week with 4 days with depressed mood
3 = Period of 2 consecutive weeks where depressed mood present on at least 8 days

PERIOD OF 2 CONTINUOUS MONTHS WITHOUT DEPRESSED MOOD IN LAST YEAR?
0 = Yes
2 = No
**IRRITABILITY**

Increased ease of precipitation of externally directed feelings of anger, bad temper, short temper, resentment, or annoyance: total daily duration of at least 1 hour. (Change may predate the primary period and continue into at least part of the primary period.)

**N.B. INFORMATION OBTAINED HERE MAY ALSO BE RELEVANT TO LOSING TEMPER (PAGE 190) AND TEMPER TANTRUMS (PAGE 190)**

*Have you been more irritable than usual in the last 3 months?*

*Or made angry more easily?*

**What have you been “touchy” about?**

**Is that more than usual?**

**What do you do when you feel like that?**

**Do you keep it to yourself?**

**How long does it last when you feel like that?**

**Have you been snappy with friends or family members?**

**Have you gotten into arguments lately?**

**What has happened?**

**What did you say?**

**What did you do?**

**Have you hit or broken anything when you were angry?**

**When did you start to get “irritable” like that?**

**IF PRESENT, ASK:**

*Was there a week when you felt “irritable” most days?*

*Were there two weeks when you were “irritable” on at least 8 days?*

*Has there been a period of at least 2 months in the last year when you didn’t feel like that?*

**IF PRESENT AT LEAST 4 HOURS A DAY, ASK:**

*In the last 3 months has there been a week when you were irritable like that every day?*

**IF IRRITABLE 4 HOURS A DAY FOR A WEEK (7 CONSECUTIVE DAYS), REMEMBER TO COMPLETE MANIA SECTION (PAGE 121)**

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### Coding rules

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**IRRITABILITY**

2 = Irritable mood present in at least 2 activities manifested by at least one instance of snappiness, shouting, quarrelsome and at least sometimes uncontrollable by subject

3 = Irritable mood present in most activities, accompanied by snappiness, shouting, quarrelsome, and nearly always uncontrollable by subject

---

**EPISODE OF IRRITABLE MOOD**

2 = At least 1 week with 4 days with irritable mood

3 = Period of 2 consecutive weeks where irritable mood present on at least 8 days

**PERIOD OF 2 CONTINUOUS MONTHS WITHOUT IRRITABLE MOOD IN LAST YEAR?**

0 = Yes

2 = No
GLOSSARY NOTES

(Notes from PAPA Glossary)

DEPRESSED MOOD

Feelings of low mood. Depressed mood may be described in a number of ways, for instance as feeling unhappy, miserable, blue, low spirited, being down in the dumps or dejected. See page A - 14 of the glossary for coding mix of 2 & 3 intensities.

Distinguish from other unpleasant affects, e.g. Nervous Tension or Anxiety, and from Apathy and Anhedonia. It is also important to make sure that it is the mood itself that is being rated and not its "expected" concomitants (such as apathy, self-depreciation or crying). Items such as these are rated separately and if they are used as evidence of depression as well, spurious relationships will be generated by the interviewer.

0 = Absent

2 = The depressed mood is sometimes intrusive and uncontrollable, but also sometimes alleviated by enjoyable events or activities.

3 = Scarcely anything is able to lift the mood.

EPISODE OF DEPRESSED MOOD

0 = Absent

2 = At least 1 week with 4 days with depressed mood

3 = Period of 2 consecutive weeks where depressed mood present on at least 8 days

PERIOD OF 2 CONTINUOUS MONTHS WITHOUT DEPRESSED MOOD IN LAST YEAR

0 = Yes

2 = No

LOOKS UNHAPPY

Parent's evaluation that the child characteristically looks unhappy. The parent must regard this as being abnormal for the child's age or developmental stage.
0 = Absent

2 = Child looks unhappy in at least 2 activities but looks more cheerful at times

3 = Child hardly ever looks normally cheerful

TOUCHY OR EASILY ANNOYED

The child is generally more prone to feelings of anger, bad temper, short temper, resentment, sulking, or annoyance, **under minor provocation** than most children.

This pattern need not represent a change in behavior.

0 = Absent

2 = Present

IRRITABILITY

Increased ease of precipitation of externally directed feelings of anger, bad temper, short temper, resentment or annoyance compared with the child's normal state. The change (increased ease of precipitation) may predate the primary period but the altered state must still be present in the primary period in order to code. These feelings must be overtly expressed to at least some extent, though the child may report that s/he keeps him/herself under control most of the time. Note that this rating is of a change in the child's usual liability to be precipitated into anger, it does not refer to the form of the anger once it has been precipitated. Thus, a child who reported hitting people when angry, whereas he had previously kept his/her feelings to him/herself, but denied getting angry any more easily than usual, would not be rated as being more irritable here.

N.B.: The irritable mood itself is being rated, not just its manifestations; thus, frequency and duration ratings refer to the number and length of episodes of the mood, not of the episodes of snappiness, shouting or quarrelsomeness.

0 = Absent

2 = Irritable mood present in at least 2 activities, manifested by at least one instance of snappiness, shouting or quarrelsomeness, and at least sometimes uncontrollable by child.

3 = Irritable mood present in most activities, accompanied by snappiness, shouting or quarrelsomeness, and nearly always uncontrollable by child.

(Notes from CAPA Glossary)

DEPRESSED AFFECT

DEPRESSED MOOD
Subjective feelings of low mood. Depressed mood may be described in a number of ways, for instance as feeling unhappy, miserable, blue, low spirited, being down in the dumps or dejected. To be rated here it must last for at least 1 hour in daily total. See page 6 of glossary for coding mix of 2 & 3 intensities.

Distinguish from other unpleasant affects, e.g. Nervous Tension or Anxiety, and from Apathy and Anhedonia. It is also important to make sure that it is the mood itself that is being rated and not its "expected" concomitants (such as apathy, self-depreciation or crying). Items such as these are rated separately and if they are used as evidence of depression as well, spurious relationships will be generated by the interviewer.

2 = The depressed mood is sometimes intrusive and uncontrollable, but also sometimes alleviated by enjoyable events or activities.

3 = Scarcely anything is able to lift the mood.

Do not include Depressed Mood that is solely induced by drug or alcohol use. Do not assume that just because someone is using drugs or alcohol and has depressed mood, the latter is induced by the former. "Induced" here only refers to the situation in which there is a clear link between taking a "dose" of the substance and the occurrence of a bout of low mood. Unless this clear 1:1 link is present, then Depressed Mood is coded.

EPISODE OF DEPRESSED MOOD

2 = At least 1 week with 4 days with depressed mood

3 = Period of 2 consecutive weeks where depressed mood present on at least 8 days

PERIOD OF 2 CONTINUOUS MONTHS WITHOUT DEPRESSED MOOD IN LAST YEAR

0 = Yes

2 = No
DISTINCT QUALITY OF DEPRESSED MOOD

Refers to a subjective quality of the depressed mood in that it differs from that of ordinary sadness, such as, for instance, might be felt as a response to a bereavement. This item is unusual in that the rating is basically made by the subject rather than the examiner. Sometimes a subject will be able to distinguish very sharply between normal "sadness" and "depression", while others will describe their depression as being essentially similar in affective tone to normal sadness. However, a statement that the mood is like sadness in tone, but much worse than any other sadness the subject has felt before, does not qualify as evidence of Distinct Quality. The difference must be a qualitative one, and not just a matter of degree.

In rating this item it is necessary to ensure that the subject is aware of what normal sadness or unhappiness is. Thus the rating should always be tied to an experience that would have caused sadness such as the loss of a pet.

0 = Absent

2 = Subject understands the quality of sadness and reports that periods of depressed mood have a different quality.

LOOKS UNHAPPY

Parent's evaluation that the child characteristically looks unhappy. The parent must regard this as being abnormal for the child's age or developmental stage.

ALLEVIATION OF DEPRESSED MOOD

This item refers to any means that the subject may find effective in alleviating his/her Depressed Mood. It is only applicable if a 2 has been coded under Depressed Mood. Obviously if Depressed Mood is not present as defined in this glossary then it cannot be alleviated. If, on the other hand, it is present at intensity level 3 then it is, by definition, essentially unalleviable.

Two possible mechanisms of mood alleviation should be considered:

(i) Alleviation by Self-Generated Means. The subject alleviates the Depressed Mood by actively involving him/herself in other thoughts or activities.

(ii) Alleviation by External Means. Refers to a more passive process in which the subject finds that his/her mood is alleviated by the occurrence of other activities or events, without his/her willfully using them for this purpose.

Both mechanisms may be employed by any individual.

0 = Means of Alleviation never employed.

2 = Means of Alleviation employed at least sometimes.
S = Alleviation not applicable, i.e. subject is rated 0 or 3 on depressed mood.

**DIURNAL VARIATION OF MOOD**

Depressed mood is consistently worse (occurring on a total of at least 14 days, which need not be consecutive, in the last 3 months) either in the first or second half of the day, irrespective of external events. The subject must report a difference in the intensity of the depressed mood that is of a degree noticeable to others, even though no one may have noticed or commented on it.

Two possible forms may be coded:

**am worst**

0 = Absent  
2 = Present

**pm worst**

0 = Absent  
2 = Present

**ANGER AND IRRITABILITY**

The three items making up this section may lead to confusion unless careful attention is paid to the definitions. In essence, anger and irritability are being assessed at two levels: that of proneness to *feelings* of anger (as in Touchy or Easily Annoyed), and that of angry behavior (as in Angry or Resentful). For these first two items, a change does not have to have been noted, so that a child who had always been like this would be coded positively here. Irritability requires the presence of *both* increased proneness to feelings of anger, and angry behavior. It also requires that a change must have been observed, but does *not* stipulate that the mood or behavior need occur more than in most children. Thus all three of these items may be rated as being present in the same person.
N, WEIGHTED PREVALENCE, AND MISSING DATA

<table>
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<tr>
<th></th>
<th>PAPA</th>
<th></th>
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Missing data notes:
- PAPA: no notes.
- CAPA: no notes.
- YAPA: no notes.

OTHER VARIABLES

J4ODEP1: 'Onset age: Depressed / irritable mood'

SAS CODE

***************SAS Code for PAPA***************;

```
sDepMood =pda0f01 + 0;
sIrritable=pda8f01 + 0;
pfTouchy =pda6f01 + 0;
sIrrMood=sum(of psIrritable pfTouchy)
psDyspho =sum(of psIrrMood psDepMood);

*** depressed or irritable mood ***;
if psDyspho ge 45 then do;
p4odep1=1;
    if pda0f01 ge 1 then p4odep1= (agedays-pda0o01);
    if pdg0f01 ge 1 then p4odep1=min(p4odep1, (agedays-pdg0o01));
    if pda4f01 ge 1 then p4odep1=min(p4odep1, (agedays-pda4o01));
    if pda8f01 ge 1 then p4odep1=min(p4odep1, (agedays-pda8o01));
    if pda6f01 ge 1 then p4odep1=min(p4odep1, (agedays-pda6o01));
/* if pda7f01 ge 1 then p4odep1=min(p4odep1, (agedays-pda7o01)); drop angry */
    if plk5f01 ge 1 then p4odep1=min(p4odep1, (agedays-plk5o01));
```
end;
else if psDyspho ne . or
    pda8f01 ne . or (pda8f01=. and pda8i01=0 ) or
    pda4f01 ne . or (pda4f01=. and pda4i01=0 ) or
    pda8f01 ne . or (pda8f01=. and pda8i01=0 ) or
    pda6f01 ne . or (pda6f01=. and pda6i01=0 ) or
    pda7f01 ne . or (pda7f01=. and pda7i01=0 ) or * drop angry */
    plk5f01 ne . or (plk5f01=. and plk5i01=0 )
then p4ndep1=0;

label p4ndep1='depressed or irritable mood';
label p4odep1='Onset age: depressed or irritable mood';
j4ndep1 = p4ndep1;
j4odep1 = p4odep1;

label j4ndep1='depressed or irritable mood';
label j4odep1='Onset age: depressed or irritable mood';
j4ndys1 = j4ndep1;
j4odys1 = j4odep1;

label j4ndys1='Dysthymia';
label j4odys1='Onset age: Dysthymia ';

**************SAS Code for CAPA**********************;
If yapa ne 1 then do;
    p200dur=pDA0F01*pDA0D01;
p207dur=pDA8F01*pDA8D01;
pdyspho=sum(of p200dur p207dur);
if pdyspho ge 90 or pda8i01 ge 2 or
    pda4f01 ge 45 then do;
    if p200dur ge 1 then do;
        p4ndep1=1;
p4odep1=(agedays-pda0o01);
    end;
    if p207dur ge 1 then do;
        p4ndep1=1;
p4odep1=min(p4odep1,(agedays-pda8o01));
    end;
    if pga0i01 ge 2 then do;
        p4ndep1=1;
        *** DNE p4odep1=min(p4odep1,(agedays-pdga001));
    end;
    if pda4f01 ge 45 then do;
        p4ndep1=1;
p4odep1=min(p4odep1,(agedays-pda4o01));
    end;
end;
else if pdyspho ne . or pda8i01 ne . or pda4f01 ne . or pda8i01=0 or pda8i01=0 or pdg0i01=0 or
    pda4i01=0 then p4ndep1=0;
c200dur=cDA0F01*cDA0D01;
c207dur=cDA8F01*cDA8D01;
cdyspho=sum(of c200dur c207dur);

if cdyspho ge 90 or cdg0i01 ge 2 or cda4f01 ge 45 then do;
  if c200dur ge 1 then do;
    c4ndep1=1;
    c4odep1=(agedays-cda0o01);
  end;
  if c207dur ge 1 then do;
    c4ndep1=1;
    c4odep1=min(c4odep1,(agedays-cda8o01));
  end;
  if cdg0i01 ge 2 then do;
    c4ndep1=1;
    *** DNE c4odep1=min(c4odep1,(agedays-cdg0o01));
  end;
  if cda4f01 ge 45 then do;
    c4ndep1=1;
    c4odep1=min(c4odep1,(agedays-cda4o01));
  end;
end;
else if cdyspho ne . or cdg0i01 ne . or cda4f01 ne . or cda0i01=0 or cda8i01=0 or cdg0i01=0 or cda4i01=0 then c4ndep1=0;
if c4ndep1 = 1 or p4ndep1 = 1 then j4ndep1=1;
else if c4ndep1 ne . or p4ndep1 ne . then j4ndep1=0;
j4odep1=min(c4odep1,p4odep1);
label j4ndep1='Depressed / irritable mood';
label j4odep1='Onset age: Depressed / irritable mood';
j4ndys1 = j4ndep1;
j4odys1 = j4odep1;
label j4ndys1='Dysthymia';
label j4odys1='Onset age: Dysthymia ';
end;

**********SAS Code for YAPA**********

If yapa = 1 then do;
c200dur=cDA0F01*cDA0D01;
c207dur=cDA8F01*cDA8D01;
  cdyspho=sum(of c200dur c207dur);
if cdyspho ge 90 or cdg0i01 ge 2 or cda4f01 ge 45 then do;
  if c200dur ge 1 then do;
    c4ndep1=1;
    c4odep1=(agedays-cda0o01);
  end;
  if c207dur ge 1 then do;
c4ndep1=1;
c4odep1=min(c4odep1,(agedays-cda8o01));
end;
if cdg0i01 ge 2 then do;
c4ndep1=1;
*** DNE c4odep1=min(c4odep1,(agedays-cdg0o01));
end;
if cda4f01 ge 45 then do;
c4ndep1=1;
c4odep1=min(c4odep1,(agedays-cda4o01));
end;

else if cdyspho ne . or cdg0i01 ne . or cda4f01 ne . or cda0i01=0 or cda8i01=0 or cdg0i01=0 or cda4i01=0 then c4ndep1=0;

label c4ndep1='Depressed / irritable mood';
label c4odep1='Onset age: Depressed / irritable mood';

j4ndep1 = c4ndep1;
j4odep1 = c4odep1;

label j4ndep1='Depressed / irritable mood';
label j4odep1='Onset age: Depressed / irritable mood';

j4ndys1 = j4ndep1;
j4odys1 = j4odep1;

label j4ndys1='Dysthymia';
label j4odys1='Onset age: Dysthymia ';
end;
J4NDEP2: Anhedonia or loss of interest

Description
Definition: Anhedonia or loss of interest.
Informant: PAPA- Parent only.
CAPA- Parent and child either/or rule.
YAPA- Self-report.

Note:
PAPA  CAPA  YAPA
Y       Y       Y

RAW VARIABLE(S)

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<th>p/cdb1i01 (loss of interest)</th>
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<tr>
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</thead>
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<tr>
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p/cdb0i01 is used in the PAPA algorithms but not CAPA/YAPA.
SAMPLE INTERVIEW SECTION

Definitions and questions

CONATIVE PROBLEMS

BOREDOM

Activities actually engaged in are felt to be dull and lacking in interest while interest in other possible potential activities is expressed.

Code even if the activities described are truly boring in your opinion.

*How much of the time are you bored?*

Do you get bored more than other people?

What can you do to stop yourself from being bored?

What do you do?

What would you like to be doing?

How long have you been feeling so bored?

LOSS OF INTEREST

Diminution of interest in usual pursuits and activities without replacement by new activities.

Distinguish from "growing out" of activities or giving up certain activities to take up new ones or because of increased pressure of work.

NOTE INFORMATION FROM THE OUT OF SCHOOL ACTIVITIES (PAGE 35)

*Have things been interesting to you as much as they used to?*

*Have you lost interest in anything?*

When did you start to lose interest in things?

Coding rules

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<th>Codes</th>
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<td>2 = More than half the time</td>
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<tr>
<td></td>
<td>3 = Almost all the time</td>
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<table>
<thead>
<tr>
<th>Codes</th>
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</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>2 = Generalized diminution in interest taken in normally interesting activities</td>
</tr>
<tr>
<td></td>
<td>3 = The subject described being almost completely uninterested</td>
</tr>
</tbody>
</table>
Definitions and questions

**ANHEDONIA**

Loss or diminution of the ability to experience pleasure, enjoy things, or have fun.

DISTINGUISH FROM BOREDOM (PAGE 99) AND LOSS OF INTEREST (PAGE 99) OR LACK OF OPPORTUNITIES FOR PARTICIPATION.

FIND OUT IF ACTIVITIES DESCRIBED IN OUT OF SCHOOL ACTIVITIES (PAGE 35) ARE FUN.

*Can you have fun or enjoy yourself?*

*Are there things you used to enjoy but don’t anymore?*

Do you feel that you can’t enjoy things anymore?  
What things are fun (or enjoyable) now?

When did you start to feel like that?

**SUBJECTIVE ANERGIA**

Subjective report of a lack of energy compared with usual state, a general rating of subject’s overall energy level.

DIFFERENTIATE FROM FATIGABILITY (PAGE 162) SUBJECTIVE MOTOR SLOWING (PAGE 101) AND HYPERSOMNIA (PAGE 161)

*Have you been feeling energetic?*

*Do you have as much energy as you used to have?*

*Or have you lost any of your usual energy?*

Have you been feeling a lack of energy?  
Do you have enough energy to do things?  
How has that bothered you?

Do you put things off because you haven’t got enough energy?  
When did you start feeling less energetic?
GLOSSARY NOTES

(Notes from PAPA Glossary)

BOREDOM

A state in which activities that the child actually engages in seem dull and lacking in interest. Everyone gets bored sometimes, so code a child positively here only if s/he is more often bored than not. But code as positive even if the activities are truly dull. It must seem to the child that other potential activities would be of interest even if it is uncertain what these other activities might be.

Differentiate from loss of pleasure and loss of interest, where nothing seems to be of potential interest or likely to give pleasure.

0 = Absent

2 = Bored more than half the time.

3 = Bored almost all the time.

LOSS OF INTEREST

Refers to diminution of the child's interest in his/her usual pursuits and activities. Either some interests have been dropped or the intensity of interest has decreased. Everyone has interests of some sort, but the extent of the diminution must be measured in the context of the range and depth of the child's usual activities. Take into account everyday daycare/school and home activities as well as leisure pursuits, keeping well informed, taking an interest in clothes, food, appearance, toys, etc. Inevitably, those with more intense and varied interests initially will have more room to lose interest than those who have never taken a great interest in things. The lost interest must not have been replaced by other interests, so do not include "growing out" of activities or giving up certain activities to take up new ones.

0 = Absent

2 = Generalized diminution in interest taken in normally interesting activities

3 = The child is completely or almost completely uninterested in everything or almost everything.

ANHEDONIA

A partial or complete (pervasive) loss or diminution of the ability to experience pleasure, enjoy things or have fun during participation in activities that have been attractive to the child. It also refers to basic pleasures like those resulting from eating favorite foods.
Anhedonia concerns the mood state itself. Loss of Interest, Loss of Initiative, Lack of Protest, inability to engage in activities, or loss of the ability to concentrate on looking at books, games, TV or school children may accompany Anhedonia, so the interviewer may code different aspects under different items. Do not confuse this item with a lack of opportunity to do things or to excessive parental restriction. Comparison should be made with enjoyment when the child is normal. This may not be accessible in episodes of very long duration.

0 = Absent

2 = Generalized diminution in pleasure taken in normally pleasurable activities

3 = Almost nothing gives pleasure.

(Notes from CAPA Glossary)

LOSS OF INTEREST

Refers to diminution of the subject's interest in his/her usual pursuits and activities. Either some interests have been dropped or the intensity of interest has decreased. Everyone has interests of some sort, but the extent of the diminution must be measured in the context of the range and depth of the subject's usual activities. Take into account everyday school and home activities as well as leisure pursuits, keeping well informed, taking an interest in clothes, food, appearance, toys, etc. Inevitably, those with more intense and varied interests initially will have more room to lose interest than those who have never taken a great interest in things. The lost interest must not have been replaced by other interests, so do not include "growing out" of activities or giving up certain activities to take up new ones or because of pressure of work.

2 = Generalized diminution in interest taken in normally interesting activities

3 = The subject describes being almost completely uninterested.

ANHEDONIA

A partial or complete (pervasive) loss or diminution of the ability to experience pleasure, enjoy things or have fun during participation in activities that have been attractive to the child. It also refers to basic pleasures like those resulting from eating favorite foods and, in adolescents, sexual activities.

This item does not refer to Loss of Interest, or inability to engage in activities, or loss of the ability to concentrate on reading, games, TV or school subjects. Do not confuse this item with a lack of opportunity to do things which may be due to Loss of Interest or to excessive parental restriction. Comparison should be made with enjoyment when the child is normal. This may not be accessible in episodes of very long duration, because children's preferences change with age.

2 = Generalized diminution in pleasure taken in normally pleasurable activities
3 = Almost nothing gives pleasure.

N, WEIGHTED PREVALENCE, AND MISSING DATA

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<th>CAPA Weighted</th>
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</table>

Missing data notes:
- PAPA: no notes
- CAPA: no notes
- YAPA: no notes

OTHER VARIABLES

J4ODEP2: 'Onset age: Anhedonia or loss of interest'

SAS CODE

**************SAS Code for PAPA**********************;

*** anhedonia ***;
  if pdb1i01 ge 2 or pdb2i01 ge 2 or pdb0i01 ge 2 then do;
    p4ndep2=1;
    if pdb1i01 ge 2 then p4odep2=min(p4odep2,(agedays-pdb1o01));
    if pdb2i01 ge 2 then p4odep2=min(p4odep2,(agedays-pdb2o01));
    if pdb0i01 ge 2 then p4odep2=min(p4odep2,(agedays-pdb0o01));
  end;
  else if pdb1i01 ne . or pdb2i01 ne . or pdb0i01 ne . then p4ndep2=0;
label p4ndep2='anhedonia';
label p4odep2='Onset age: anhedonia';
j4ndep2 = p4ndep2;
j4odep2 = p4odep2;
**SAS Code for CAPA**

If yapa ne 1 then do;
  if pDB1I01 ge 2 or pDB2I01 ge 2 then do;
    if pDB1I01 ge 2 then do;
      p4ndep2=1;
      p4odep2=(agedays-pdb1o01);
      end;
    if pDB2I01 ge 2 then do;
      p4ndep2=1;
      p4odep2=min(p4odep2,(agedays-pdb2o01));
      end;
  end;
else if pDB1I01 ne ' ' or pDB2I01 ne ' ' then p4ndep2=0;
if cDB1I01 ge 2 or cDB2I01 ge 2 then do;
  if cDB1I01 ge 2 then do;
    c4ndep2=1;
    c4odep2=(agedays-cdb1o01);
    end;
  if cDB2I01 ge 2 then do;
    c4ndep2=1;
    c4odep2=min(c4odep2,(agedays-cdb2o01));
    end;
else if cDB1I01 ne ' ' or cDB2I01 ne ' ' then c4ndep2=0;
if c4ndep2 = 1 or p4ndep2 = 1 then j4ndep2=1;
else if c4ndep2 ne . or p4ndep2 ne . then j4ndep2=0;
j4odep2=min(c4odep2,p4odep2);
label j4ndep2= 'Anhedonia or loss of interest' ;
label j4odep2='Onset age: Anhedonia or loss of interest' ;
end;

**SAS Code for YAPA**

If yapa = 1 then do;
  if cDB1I01 ge 2 or cDB2I01 ge 2 then do;
    if cDB1I01 ge 2 then do;
      c4ndep2=1;
      c4odep2=(agedays-cdb1o01);
      end;
    if cDB2I01 ge 2 then do;
      c4ndep2=1;
      c4odep2=min(c4odep2,(agedays-cdb2o01));
      end;
  end;
else if cDB1I01 ne ' ' or cDB2I01 ne ' ' then c4ndep2=0;
label c4ndep2= 'Anhedonia or loss of interest' ;
label c4odep2='Onset age: Anhedonia or loss of interest' ;
\text{j4ndep2} = c4ndep2;
\text{j4odep2} = c4odep2;

\text{label} \ j4ndep2= 'Anhedonia or loss of interest' ;
\text{label} \ j4odep2= 'Onset age: Anhedonia or loss of interest' ;

\text{end};
**J4NDEP3**: Significant weight loss or gain, or appetite disturbance  
**J4NDYS2**: Poor appetite weight change dysthymia

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**CAPA Interview Section**

| **Glossary Notes**                |
| **Additional Variables**          |

**N, Weighted Prevalence, and Missing Data**

| **Citations**                    |
| **SAS CODE**                     |

**Depression (symptom list)**

**Dysthymia (symptom list)**

---

**DESCRIPTION**

Definition: Significant weight loss or gain, or appetite disturbance

Informant:  
- PAPA - Parent only.  
- CAPA - Parent and child either/or rule.  
- YAPA - Self-report.

Note:

<table>
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<th>PAPA</th>
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<th>YAPA</th>
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<td>Y</td>
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<td>Y</td>
</tr>
</tbody>
</table>

\[ J4NDYS2 = J4NDEP3. \]

**RAW VARIABLE(S)**

<table>
<thead>
<tr>
<th>Variable</th>
<th>PAPA</th>
<th>CAPA</th>
<th>YAPA</th>
</tr>
</thead>
<tbody>
<tr>
<td>pfg6i01 (parental concern about growth deficiency)</td>
<td>Y</td>
<td>N</td>
<td>Y</td>
</tr>
<tr>
<td>pfg7i01 (food refusal)</td>
<td>Y</td>
<td>N</td>
<td>Y</td>
</tr>
<tr>
<td>pfg7x02 (growth deficiency)</td>
<td>Y</td>
<td>N</td>
<td>Y</td>
</tr>
<tr>
<td>p/cfa0i01 (reduced appetite)</td>
<td>Y</td>
<td>Y</td>
<td>Y</td>
</tr>
<tr>
<td>p/cfa2i01 (excessive appetite)</td>
<td>Y</td>
<td>Y</td>
<td>Y</td>
</tr>
<tr>
<td>p/cfa1i01 (weight loss)</td>
<td>Y</td>
<td>Y</td>
<td>Y</td>
</tr>
<tr>
<td>p/cfa3i01 (weight gain)</td>
<td>N</td>
<td>Y</td>
<td>Y</td>
</tr>
</tbody>
</table>
SAMPLE INTERVIEW SECTION

Definitions and questions

WEIGHT LOSS
Any weight loss in the last three months.

Has s/he lost weight during the last 3 months?

How much?

When did s/he start losing weight?

GROWTH DEFICIENCY
In the last 3 months have you worried that X is not growing as big or fast as s/he should be?

Are you happy with his/her weight?

EXCESSIVE APPETITE
An increase in appetite outside the normal range of the child, including eating for comfort. Include change in appetite due to side effects of medication.

Has s/he had a bigger appetite than usual in the last 3 months?

Why?

Has s/he actually eaten more than usual?

In the last 3 months, has his/her food consumption increased above the usual level for at least 1 week?

How much more?

When did s/he start eating more?
FOOD REFUSAL
Refusal to eat adequate amounts of food occurring for more than 24 hours and not co-occurring with underlying medical illness (e.g. stomach flu or toothache) or oropharyngeal or nasogastric trauma.

NOTE: Child may take liquids but refuse solid foods. Include tube feedings.

In the last 3 months, has X simply refused to eat at all?

Or refused to eat most food offered to him/her?

Did s/he refuse to open his/her mouth?
Throw food?
Or try to leave his/her highchair or chair?
Did s/he seem hungry?
When did this start?
How long did s/he refuse food?
Was this related to being sick?
Did s/he refuse to eat with everyone?
Or with specific people?
Did this affect his/her growth?
In what way?
Has a doctor said that s/he is not growing as much as s/he should?

IF FOOD REFUSAL ABSENT, SKIP TO "CONFLICTS ABOUT FOOD", (PAGE 9).
FOOD-RELATED BEHAVIOR

REduced APPETITE

Reduction of normal appetite, or reduced interest in, or enthusiasm for, food. Include change in appetite due to substance use or side effects of medication.

“How has your appetite been in the last 3 months?”

“Has it been less than usual?”

“Has the amount you eat changed at all?”

Are you off your food?

Have you been eating as much as usual?

Why not?

How much have you been eating?

Have you lost any weight?

When did your appetite start to fall off?

WEIGHT LOSS

“Have you lost an unusual amount of weight during the last 3 months?”

How much?

When did you start losing weight?
EXCESSIVE APPETITE

An increase in appetite outside the normal range of the subject, including eating for comfort. Include change in appetite due to substance use or side effects of medication.

*Have you had a bigger appetite than usual in the last 3 months?
Why?

*Have you actually eaten more than usual?
How much more?
When did you start eating more?

WEIGHT GAIN

Do not include normal developmental weight gain, premenstrual weight gain, or weight gain because of pregnancy.

*Have you gained an unusual amount of weight in the last 3 months?
How much?
How long have you been putting on weight?

Coding rules

EXCESSIVE APPETITE

0 = Absent
2 = Food consumption has been definitely increased above the subject’s usual level for at least 1 week.

WEIGHT GAIN

0 = Absent
2 = Present

WEIGHT GAIN IN POUNDS
OVER 3 MONTHS
GLOSSARY NOTES

(Notes from PAPA Glossary)

REDUCED APPETITE

Reduction of normal appetite, or reduced interest in, or enthusiasm for, food for one week consecutively.

2 = Food intake has definitely been reduced below the normal level because of lack of appetite for at least one week.

3 = The child can only be induced to eat by marked parental or other persuasion.

WEIGHT LOSS

Code only significant weight loss (at least 2 lbs). Code the number of pounds lost during the last three months.

0 = Absent

2 = Present

EXCESSIVE APPETITE

An increase in appetite outside the normal range of the child for at least one week consecutively. It may still have been present during the previous three months even if reduced appetite and weight loss have also been reported.

0 = Absent

2 = Food consumption has been definitely increased above the child's usual level for at least one week.
(Notes from CAPA Glossary)

REDUCED APPETITE

Reduction of normal appetite, or reduced interest in, or enthusiasm for, food for one week consecutively.

2 = Food intake has definitely been reduced below the normal level because of lack of appetite for at least one week.

3 = The subject can only be induced to eat by marked parental or other persuasion.

WEIGHT LOSS

Code only significant weight loss (at least 2 lbs). Code the number of pounds lost during the last three months.

0 = Absent

2 = Present

EXCESSIVE APPETITE

An increase in appetite outside the normal range of the subject for at least one week consecutively. It may still have been present during the previous three months even if reduced appetite and weight loss have also been reported.

0 = Absent

2 = Food consumption has been definitely increased above the subject's usual level for at least one week.

WEIGHT GAIN

Code only significant weight gain. Code the number of pounds gained during the last three months.

0 = Absent

2 = Present
Code only unusual weight gain. Do not include pregnancy or water retention in monthly cycles. Do not include normal, developmental weight gain since birth; only rate noticeable or excessive weight gain. The onset in this case would be the beginning of the excessive weight gain. Do not include pre-menstrual weight gain.

It is possible to code both weight gain and weight loss occurring in the Primary Period. Do not code the net result; just record the number of pounds gained and lost during that period.

**N, WEIGHTED PREVALENCE, AND MISSING DATA**

<table>
<thead>
<tr>
<th></th>
<th>PAPA</th>
<th></th>
<th>CAPA</th>
<th></th>
<th>YAPA</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Weighted</td>
<td>N</td>
<td>Weighted</td>
<td>N</td>
<td>Weighted</td>
</tr>
<tr>
<td>Missing (total)</td>
<td>0</td>
<td>0</td>
<td>.01</td>
<td>1</td>
<td>.34</td>
</tr>
<tr>
<td>.</td>
<td>0</td>
<td>0</td>
<td>.01</td>
<td>1</td>
<td>.34</td>
</tr>
<tr>
<td>.C</td>
<td>0</td>
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<td>0</td>
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</tr>
<tr>
<td>.Y</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>0</td>
<td>73.82</td>
<td>367</td>
<td>65.17</td>
<td>4295</td>
<td>73.22</td>
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<tr>
<td>1</td>
<td>26.18</td>
<td>128</td>
<td>34.82</td>
<td>2378</td>
<td>26.44</td>
</tr>
</tbody>
</table>

Missing data notes:
- PAPA: no notes.
- CAPA: no notes.
- YAPA: no notes.

**OTHER VARIABLES**

**J4ODEP3**: 'Onset age: Significant weight loss or gain, or appetite disturbance'

**SAS CODE**

```
**************SAS Code for PAPA**************;
```
*** wt or appetite change ***;
if pfa0i01 ge 2 or pfa1i01 ge 2 or pfa2i01 ge 2 or
pfg6i01 ge 2 or pfg7i01 ge 2 or pfg7x02 ge 2 then do;
p4ndep3=1;
  if pfa0i01 ge 2 then p4odep3=min(p4odep3,(agedays-pfa0o01));
  if pfa1i01 ge 2 then p4odep3=min(p4odep3,(agedays-pfa1o01));
  if pfa2i01 ge 2 then p4odep3=min(p4odep3,(agedays-pfa2o01));
  if pfg6i01 ge 2 then p4odep3=min(p4odep3,(agedays-pfg6o01));
  if pfg7i01 ge 2 then p4odep3=min(p4odep3,(agedays-pfg7o01));
  if pfg7x02 ge 2 then p4odep3=min(p4odep3,(agedays-pfg7o01));
end;
else if pfa0i01 ne . or pfa1i01 ne . or pfa2i01 ne . or
pfg6i01 ne . or pfg7i01 ne . or pfg7x02 ne . then p4ndep3=0;
label p4ndep3='wt or appetite change';
label p4odep3='Onset age: wt or appetite change';
j4ndep3 = p4ndep3;
j4odep3 = p4odep3;

label j4ndep3='wt or appetite change';
label j4odep3='Onset age: wt or appetite change';

j4ndys2 = j4ndep3;
j4odys2 = j4odep3;

label j4ndys2=' Poor appetite weight change dysthymia';
label j4odys2='Onset age: Poor appetite weight change dysthymia';

*************SAS Code for CAPA*********************;

If yapa ne 1 then do;

if pfa0i01 ge 2 or pfa2i01 ge 2 or
pfa1i01 ge 2 or pfa3i01 ge 2 then do;
  if pfa0i01 ge 2 then do;
    p4ndep3=1;
    p4odep3=min(p4odep3,(agedays-pfa0o01));
  end;
  if pfa2i01 ge 2 then do;
    p4ndep3=1;
    p4odep3=min(p4odep3,(agedays-pfa2o01));
  end;
  if pfa1i01 ge 2 then do;
    p4ndep3=1;
    p4odep3=min(p4odep3,(agedays-pfa1o01));
  end;
  if pfa3i01 ge 2 then do;
    p4ndep3=1;
    p4odep3=min(p4odep3,(agedays-pfa3o01));
  end;
end;
else if pfa0i01 ne ' ' or pfa2i01 ne ' ' or
pfa1i01 ne ' ' or pfa3i01 ne ' ' then p4ndep3=0;

if cfa0i01 ge 2 or cfa2i01 ge 2 or
cfa1i01 ge 2 or cfa3i01 ge 2 then do;
  if cfa0i01 ge 2 then do;
    c4ndep3=1;
    c4odep3=min(c4odep3,(agedays-cfa0o01));
  end;
end;
if cFA2I01 ge 2 then do;
c4ndep3=1;
c4odep3=min(c4odep3,(agedays-cfa2o01));
end;
if cFAI01 ge 2 then do;
c4ndep3=1;
c4odep3=min(c4odep3,(agedays-cfa1o01));
end;
if cFA3I01 ge 2 then do;
c4ndep3=1;
c4odep3=min(c4odep3,(agedays-cfa3o01));
end;
end;
el if cFA0I01 ne '' or cFA2I01 ne '' or cFA1I01 ne '' or cFA3I01 ne '' then c4ndep3=0;
if c4ndep3 = 1 or p4ndep3 = 1 then j4ndep3=1;
else if c4ndep3 ne . or p4ndep3 ne . then j4ndep3=0;
j4odep3=min(c4odep3,p4odep3);
label j4ndep3 = 'Significant weight loss or gain, or appetite disturbance';
lable j4odep3 = 'Onset age: Significant weight loss or gain, or appetite disturbance';
j4ndys2 = j4ndep3;
j4odys2 = j4odep3;
label j4ndys2 = 'Poor appetite weight change dysthymia';
lable j4odys2 = 'Onset age: Poor appetite weight change dysthymia';
end;
***************SAS Code for YAPA**************;
If yapa = 1 then do;
if cFA0I01 ge 2 or cFA2I01 ge 2 or
cFAI01 ge 2 or cFA3I01 ge 2 then do;
if cFA0I01 ge 2 then do;
c4ndep3=1;
c4odep3=min(c4odep3,(agedays-cfa0o01));
end;
if cFA2I01 ge 2 then do;
c4ndep3=1;
c4odep3=min(c4odep3,(agedays-cfa2o01));
end;
if cFAI01 ge 2 then do;
c4ndep3=1;
c4odep3=min(c4odep3,(agedays-cfa1o01));
end;
if cFA3I01 ge 2 then do;
c4ndep3=1;
c4odep3=min(c4odep3,(agedays-cfa3o01));
end;
end;
el if cFA0I01 ne '' or cFA2I01 ne '' or
cFAI01 ne '' or cFA3I01 ne '' then c4ndep3=0;
label c4ndep3= 'Significant weight loss or gain, or appetite disturbance' ;
label c4odep3= 'Onset age: Significant weight loss or gain, or appetite disturbance' ;

j4ndep3= c4ndep3;
j4odep3= c4odep3;

label j4ndep3= 'Significant weight loss or gain, or appetite disturbance' ;
label j4odep3= 'Onset age: Significant weight loss or gain, or appetite disturbance' ;

j4ndys2 = j4ndep3;
j4odys2 = j4odep3;

label j4ndys2= 'Poor appetite weight change dysthymia';
label j4odys2= 'Onset age: Poor appetite weight change dysthymia';

end;
J4NDEP4: Insomnia or hypersomnia nearly every day
J4NDYS3: Insomnia

Depressive Disorders Variable List

Description

Raw Variable(s)

CAPA Interview Section

Glossary Notes

Additional Variables

N, Weighted Prevalence, and Missing Data

Citations

SAS CODE

Depression (symptom list)

Dysthymia (symptom list)

DESCRIPTION

Definition: Insomnia or hypersomnia nearly every day

Informant: PAPA- Parent only.
CAPA- Parent and child either/or rule.
YAPA- Self-report.

Note:

<table>
<thead>
<tr>
<th>PAPA</th>
<th>CAPA</th>
<th>YAPA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Y</td>
<td>Y</td>
<td>Y</td>
</tr>
</tbody>
</table>

J4NDYS3 = J4NDEP4.

RAW VARIABLE(S)

<table>
<thead>
<tr>
<th>Variable</th>
<th>PAPA</th>
<th>CAPA</th>
<th>YAPA</th>
</tr>
</thead>
<tbody>
<tr>
<td>pfl0i01 (falls asleep in carseat for unscheduled nap)</td>
<td>Y</td>
<td>N</td>
<td>N</td>
</tr>
<tr>
<td>p/cfb8i01 (increased need for sleep)</td>
<td>Y</td>
<td>Y</td>
<td>Y</td>
</tr>
<tr>
<td>p/cfd4i01 (inadequately rested by sleep)</td>
<td>Y</td>
<td>Y</td>
<td>Y</td>
</tr>
<tr>
<td>p/cfb8f01 (hypersomnia- increased need for sleep)</td>
<td>Y</td>
<td>Y</td>
<td>Y</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>-----</td>
<td>-----</td>
<td>-----</td>
<td></td>
</tr>
<tr>
<td><strong>pfj9d01</strong> (bedtime rituals hours and minutes version 1.4, 2.0.1)</td>
<td>Y</td>
<td>N</td>
<td>N</td>
</tr>
<tr>
<td><strong>pfl4i01</strong> (daytime sleepiness)</td>
<td>Y</td>
<td>N</td>
<td>N</td>
</tr>
<tr>
<td><strong>pf9d02</strong> (bedtime rituals hours and minutes version 1.3)</td>
<td>Y</td>
<td>N</td>
<td>N</td>
</tr>
<tr>
<td><strong>pfk5d01</strong> (night waking in hours and minutes)</td>
<td>Y</td>
<td>N</td>
<td>N</td>
</tr>
<tr>
<td><strong>pfk5f01</strong> (night waking)</td>
<td>Y</td>
<td>N</td>
<td>N</td>
</tr>
<tr>
<td><strong>p/cfb7f01</strong> (insomnia-overall)</td>
<td>N</td>
<td>Y</td>
<td>Y</td>
</tr>
</tbody>
</table>

p/cfb8i01 is used in the PAPA algorithms but p/cfb8f01 is used for CAPA/YAPA. p/cfb4i01 is used in the PAPA algorithms but not CAPA/YAPA.
**SAMPLE INTERVIEW SECTION**

*Pre-school Age Psychiatric Assessment 2.0.3*

**Definitions and questions**

<table>
<thead>
<tr>
<th>DAYTIME SLEEPINESS</th>
<th>Coding rules</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>DAYTIME SLEEPINESS</strong></td>
<td></td>
</tr>
<tr>
<td>Child falls asleep during the day at times other than scheduled or expected naps.</td>
<td></td>
</tr>
<tr>
<td><strong>Does s/he seem sleepy during the day?</strong></td>
<td></td>
</tr>
<tr>
<td><strong>More sleepy than usual?</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Does s/he fall asleep in the middle of activities?</strong></td>
<td></td>
</tr>
<tr>
<td><strong>More than most other kids?</strong></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>FALLS ASLEEP IN CAR</th>
<th>Codes</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>FALLS ASLEEP IN CAR</strong></td>
<td></td>
</tr>
<tr>
<td>Does s/he fall asleep almost every time s/he rides in a car when it is not nap time?</td>
<td></td>
</tr>
<tr>
<td>Does this happen even for short drives?</td>
<td></td>
</tr>
<tr>
<td>How long does s/he sleep for?</td>
<td></td>
</tr>
<tr>
<td>How long has s/he been sleepy like this?</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>TIREDNESS</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>TIREDNESS</strong></td>
<td></td>
</tr>
<tr>
<td>A feeling of being tired or weary at least half the time.</td>
<td></td>
</tr>
<tr>
<td><strong>Has s/he been feeling especially tired or weary?</strong></td>
<td></td>
</tr>
<tr>
<td><strong>How much of the time has s/he felt tired like that?</strong></td>
<td></td>
</tr>
</tbody>
</table>
HYPERSOMNIA - INCREASED NEED FOR SLEEP

Total hours sleep exceed usual amount by at least one hour, unless subject prevented from sleeping.

Does s/he feel sleepy during the day?
More sleepy than usual?
More than most other kids?
Does s/he drop off to sleep in the day?
For how long?
How long has s/he been more sleepy than usual?

RESTLESS SLEEP

Sleep is described as restless.

How would you describe an average night’s sleep for him/her?

Does s/he sleep soundly?
Does s/he toss and turn?
is s/he restless?

INADEQUATELY RESTED BY SLEEP

Sleep disturbance does not meet criteria for insomnia, but subject describes being inadequately rested by sleep upon waking.

Does s/he usually get a good night’s sleep?
Is s/he fairly well rested when s/he gets up?
Or after sleeping during the day?
How does s/he feel?
When did that start?
**BEDTIME RITUALS**
Pattern of parent and child interactions that leads up to the child's going to sleep

Distinguish interactions between parent and child from parent sending child to carry out bedtime tasks on his/her own. The latter does not count as a bedtime ritual.

If uses night light, consider fear of the dark in the anxiety section

*Do you help X get ready for bed?*

*What do you and “your partner” do to get X ready for bed?*

*Are there things you do most nights?*

*Or is it different every night?*

*Tell me about putting X to bed in the last week.*

*Do you read a book?*

*Do you talk together before bed?*

*Do you sing?*

*Or listen to music together?*

*Do you watch a video together?*

*Do you watch TV together?*

*Do you pray together?*

*Does X need the light on when s/he goes to sleep?*

*Does X use a night light?*

---

<table>
<thead>
<tr>
<th>Coding rules</th>
<th>Codes</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>BEDTIME RITUALS</strong></td>
<td>FF99D01</td>
</tr>
<tr>
<td>0 = Absent</td>
<td>Intensity</td>
</tr>
<tr>
<td>2 = Present</td>
<td></td>
</tr>
<tr>
<td><strong>HOURS : MINUTES</strong></td>
<td>FF99D01</td>
</tr>
<tr>
<td>Duration</td>
<td></td>
</tr>
<tr>
<td><strong>READING RITUAL</strong></td>
<td>FF99D02</td>
</tr>
<tr>
<td>0 = Absent</td>
<td></td>
</tr>
<tr>
<td>2 = Present</td>
<td></td>
</tr>
<tr>
<td><strong>TALKING RITUAL</strong></td>
<td>FF99D03</td>
</tr>
<tr>
<td>0 = Absent</td>
<td></td>
</tr>
<tr>
<td>2 = Present</td>
<td></td>
</tr>
<tr>
<td><strong>SINGING RITUAL</strong></td>
<td>FF99D04</td>
</tr>
<tr>
<td>0 = Absent</td>
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</tr>
<tr>
<td>2 = Present</td>
<td></td>
</tr>
<tr>
<td><strong>LISTENING TO MUSIC</strong></td>
<td>FF99D05</td>
</tr>
<tr>
<td>0 = Absent</td>
<td></td>
</tr>
<tr>
<td>2 = Present</td>
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</tr>
<tr>
<td><strong>WATCHING A VIDEO TAPE</strong></td>
<td>FF99D06</td>
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<tr>
<td>0 = Absent</td>
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<tr>
<td>2 = Present</td>
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<tr>
<td><strong>WATCHING TV</strong></td>
<td>FF99D07</td>
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<td>0 = Absent</td>
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<tr>
<td>2 = Present</td>
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<tr>
<td><strong>PRAYING</strong></td>
<td>FF99D08</td>
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<tr>
<td>0 = Absent</td>
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<tr>
<td>2 = Present</td>
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<tr>
<td><strong>LIGHT ON</strong></td>
<td>FF99D09</td>
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<tr>
<td>0 = Absent</td>
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</tr>
<tr>
<td>2 = Present</td>
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<tr>
<td><strong>USES A NIGHT LIGHT</strong></td>
<td>FF99D10</td>
</tr>
<tr>
<td>0 = Absent</td>
<td></td>
</tr>
<tr>
<td>2 = Present</td>
<td></td>
</tr>
</tbody>
</table>
Definitions and questions

DAYTIME SLEEPINESS
Child falls asleep during the day at times other than scheduled or expected naps.

Does s/he seem sleepy during the day?
More sleepy than usual?
Does s/he fall asleep in the middle of activities?
More than most other kids?

FALLS ASLEEP IN CAR
Does s/he fall asleep almost every time s/he rides in a car when it is not nap time?
Does this happen even for short drives?
How long does s/he sleep for?
How long has s/he been sleepy like this?

TIREDNESS
A feeling of being tired or weary at least half the time.

Has s/he been feeling especially tired or weary?
How much of the time has s/he felt tired like that?

Coding rules

<table>
<thead>
<tr>
<th>DAYTIME SLEEPINESS</th>
</tr>
</thead>
<tbody>
<tr>
<td>INTENSITY</td>
</tr>
<tr>
<td>0 = Absent</td>
</tr>
<tr>
<td>2 = Present</td>
</tr>
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</table>

<table>
<thead>
<tr>
<th>FALASLEEPINCAR</th>
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</thead>
<tbody>
<tr>
<td>INTENSITY</td>
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<tr>
<td>0 = Absent</td>
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<tr>
<td>2 = Present</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>TIRENESS</th>
</tr>
</thead>
<tbody>
<tr>
<td>INTENSITY</td>
</tr>
<tr>
<td>0 = Absent</td>
</tr>
<tr>
<td>2 = Feels tired at least half of the time.</td>
</tr>
<tr>
<td>3 = Feels tired almost all of the time.</td>
</tr>
</tbody>
</table>
NIGHT WAKING
Child wakes up from sleep during the night after child has been asleep for over ten minutes.

IF CHILD GETS INTO PARENT'S BED, THIS INFORMATION MAY BE RELEVANT TO ITEM "SLEEPS WITH FAMILY MEMBER(S)"

Does s/he wake up during the night?

Or does X sleep though the night?

What does s/he do when s/he wakes up?

Does s/he call for you?

Or come to you?

Or get into your bed?

How many times a night does s/he wake up?

How long does it take to get him/her back to sleep?

What do you do?

On average, how long would you say s/he is awake per night?

How many times a week does s/he awake during the night?

Coding rules

NIGHT WAKING
0 = Child sleeps through the night.
2 = Child wakes up during the night.

FREQUENCY PER NIGHT

FREQUENCY OF NIGHTS

HOURS : MINUTES

CODE UP TO THREE
1 = Lies quietly in bed.
2 = Cries out.
3 = Leaves bed to fetch parent.
4 = Leaves bed and gets into parent's bed.
5 = Plays contentedly.
6 = Leaves bed to urinate.
7 = Wanders around home.
8 = Other
Definitions and questions

SLEEP PROBLEMS

INSOMNIA

Disturbance of usual sleep pattern involving reduction in actual sleep time during subject's sleep period, accompanied by subjective feeling of need for more sleep. Do not include externally imposed changes in overall sleep pattern (e.g., change in job hours, arrival of new baby), or insomnia during first 2 weeks following such changes.

Sleep problems are scored irrespective of taking medication for them, but note whether medication is being taken. Also include changes attributed to side effects of medication or to substance use.

"How has your sleep been in the last 3 months?"

"What time do you go to bed?"

"Is it hard to fall asleep when you want to? How long does it take? How do you know? Is that every night? How often? Is there any reason for it (e.g., fear of the dark)?"

"Once you're off to sleep, do you wake up again in the night? Why is that? Can you get back to sleep again easily?"

"Do you wake up early in the morning and can't go back to sleep? Is that earlier than you need to? Do you need more sleep? How long have you been having sleep problems?"

MEDICATION FOR INSOMNIA

"Do you take anything to help you sleep? What? Does it work?"

NOTE ANY MEDICATION (PRESCRIPTION OR OVER THE COUNTER) SPECIFICALLY USED IN AN ATTEMPT TO IMPROVE SLEEP PATTERN. NOTE NAME OF DRUG. CODE PRESCRIPTION MEDICATION ALSO IN INCAPACITIES (PAGE 433)
**HYPERSONMIA - INCREASED NEED FOR SLEEP**

Total hours sleep exceed usual amount by at least one hour, unless subject prevented from sleeping.

*Do you feel sleepy during the day?*

More sleepy than usual?

More than most other people?

*Do you sleep in the day?*

How long for?

How long have you been more sleepy than usual?

**RESTLESS SLEEP**

Subject describes sleep as restless. Restless sleep may occur with insomnia, with hypersomnia, or with neither of these.

*How would you describe an average night’s sleep?*

Do you sleep soundly?

Do you toss and turn?

Are you restless?

**INADEQUATELY RESTED BY SLEEP**

Sleep disturbance does not meet criteria for insomnia, but subject describes being inadequately rested by sleep upon waking.

*Do you usually get a good night’s sleep?*

*Are you fairly well rested when you get up?*

*Or after sleeping during the day?*

How do you feel?

When did that start?

<table>
<thead>
<tr>
<th>Codes</th>
</tr>
</thead>
<tbody>
<tr>
<td>CFB8101 Intensity</td>
</tr>
<tr>
<td>CFB8001 Frequency</td>
</tr>
<tr>
<td>CFB8001 Duration</td>
</tr>
<tr>
<td>CFB8001 Onset</td>
</tr>
</tbody>
</table>

**INCREASED NEED FOR SLEEP**

2 = Hypersomnia occurs in at least 2 activities and is at least sometimes uncontrollable.

3 = Hypersomnia occurs in nearly all activities and nearly always uncontrollable.

<table>
<thead>
<tr>
<th>Codes</th>
</tr>
</thead>
<tbody>
<tr>
<td>CFD1001 Intensity</td>
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<tr>
<td>CFD1001 Onset</td>
</tr>
</tbody>
</table>

**RESTLESS SLEEP**

0 = Absent

2 = Present

<table>
<thead>
<tr>
<th>Codes</th>
</tr>
</thead>
<tbody>
<tr>
<td>CFD2001 Intensity</td>
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<tr>
<td>CFD2001 Onset</td>
</tr>
</tbody>
</table>
DAYTIME SLEEPINESS

Child falls asleep during the day at times other than scheduled or expected naps.

0 = No
2 = Yes

FALLS ASLEEP IN CARSEAT FOR UNSCHEDULED NAP

0 = No
2 = Yes

BEDTIME RITUALS

Pattern of parent and child interactions that leads up to the child=’s going to sleep

Distinguish interactions between parent and child from parent sending child to carry out bedtime tasks on his/her own. The latter does not count as a bedtime ritual.

0 = No
2 = Yes

INSOMNIA

Disturbance of the subject's usual sleep pattern, involving a reduction in actual time asleep during the subject's sleep period.
Sleep problems are scored irrespective of medication, but note whether medication is being taken.

If subject is in jail, or other novel or stressful environment, or has their regular sleeping patterns interrupted due to night shift at work, new baby, etc., do not code as insomnia.

Code the frequency and date of onset of symptoms for insomnia overall (i.e. for initial, middle and terminal insomnia combined). Frequency ratings should code the number of days on which insomnia occurred, not the number of episodes of insomnia. Thus, if a subject reported 1 hour each of initial, middle, and terminal insomnia, everyday during the last 3 months, the frequency would be 90 (not 270).

However, any episodes of middle insomnia lasting less than 1 hour would not be counted in the overall frequency rating for insomnia.

2 = The insomnia covers a period between 1 and 2 hours.

3 = The duration of insomnia is greater than or equal to 2 hours per night.

**INITIAL INSOMNIA**

Difficulty in getting to sleep at night. Code the reported time to the onset of sleep.

**MIDDLE INSOMNIA**

Waking at night other than for micturition. Include waking early in the morning if subject returns to sleep.

It is unusual for children to wake at all during the night on a regular basis, so code 1 for any middle insomnia lasting under one hour, and 2 and 3 as defined above. Thus, even if overall rating for insomnia is 0, middle insomnia still can be rated as 1.

**EARLY MORNING WAKENING**

Waking early in the morning, and subject is unable to return to sleep.

Do not include waking in the early morning if the subject then falls asleep again. This pattern is included under Middle Insomnia.

2 = The subject wakes at least one hour earlier than usual and is unable to return to sleep.

3 = The subject wakes at least two hours earlier than usual and is unable to return to sleep.

**MEDICATION FOR INSOMNIA**
Note here any medication, prescribed or over the counter, specifically used in an attempt to improve the subject's sleep pattern (including anti-depressants if they are being used to aid insomnia). Note the name of the drug. Also include medication prescribed for insomnia under Prescribed Medication in the Incapacity Section. However, if the subject takes some one else's prescription medication for insomnia, code it under Sedatives in the Drug Use section.

Even if Insomnia is absent, Medication for Insomnia is still coded. This makes it possible to code a person who is not experiencing any insomnia (overall intensity of 0), due to the fact that s/he is taking medication.

**HYPERSOMNIA - INCREASED NEED FOR SLEEP**

The total hours slept would exceed the usual amount by at least one hour, unless the subject were prevented from sleeping. Do not rate positively if daytime sleeptime plus night-time sleeptime is normal (that is the subject takes compensatory naps). Differentiate from Fatigue or Loss of Interest causing sleepiness.

2 = Hypersomnia occurs in at least two activities and is at least sometimes uncontrollable.

3 = Hypersomnia occurs in nearly all activities and is nearly always uncontrollable.

**RESTLESS SLEEP**

The subject describes his/her sleep as being restless. Restless sleep may occur with insomnia, with hypersomnia, or by itself.

0 = Absent

2 = Present

**INADEQUATELY RESTED BY SLEEP**

Sleep disturbance does not meet criteria for insomnia, but subject describes being inadequately rested by sleep upon waking. If sleep disturbance meets criteria for insomnia, S inadequately rested by sleep.

0 = Absent

2 = Present
N, WEIGHTED PREVALENCE, AND MISSING DATA

<table>
<thead>
<tr>
<th></th>
<th>PAPA Weighted %</th>
<th>N</th>
<th>CAPA Weighted %</th>
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<th>YAPA Weighted %</th>
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<td>115</td>
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</tbody>
</table>

Missing data notes:
- PAPA: no notes.
- CAPA: no notes.
- YAPA: no notes.

OTHER VARIABLES

J4ODEP4: 'Onset age: insomnia or hypersomnia nearly every day'

SAS CODE

***************SAS Code for PAPA******************************;
-----------------------------------------------------------------------;
*** difficulty initiating sleep ***;
if version='1.3' then do;
if(pfj9d02 ge 0.3) and (pfj8f01 ge 24)then p4_son=1;
else if pfj9d02 ne '' and pfj8f01 ne '' then p4_sons=0;
end;

if version in ('1.4','2.0.3') then do;
if(pfj9d01 ge 0.3) and (pfj8f01 ge 24)then p4_sons=1;
else if pfj9d01 ne '' and pfj8f01 ne '' then p4_sons=0;
end;

******************************************************************************;
if pk5d01 ge .5 and pk5f02 ge 24 then p4_swake=1;
else if pk5s01 ne . then p4_swake=0;
******************************************************************************;
if version='1.3' then do;
  if p4_sons ge 1 or p4_swake ge 1 or
    pfl0i01 ge 2 or pfl1i01 ge 2 or
    pfd4i01 ge 2 or pfl4i01 ge 2 then do;
    p4ndep4=1;
    if p4_sons ge 1 then p4odep4=min(p4odep4,p4dsons);
    if p4_swake ge 1 then p4odep4=min(p4odep4,p4dswake);
    if pfl0i01 ge 2 then p4odep4=min(p4odep4,(agedays-pfl0o01));
    if pfl1i01 ge 2 then p4odep4=min(p4odep4,(agedays-pfl1o01));
    if pfd4i01 ge 2 then p4odep4=min(p4odep4,(agedays-pfd4o01));
    if pfl4i01 ge 2 then p4odep4=min(p4odep4,(agedays-pfl4o01));
  end;
  else if p4_sons ne . or p4_swake ne . or
    pfl0i01 ne . or pfl1i01 ne . or
    pfd4i01 ne . or pfl4i01 ne . then p4ndep4=0;
end;

if version in ('1.4','2.0.3') then do;
  if p4_sons ge 1 or p4_swake ge 1 or
    pfl0i01 ge 2 or pfb8i01 ge 2 or
    pfd4i01 ge 2 or pfl4i01 ge 2 then do;
    p4ndep4=1;
    if p4_sons ge 1 then p4odep4=min(p4odep4,p4dsons);
    if p4_swake ge 1 then p4odep4=min(p4odep4,p4dswake);
    if pfl0i01 ge 2 then p4odep4=min(p4odep4,(agedays-pfl0o01));
    if pfb8i01 ge 2 then p4odep4=min(p4odep4,(agedays-pfb8o01));
    if pfd4i01 ge 2 then p4odep4=min(p4odep4,(agedays-pfd4o01));
    if pfl4i01 ge 2 then p4odep4=min(p4odep4,(agedays-pfl4o01));
  end;
  else if p4_sons ne . or p4_swake ne . or
    pfl0i01 ne . or pfb8i01 ne . or
    pfd4i01 ne . or pfl4i01 ne . then p4ndep4=0;
end;

label p4ndep4='Insomnia or hypersomnia';
label p4odep4='Onset: Insomnia or hypersomnia';

j4ndys3 = j4ndep4;
j4odys3 = j4odep4;

label j4ndys3=' Insomnia';
label j4odys3='Onset age: Insomnia ';

*************SAS Code for CAPA*********************;

If yapa ne 1 then do;
  if pFB7F01 gt 45 or pFB8F01 gt 45 then do;
    if pFB7F01 gt 45 then do;
      p4ndep4=1;
      p4odep4=min(p4odep4,(agedays-pfb7o01));
    end;
    if pFB8F01 gt 45 then do;
      p4ndep4=1;
      p4odep4=min(p4odep4,(agedays-pfb8o01));
    end;
  end;
  else if pFB7F01 ne ' ' or pFB8F01 ne ' ' then p4ndep4=0;
if cFB7F01 gt 45 or cFB8F01 gt 45 then do;
    if cFB7F01 gt 45 then do;
        c4ndep4=1;
        c4odep4=min(c4odep4,(agedays-cfb7o01));
        end;
    if cFB8F01 gt 45 then do;
        c4ndep4=1;
        c4odep4=min(c4odep4,(agedays-cfb8o01));
        end;
    end;
else if cFB7F01 ne '' or cFB8F01 ne '' then c4ndep4=0;
if c4ndep4 = 1 or p4ndep4 = 1 then j4ndep4=1;
else if c4ndep4 ne . or p4ndep4 ne . then j4ndep4=0;

j4odep4=min(c4odep4,p4odep4);
label  j4ndep4='Insomnia or hypersomnia nearly every day'
    j4odep4='Onset age: Insomnia or hypersomnia nearly every day';

j4ndys3 = j4ndep4;
j4odys3 = j4odep4;

label j4ndys3=' Insomnia';
label j4odys3='Onset age: Insomnia ';

end;

**************SAS Code for YAPA******************************;

If yapa = 1 then do;
if cFB7F01 gt 45 or cFB8F01 gt 45 then do;
    if cFB7F01 gt 45 then do;
        c4ndep4=1;
        c4odep4=min(c4odep4,(agedays-cfb7o01));
        end;
    if cFB8F01 gt 45 then do;
        c4ndep4=1;
        c4odep4=min(c4odep4,(agedays-cfb8o01));
        end;
    end;
else if cFB7F01 ne '' or cFB8F01 ne '' then c4ndep4=0;

label  c4ndep4='Insomnia or hypersomnia nearly every day'
    c4odep4='Onset age: Insomnia or hypersomnia nearly every day';

j4ndep4= c4ndep4;
j4odep4= c4odep4;

label j4ndep4='Insomnia or hypersomnia nearly every day'
    j4odep4='Onset age: Insomnia or hypersomnia nearly every day';

j4ndys3 = j4ndep4;
j4odys3 = j4odep4;

label j4ndys3=' Insomnia';
label j4odys3='Onset age: Insomnia ';
end;
J4NDEP5: Psychomotor agitation or retardation

Depressive Disorders Variable List

Description

Raw Variable(s)

CAPA Interview Section

Glossary Notes

Additional Variables

N, Weighted Prevalence, and Missing Data

Citations

SAS CODE

Depression (symptom list)

DESCRIPTION

Definition: Psychomotor agitation or retardation

Informant: PAPA- Parent only.
CAPA- Parent and child either/or rule.
YAPA- Self-report.

Note:

<table>
<thead>
<tr>
<th></th>
<th>PAPA</th>
<th>CAPA</th>
<th>YAPA</th>
</tr>
</thead>
<tbody>
<tr>
<td>pdf9i01 (lack of protest)</td>
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<td>N</td>
<td>N</td>
</tr>
<tr>
<td>p/cdb4i01 (subjective motor slowing - intensity)</td>
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<td>Y</td>
<td>Y</td>
</tr>
<tr>
<td>p/eda5i01 (subjection agitation - intensity)</td>
<td>Y</td>
<td>Y</td>
<td>Y</td>
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<tr>
<td>p/eda5f01 (subjection agitation)</td>
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<td>Y</td>
<td>Y</td>
</tr>
<tr>
<td>p/eda5d01 (subjection agitation - duration)</td>
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<td>Y</td>
<td>Y</td>
</tr>
<tr>
<td>p/cdb4f01 (subjective motor slowing)</td>
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<td>Y</td>
<td>Y</td>
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<tr>
<td>p/cdb4d01 (subjective motor slowing - duration)</td>
<td>Y</td>
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</tbody>
</table>
SAMPLE INTERVIEW SECTION

Prechool Age Psychiatric Assessment 2.0.3

Definitions and questions

LACK OF PROTEST
Near absence of child's resistance and/or reaction in situations when protest or reaction would be expected.

Change may predate the primary period, but must have continued into the primary period.

Have you noticed that X protests or resists less than other children his/her age?

Or less than s/he used to?

Is s/he overly compliant about things?

Like when you are putting him/her to bed?
Or combing his/her hair?
Or changing his/her diaper?
Or tending a cut?
Is this a change for X?
When did that change occur?

When did that change occur?

Coding rules

LACK OF PROTEST
0 = Absent
2 = Present

Codes

PDF9001
Intensity

PDF9001
Onset

//
Definitions and questions

SUBJECTIVE AGITATION

Markedly changed motor activity associated with depressed mood. Account of a severe level of inappropriate, unpleasant motor restlessness during a period of dysphoric mood, indicated by pacing, wringing of hands, or similar activities; with a total daily duration of at least 1 hour.

Do not include simple restlessness or fidgetiness in the absence of mood change.

*Do you get very restless when you’re “miserable”?

*Do you have difficulty keeping still?

What is that like?

Can you keep yourself still?
Do you have to move around?
What do you do?

Are you always like that?

How about when you’re not “miserable”?

How long does it last?

When did the “agitation” start?

Coding rules

SUBJECTIVE AGITATION

2 = Agitation is present in at least 2 activities and cannot be entirely controlled, but sometimes the subject can inhibit his/her agitation with effort

3 = Agitation almost entirely uncontrollable

| Codes |
|-------|---|
| CDA5201 | Intensity |
| CDA5F01 | Frequency |
| CDA5D01 | Duration |
| CDA5O01 | Onset |

*
SUBJECTIVE MOTOR SLOWING

Subject feels slowed down in movement and speech; daily total duration of at least 1 hour.

*Have you been moving more slowly than you used to?
*Do you do things more slowly than you used to?
*Or talk more slowly?

Would other people notice?
Can you give me an example?

How long does it last?

Can you do anything to speed yourself up?
What?

When did you start to feel slowed down?

Coding rules

SUBJECTIVE MOTOR SLOWING

2 = Slowing present and cannot be overcome in at least 2 activities but is only subjective, or mild enough not to have been noticed by others

3 = Slowing present and cannot be overcome in almost all activities when present and is observable by others
GLOSSARY NOTES

(Notes from PAPA Glossary)

LACK OF PROTEST

Near absence of child=s resistance and/or reaction in situations when protest or reaction would be expected.

Change may predate the primary period, but must have continued into the primary period.

0 = No
2 = Yes

MOTOR SLOWING

The child is slowed down in his/her movements and speech compared with his/her usual condition.

0 = Absent
2 = Slowing is present and cannot be overcome in at least two activities.
3 = Slowing is present and cannot be overcome in almost all activities.

(Notes from CAPA Glossary)

SUBJECTIVE AGITATION

This symptom is a subjective account of markedly changed motor activity associated with depressed mood. In moderate degree it is shown by fidgeting various parts of the body and an inability to stay still. In severe degree, it is expressed by pacing up and down and wandering about and an inability to sit down for very long. In all degrees, it must be experienced as being unpleasant and last for a daily total of at least one hour.

2 = Agitation is present in at least two activities and cannot be entirely controlled, but sometimes the subject can inhibit his/her agitation with effort.
3 = Agitation is almost entirely uncontrollable.

**SUBJECTIVE MOTOR SLOWING**

The subject feels s/he has been slowed down in his/her movements and speech compared with his/her usual condition. Do not take into account the subject's actual speed of movement and response during the interview. The symptom is only to be coded on the subject's subjective account. Bouts must last for a daily total of at least 1 hour.

2 = Slowing is present and cannot be overcome in at least two activities.

3 = Slowing is present and cannot be overcome in almost all activities.

**N, WEIGHTED PREVALENCE, AND MISSING DATA**

<table>
<thead>
<tr>
<th></th>
<th>PAPA</th>
<th></th>
<th>CAPA</th>
<th></th>
<th>YAPA</th>
<th></th>
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</thead>
<tbody>
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Missing data notes:
- PAPA: no notes.
- CAPA: no notes.
- YAPA: no notes.

**OTHER VARIABLES**

**J4ODEP5**: 'Onset age: Psychomotor agitation/retardation'

**SAS CODE**
**SAS Code for PAPA**

*** 5. Psychomotor agitation or retardation ***;
if pdb4i01 ge 2 or pda5i01 ge 2 or pdf9i01 ge 2 then do;
p4ndep5=1;
   if pdb4i01 ge 2 then p4odep5=min(p4odep5,(agedays-pdb4o01));
   if pda5i01 ge 2 then p4odep5=min(p4odep5,(agedays-pda5o01));
   if pdf9i01 ge 2 then p4odep5=min(p4odep5,(agedays-pdf9o01));
end;
else if pdb4i01 ne . or pda5i01 ne . or pdf9i01 ne . then p4ndep5=0;
lable p4ndep5='psychomotor agitation or retardation';
lable p4odep5='Onset age: psychomotor agitation or retardation';

j4ndep5 = p4ndep5;
j4odep5 = p4odep5;
lable j4ndep5='psychomotor agitation or retardation';
lable j4odep5='Onset age: psychomotor agitation or retardation';

**SAS Code for PAPA**

If yapa ne 1 then do;
   p206dur=pDA5F01*pDA5D01;
   p213dur=pDB4F01*pDB4D01;
   if sum(of p206dur p213dur) ge 30 then do;
      if p206dur ge 1 then do;
         p4ndep5=1;
         p4odep5=(agedays-pda5o01);
      end;
      if p213dur ge 1 then do;
         p4ndep5=1;
         p4odep5=min(p4odep5,(agedays-pdb4o01));
      end;
   end;
else if p213dur ne . or p206dur ne . then p4ndep5=0;

c206dur=cDA5F01*cDA5D01;
c213dur=cDB4F01*cDB4D01;
   if sum(of c206dur c213dur) ge 30 then do;
      if c206dur ge 1 then do;
         c4ndep5=1;
         c4odep5=(agedays-cda5o01);
      end;
      if c213dur ge 1 then do;
         c4ndep5=1;
         c4odep5=min(c4odep5,(agedays-cdb4o01));
      end;
   end;
else if c213dur ne . or c206dur ne . then c4ndep5=0;
   if c4ndep5 = 1 or p4ndep5 = 1 then j4ndep5=1;
else if c4ndep5 ne . or p4ndep5 ne . then j4ndep5=0;

j4odep5=min(c4odep5,p4odep5);

label j4ndep5 = 'Psychomotor agitation/retardation';
label j4odep5 = 'Onset age: Psychomotor agitation/retardation';
end;

***************SAS Code for YAPA**********************;
If yapa = 1 then do;

c206dur=cDA5F01*cDA5D01;
c213dur=cDB4F01*cDB4D01;

if sum(of c206dur c213dur) ge 30 then do;
    if c206dur ge 1 then do;
        c4ndep5=1;
        c4odep5=(agedays-cda5o01);
        end;
    if c213dur ge 1 then do;
        c4ndep5=1;
        c4odep5=min(c4odep5,(agedays-cdb4o01));
        end;
end;
else if c213dur ne . or c206dur ne . then c4ndep5=0;

label c4ndep5 = 'Psychomotor agitation/retardation';
label c4odep5 = 'Onset age: Psychomotor agitation/retardation';

j4ndep5= c4ndep5;
j4odep5= c4odep5;

label j4ndep5 = 'Psychomotor agitation/retardation';
label j4odep5 = 'Onset age: Psychomotor agitation/retardation';
end;
J4NDEP6: Fatigue or loss of energy
J4NDYS4: Fatigue/ tiredness/ dysthymia

Depressive Disorders Variable List

Description
Raw Variable(s)
CAPA Interview Section
Glossary Notes
Additional Variables
N, Weighted Prevalence, and Missing Data
Citations
SAS CODE

Depression (symptom list)
Dysthymia (symptom list)

DESCRIPTION

Definition: Fatigue or loss of energy

Informant:  PAPA- Parent only.
CAPA- Parent and child either/or rule.
YAPA- Self-report.

Note:

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J4NDYS4 = J4NDEP6.

Two raw variables do not following the traditional naming convention; pfd5i01 is the same as cfd3i01 and pfd6i01 is the same as cfd4i01.

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</table>
SAMPLE INTERVIEW SECTION

Definitions and questions

ANHEDONIA
Loss or diminution of the ability to experience pleasure, enjoy things, or have fun.

DISTINGUISH FROM BOREDOM (PAGE 99) AND LOSS OF INTEREST (PAGE 99) OR LACK OF OPPORTUNITIES FOR PARTICIPATION.

FIND OUT IF ACTIVITIES DESCRIBED IN OUT OF SCHOOL ACTIVITIES (PAGE 35) ARE FUN.

"Can you have fun or enjoy yourself?"

"Are there things you used to enjoy but don't anymore?"

Do you feel that you can't enjoy things anymore? What things are fun (or enjoyable) now?

When did you start to feel like that?

SUBJECTIVE ANERGIA
Subjective report of a lack of energy compared with usual state, a general rating of subject's overall energy level.

DIFFERENTIATE FROM FATIGABILITY (PAGE 162) SUBJECTIVE MOTOR SLOWING (PAGE 101) AND HYPERSONNIA (PAGE 161)

"Have you been feeling energetic?"

"Do you have as much energy as you used to have?"

"Or have you lost any of your usual energy?"

Have you been feeling a lack of energy? Do you have enough energy to do things? How has that bothered you?

Do you put things off because you haven't got enough energy? When did you start feeling less energetic?

Coding rules

ANHEDONIA
2 = Generalized diminution in pleasure taken in normally pleasurable activities
3 = Almost nothing gives pleasure

SUBJECTIVE ANERGIA
2 = A generalized listlessness and lack of energy
3 = A report of being almost completely without energy

Codes

ANHEDONIA
CBR2101 Intensity
CBR2001 Onset

SUBJECTIVE ANERGIA
CBR3101 Intensity
CBR3001 Onset
Definitions and questions

**NIGHTMARES**

Frightening dreams that awaken the subject with a markedly unpleasant affect on wakening (which may be followed rapidly by feelings of relief).

*Do you have any bad dreams or nightmares?*

Do they wake you up?
What are they about?
What are they like?

How often?
When did the nightmares start?

**TIRENESS**

A feeling of being tired or weary at least half the time.

*Have you been feeling especially tired or weary?*

*How much of the time have you felt tired like that?*

**FATIGABILITY**

Subject becomes tired or "worn out" more easily than usual.

*Have you become tired or "worn out" more easily than usual?*

*Do you feel exhausted even by things that would have been no problem before?*

When you get tired like that, does it take you a long time to get over it?

Is that more than usual for you?

How long have you felt that way?

Coding rules

**NIGHTMARES**

0 = Absent
2 = Bad dreams have woken the subject on at least 3 occasions in the last 3 months.

**TIRENESS**

2 = Feels tired at least half the time.
3 = Feels tired almost all the time.

**FATIGABILITY**

0 = Absent
2 = Increased fatigability not meeting criteria for 3
3 = Even light tasks rapidly result in feeling exhausted, and recovery from that exhaustion is slow.
GLOSSARY NOTES

(Notes from PAPA Glossary)

ANERGIA

The child feels markedly lacking in energy compared with his/her usual condition and describes him/herself as being easily fatigued, or excessively tired. This is a general rating of the child's overall energy level.

0 = Absent
2 = A generalized listlessness and lack of energy
3 = A report of being almost completely without energy.

Differentiate from Fatigability, Motor Slowing, Hypersomnia and Insomnia, although you may double code if criteria for more than one are met.

TIREDNESS

A feeling of being tired or weary at least half the time.

0 = Absent
2 = Feels tired at least half the time.
3 = Feels tired almost all the time.
FATIGABILITY

Subject becomes tired or "worn out" more easily than usual.

0 = Absent

2 = Increased fatigability not meeting criteria for 3

3 = Even minimal physical activity or play rapidly result in child feeling exhausted, and recovery from that exhaustion is slow.

(Notes from CAPA Glossary)

SUBJECTIVE ANERGIA

The subject feels markedly lacking in energy compared with his/her usual condition and describes him/herself as being easily fatigued, or excessively tired. Do not take into account the subject's observable energy of response during the interview. The symptom is only coded on the subject's subjective account of how s/he feels. This is a general rating of the subject's overall energy level.

2 = A generalized listlessness and lack of energy

3 = A report of being almost completely without energy.

Differentiate Subjective Anergia from Fatigability, Subjective Motor Slowing, Hypersomnia and Insomnia, although you may double code if criteria for more than one are met.

TIREDNESS

A feeling of being tired or weary at least half the time.

2 = Feels tired at least half the time.

3 = Feels tired almost all the time.

FATIGABILITY

Subject becomes tired or "worn out" more easily than usual.

2 = Increased fatigability not meeting criteria for 3.
3 = Even light tasks rapidly result in feeling exhausted, and recovery from that exhaustion is slow.
**N, WEIGHTED PREVALENCE, AND MISSING DATA**

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Missing data notes:
- PAPA: no notes.
- CAPA: no notes.
- YAPA: no notes.

**OTHER VARIABLES**

**J4ODEP6**: 'Onset age: Stealing with confrontation

**SAS CODE**

```sas
**********************SAS Code for PAPA**********************;

*** 6. tiredness fatigue ***;
if pfd6i01 ge 2 or pfd5i01 ge 2 or pdb3i01 ge 2 then do;
p4ndep6=1;
    if pfd6i01 ge 2 then p4odep6=min(p4odep6,(agedays-pfd6o01));
    if pfd5i01 ge 2 then p4odep6=min(p4odep6,(agedays-pfd5o01));
    if pdb3i01 ge 2 then p4odep6=min(p4odep6,(agedays-pdb3o01));
end;
else if pfd6i01 ne . or pfd5i01 ne . or pdb3i01 ne . then p4ndep6=0;

label p4ndep6='tiredness fatigue';
label p4odep6='Onset age: tiredness fatigue';
j4ndep6 = p4ndep6;
j4odep6 = p4odep6;
label j4ndep6='tiredness fatigue';
```
label j4odep6='Onset age: tiredness fatigue';
j4ndys4 = j4ndep6;
j4odys4 = j4odep6;

label j4ndys4='Fatigue/ tiredness/ dysthymia';
label j4odys4='Onset age: Fatigue/ tiredness/ dysthymia';

******************SAS Code for CAPA**********************;
if yapa ne 1 then do;
  if study='GSMS' and wave=1 then do;
    if pDB3I01 >= 2 then do;
      p4ndep6=1;
      p4odep6=(agedays-pdb3o01);
    end;
    else if pDB3I01 ne '' then p4ndep6=0;
  end;
else do;
  if pDB3I01 >= 2 or pfd5i01 ge 2 or pfd6i01 ge 2 then do;
    if pDB3I01 >= 2 then do;
      p4ndep6=1;
      p4odep6=(agedays-pdb3o01);
    end;
    if pfd5i01 >= 2 then do;
      p4ndep6=1;
      p4odep6=min(p4odep6,(agedays-pfd5o01));
    end;
    if pfd6i01 >= 2 then do;
      p4ndep6=1;
      p4odep6=min(p4odep6,(agedays-pfd6o01));
    end;
  end;
else if pDB3I01 ne '' or pfd5i01 ne '' or pfd6i01 ne '' then p4ndep6=0;
end;

if study='GSMS' and wave=1 then do;
  if cDB3I01 >= 2 then do;
    c4ndep6=1;
    c4odep6=(agedays-cdb3o01);
  end;
else if cDB3I01 ne '' then c4ndep6=0;
end;
else do;
  if cDB3I01 >= 2 or cfd3i01 ge 2 or cfd4i01 ge 2 then do;
    if cDB3I01 >= 2 then do;
      c4ndep6=1;
      c4odep6=(agedays-cdb3o01);
    end;
    if cfd3i01 >= 2 then do;
      c4ndep6=1;
      c4odep6=min(c4odep6,(agedays-cfd3o01));
    end;
    if cfd4i01 >= 2 then do;
      c4ndep6=1;
      c4odep6=min(c4odep6,(agedays-cfd4o01));
end;
end;
else if cDB3I01 ne ' ' or cfd3i01 ne ' ' or
cfd4i01 ne ' ' then c4ndep6=0;
end;

if c4ndep6 = 1 or p4ndep6 = 1 then j4ndep6=1;
else if c4ndep6 ne . or p4ndep6 ne . then j4ndep6=0;
j4odep6=min(c4odep6,p4odep6);

label j4ndep6='Significant weight loss or gain, or appetite disturbance' ;
label j4odep6='Onset age: Significant weight loss or gain, or appetite disturbance' ;
j4ndys4 = j4ndep6;
j4odys4 = j4odep6;
label j4ndys4='Fatigue/ tiredness/ dysthymia';
label j4odys4='Onset age: Fatigue/ tiredness/ dysthymia';
end;

**************SAS Code for YAPA**********************;
If yapa = 1 then do;
if study='GSMS' and wave=1 then do;
if cDB3I01 >= 2 then do;
c4ndep6=1;
c4odep6=(agedays-cbd3o01);
end;
else if cDB3I01 ne ' ' then c4ndep6=0;
end;
else do;
if cDB3I01 >= 2 or cfd3i01 ge 2 or cfd4i01 ge 2 then do;
if cDB3I01 >= 2 then do;
c4ndep6=1;
c4odep6=(agedays-cdb3o01);
end;
if cfd3i01 >= 2 then do;
c4ndep6=1;
c4odep6=min(c4odep6,(agedays-cfd3o01));
end;
if cfd4i01 >= 2 then do;
c4ndep6=1;
c4odep6=min(c4odep6,(agedays-cfd4o01));
end;
else if cDB3I01 ne ' ' or cfd3i01 ne ' ' or
cfd4i01 ne ' ' then c4ndep6=0;
end;

label c4ndep6= 'Significant weight loss or gain, or appetite disturbance' ;
label c4odep6='Onset age: Significant weight loss or gain, or appetite disturbance' ;
j4ndep6= c4ndep6;
j4odep6= c4odep6;
**label** j4ndep6='Significant weight loss or gain, or appetite disturbance';
**label** j4odep6='Onset age: Significant weight loss or gain, or appetite disturbance';

j4ndys4 = j4ndep6;
j4odys4 = j4odep6;

**label** j4ndys4='Fatigue/ tiredness/ dysthymia';
**label** j4odys4='Onset age: Fatigue/ tiredness/ dysthymia';

End;
J4NDYS5: Low self-esteem / dysthymia

Depressive Disorders Variable List

Description

Raw Variable(s)

CAPA Interview Section

Glossary Notes

Additional Variables

N, Weighted Prevalence, and Missing Data

Citations

SAS CODE

Dysthymia (symptom list)

DESCRIPTION

Definition: Low self-esteem / dysthymia

Informant: PAPA- Parent only.
CAPA- Parent and child either/or rule.
YAPA- Self-report.

Note:

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SAMPLE INTERVIEW SECTION

Child and Adolescent Psychiatric Assessment

Definitions and questions

SELF-DEPRECIATION AND SELF-HATRED

An unjustified feeling of inferiority to others (including unjustified feelings of ugliness). Self-hatred involves severe hostility directed by the subject against him/herself, accompanied by expressed dislike or expressed criticism.

Do not rate delusional phenomena here.

*How do you feel about yourself?

*Do you like yourself?

How do you feel about your appearance (look)?

What are you like compared with others?

*If you have to choose, would you say you were good-looking, average, or ugly?

How ugly do you think you are?
Are you much worse-looking than most people?
How much of the time do you feel like that?

Is there anything that you are good at?
What are you like compared with others?

*As a person are you as good as other people?

Are you any good at all?
Do you think you’re no good? ... at anything?
Is everyone better than you are?

Do you think you will ever be any better?
Do you think that all the time or only part of the time?

When did you start to feel like that?

*What things do you do that you are proud of?

Coding rules

SELF-DEPRECIATION

2 = The child rates him/herself lower than seems justified, but does not see him/herself as being completely without value, since in some activities he does not feel inferior

3 = The subject feels almost entirely worthless and without saving graces, in nearly all activities, or inferior to everyone. Self-hatred is also rated here
GLOSSARY NOTES

(Notes from PAPA Glossary)

SELF-DEPRECIATION AND SELF-HATRED

A generalized, unjustified feeling of inferiority (including unjustified feelings of ugliness) to others. Self-hatred involves severe hostility directed by the child against him/herself, accompanied by expressed dislike or expressed criticism. Delusional phenomena are not included here.

0 = Absent

2 = The child rates him/herself lower than seems justified, but does not see him/herself as being completely without value, since in some activities s/he does not feel inferior.

3 = The child feels ugly, as well as almost entirely worthless and without saving graces, in nearly all activities, or inferior to almost everyone.

Self-hatred is also coded 3.

(Notes from CAPA Glossary)

SELF-DEPRECIATION AND SELF-HATRED

A generalized, unjustified feeling of inferiority (including unjustified feelings of ugliness) to others. Self-hatred involves severe hostility directed by the subject against him/herself, accompanied by expressed dislike or expressed criticism. Delusional phenomena are not included here.

2 = The child rates him/herself lower than seems justified, but does not see him/herself as being completely without value, since in some activities s/he does not feel inferior.

3 = The subject feels ugly, as well as almost entirely worthless and without saving graces, in nearly all activities, or inferior to almost everyone.

Self-hatred is also coded 3.
### N, WEIGHTED PREVALENCE, AND MISSING DATA

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Missing data notes:
- PAPA: no notes.
- CAPA: no notes.
- YAPA: no notes.

### OTHER VARIABLES

**J4ODYS5:** 'Onset age: Low self-esteem/dysthymia'

### SAS CODE

```sas
***************SAS Code for PAPA***************;
if pdc1i01 ge 2 then do;
p4ndys5=1;
p4odys5=(agedays-pdc1o01);
end;
else if pdc1i01 ne . then p4ndys5=0;
label p4ndys5='low self-esteem/dysthymia';
label p4odys5='low self-esteem/dysthymia';
j4ndys5 = p4ndys5;
j4odys5 = p4odys5;

label j4ndys5='low self-esteem/dysthymia';
label j4odys5='low self-esteem/dysthymia';
```
**************SAS Code for CAPA**********************;

If yapa ne 1 then do;

if pdc1i01 ge 2 then do;
  p4ndys5=1;
  p4odys5=(agedays-pdc1o01);
end;
else if pdc1i01 ne . then p4ndys5=0;
label p4ndys5='low self-esteem/dysthymia';
label p4odys5='low self-esteem/dysthymia';

if cdc1i01 ge 2 then do;
  c4ndys5=1;
  c4odys5=(agedays-cdc1o01);
end;
else if cdc1i01 ne . then c4ndys5=0;
label c4ndys5='low self-esteem/dysthymia';
label c4odys5='low self-esteem/dysthymia';

if p4ndys5 = 1 or c4ndys5 = 1 then j4ndys5= 1;
else if p4ndys5 ne . or c4ndys5 ne . then j4ndys5 = 0;

jodys5=min(podys5,codys5);
label j4ndys5='low self-esteem/dysthymia';
label j4odys5='low self-esteem/dysthymia';
end;

**************SAS Code for YAPA**********************;

If yapa = 1 then do;

if cdc1i01 ge 2 then do;
  c4ndys5=1;
  c4odys5=(agedays-cdc1o01);
end;
else if cdc1i01 ne . then c4ndys5=0;
label c4ndys5='low self-esteem/dysthymia';
label c4odys5='low self-esteem/dysthymia';
j4ndys5 = c4ndys5;
j4odys5 = c4odys5;

label j4ndys5='low self-esteem/dysthymia';
label j4odys5='low self-esteem/dysthymia';
end;
J4NDEP7: Worthlessness or guilt

Depressive Disorders Variable List

Description

Definition: Worthlessness or Guilt

Informant: PAPA- Parent only.
CAPA- Parent and child either/or rule.
YAPA- Self-report.

Note:

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pdc0i01 is used in the PAPA algorithms but not CAPA/YAPA
SAMPLE INTERVIEW SECTION

Definitions and questions

SELF-DEPRECIATION AND SELF-HATRED

An unjustified feeling of inferiority to others (including unjustified feelings of ugliness). Self-hatred involves severe hostility directed by the subject against him/herself, accompanied by expressed dislike or expressed criticism.

Do not rate delusional phenomena here.

*How do you feel about yourself?

*Do you like yourself?

How do you feel about your appearance (looks)?

What are you like compared with others?

*If you have to choose, would you say you were good-looking, average, or ugly?

How ugly do you think you are?
Are you much worse-looking than most people?
How much of the time do you feel like that?

Is there anything that you are good at?
What are you like compared with others?

*As a person are you as good as other people?

Are you any good at all?
Do you think you're no good? ... at anything?
Is everyone better than you are?

Do you think you will ever be any better?
Do you think that all the time or only part of the time?

When did you start to feel like that?

*What things do you do that you are proud of?

Coding rules

SELF-DEPRECIATION

2 = The child rates him/herself lower than seems justified, but does not see him/herself as being completely without value, since in some activities s/he does not feel inferior

3 = The subject feels almost entirely worthless and without saving graces, in nearly all activities, or inferior to everyone. Self-hatred is also rated here
**PATHOLOGICAL GUILT**

Excessive self-blame for minor or non-existent wrongdoings. Subject realizes that guilt is exaggerated; if not, rate as Delusions of Guilt.

*Do you feel bad or guilty about anything that you’ve done? What?*

How often do you feel like that?
When was the last time?

*Do you blame yourself at all?*

Do you deserve to have bad things happen to you?
Do you think you deserve punishment?
Why?

Do you ever feel guilty about things that you know aren’t really your fault?

Do you feel that a lot of things that go wrong are your fault? What?
How guilty do you feel?

When did you start to feel that you were "to blame"?

IF PATHOLOGICAL GUILT IS PRESENT, CONSIDER DELUSIONS OF GUILT.

**DELUSIONS OF GUILT**

Excessive self-blame for minor or non-existent wrongdoings. Subject does not realize that guilt is exaggerated.

Have you committed a crime?
Or sinned greatly?
Do you deserve to be punished?
Do you think that you might hurt or ruin other people?

**PATHOLOGICAL GUILT**

2 = At least partially unmodifiable excessive self-blame not generalized to all negative events

3 = The subject generalizes the feeling of self-blame to almost anything that goes wrong in his/her environment

**DELUSIONS OF GUILT**

2 = The subject has a delusional conviction of having done wrong but there is a fluctuating awareness that his/her feelings are an exaggeration of normal guilt

3 = The subject has an unmodifiable delusional conviction that she sinned greatly, etc.
FEELS UNLOVED

A generalized feeling of being unloved and uncared for, or at least less loved and cared for than most people, regardless of the justification for that feeling. Differentiate from loneliness.

0 = Absent

2 = The child feels that there are others who love him/her or care for him/her, but that s/he is loved, or cared for, less than other people.

3 = The child feels that almost no one loves him/her, or hardly ever believes that anyone does.

PATHOLOGICAL GUILT

Excessive self-blame for minor or non-existent wrongdoings. The child realizes that his/her guilt is exaggerated (otherwise rate as delusional guilt).

0 = Absent

2 = At least partially unmodifiable, excessive self-blame not generalized to all negative events.

3 = The child generalizes the feeling of self-blame to almost everything that goes wrong in his/her environment.

DELUSIONS OF GUILT

Delusional self-blame for minor or non-existent wrongdoings. The child may believe that s/he has brought ruin to his/her family by being in his/her present condition or that his/her symptoms are a punishment for not doing better. Distinguish from pathological guilt without delusional elaboration, in which the child is in general aware that the guilt originates within him/herself and is exaggerated.

0 = Absent

2 = The child has a delusional conviction of having done wrong but there is fluctuating awareness that his/her feelings are an exaggeration of normal guilt.
3 = The child has an unmodifiable delusional conviction that s/he has sinned greatly, etc..

**SELF-DEPRECIATION AND SELF-HATRED**

A generalized, unjustified feeling of inferiority (including unjustified feelings of ugliness) to others. Self-hatred involves severe hostility directed by the child against him/herself, accompanied by expressed dislike or expressed criticism. Delusional phenomena are not included here.

0 = Absent

2 = The child rates him/herself lower than seems justified, but does not see him/herself as being completely without value, since in some activities s/he does not feel inferior.

3 = The child feels ugly, as well as almost entirely worthless and without saving graces, in nearly all activities, or inferior to almost everyone.

Self-hatred is also coded 3.
SELF-DEPRECIATION AND SELF-HATRED

A generalized, unjustified feeling of inferiority (including unjustified feelings of ugliness) to others. Self-hatred involves severe hostility directed by the subject against him/herself, accompanied by expressed dislike or expressed criticism. Delusional phenomena are not included here.

2 = The child rates him/herself lower than seems justified, but does not see him/herself as being completely without value, since in some activities s/he does not feel inferior.

3 = The subject feels ugly, as well as almost entirely worthless and without saving graces, in nearly all activities, or inferior to almost everyone.

Self-hatred is also coded 3.

N, WEIGHTED PREVALENCE, AND MISSING DATA

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Missing data notes:
- PAPA: no notes.
- CAPA: no notes.
- YAPA: no notes.
**SAS CODE**

***************SAS Code for PAPA**************;

*** 7. worthlessness/guilt ***;
  if  pdc0i01 ge 2 or pdc1i01 ge 2 or pdc3i01 ge 2 or pdc4i01 ge 2 then do;
   p4ndep7=1;
   if pdc0i01 ge 2 then p4odep7=min(p4odep7,(agedays-pdc0o01));
   if pdc1i01 ge 2 then p4odep7=min(p4odep7,(agedays-pdc1o01));
   if pdc3i01 ge 2 then p4odep7=min(p4odep7,(agedays-pdc3o01));
   if pdc4i01 ge 2 then p4odep7=min(p4odep7,(agedays-pdc4o01));
  end;
  else if  pdc0i01 ne . or pdc1i01 ne . or pdc3i01 ne . or pdc4i01 ne . then p4ndep7=0;
  label p4ndep7='worthlessness or guilt';
  label p4odep7='Onset age: worthlessness or guilt';

j4ndep7 = p4ndep7;
j4odep7 = p4odep7;

label j4ndep7='worthlessness or guilt';
label j4odep7='Onset age: worthlessness or guilt';

***************SAS Code for CAPA**************;

If yapa ne 1 then do;

if  pDC1I01 ge 2 or pDC3I01 ge 2 or pDC4I01 ge 2 then do;
   if  pDC1I01 ge 2 then do;
      p4ndep7=1;
      p4odep7=(agedays-pDC1o01);
      end;
   if  pDC3I01 ge 2 then do;
      p4ndep7=1;
      p4odep7=min(p4odep7,(agedays-pDC3o01));
      end;
   if  pDC4I01 ge 2 then do;
      p4ndep7=1;
      p4odep7=min(p4odep7,(agedays-pDC4o01));
      end;
   end;
else if  pDC1I01 ne '' or pDC3I01 ne '' or pDC4I01 ne '' then p4ndep7=0;

if  cDC1I01 ge 2 or cDC3I01 ge 2 or cDC4I01 ge 2 then do;
   if  cDC1I01 ge 2 then do;
      c4ndep7=1;
      c4odep7=(agedays-cDC1o01);
      end;
   if  cDC3I01 ge 2 then do;
      c4ndep7=1;
      c4odep7=min(c4odep7,(agedays-cDC3o01));
      end;
if cDC4I01 ge 2 then do;
c4ndep7=1;
c4odep7=min(c4odep7,(agedays-cdc4o01));
end;
end;
else if cDC1I01 ne '.' or cDC3I01 ne '.' or cDC4I01 ne '.' then c4ndep7=0;
if c4ndep7 = 1 or p4ndep7 = 1 then j4ndep7=1;
else if c4ndep7 ne . or p4ndep7 ne . then j4ndep7=0;
j4odep7=min(c4odep7,p4odep7);
label j4ndep7= 'Worthlessness or guilt';
label j4odep7= 'Onset age: Worthlessness or guilt';
end;

***************SAS Code for YAPA***************;
If yapa = 1 then do;
if cDC1I01 ge 2 or cDC3I01 ge 2 or cDC4I01 ge 2 then do;
  if cDC1I01 ge 2 then do;
    c4ndep7=1;
    c4odep7=(agedays-cdc1o01);
  end;
  if cDC3I01 ge 2 then do;
    c4ndep7=1;
    c4odep7=min(c4odep7,(agedays-cdc3o01));
  end;
  if cDC4I01 ge 2 then do;
    c4ndep7=1;
    c4odep7=min(c4odep7,(agedays-cdc4o01));
  end;
else if cDC1I01 ne '.' or cDC3I01 ne '.' or cDC4I01 ne '.' then c4ndep7=0;

label c4ndep7= 'Worthlessness or guilt';
label c4odep7= 'Onset age: Worthlessness or guilt';
j4ndep7= c4ndep7;
j4odep7= c4odep7;
label j4ndep7= 'Worthlessness or guilt';
label j4odep7= 'Onset age: Worthlessness or guilt';
end;
**J4NDEP8: Problems with thinking / deciding**

**J4NDYS6: Difficulty making decisions, poor concentration dysthymia**

---

**Depressive Disorders Variable List**

**Description**

**Raw Variable(s)**

**CAPA Interview Section**

**Glossary Notes**

**Additional Variables**

**N, Weighted Prevalence, and Missing Data**

**Citations**

**SAS CODE**

**Depression (symptom list)**

---

**DESCRIPTION**

---

**Definition:** Poor thinking and decisions

**Informant:**
- **PAPA:** Parent only.
- **CAPA:** Parent and child either/or rule.
- **YAPA:** Self-report.

**Note:**

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J4NDYS6 = J4NDEP8.

---

**RAW VARIABLE(S)**

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SAMPLE INTERVIEW SECTION

Definitions and questions

INATTENTION

Now I'd like to focus on how well s/he concentrates. Please think about what s/he's like in the activities that require concentration, both ones s/he's required to do and ones s/he chooses.

DIFFICULTY CONCENTRATING ON TASKS OR PLAY ACTIVITIES REQUIRING SUSTAINED ATTENTION - ALONE

Is s/he able to concentrate on things when s/he has to?

Does s/he have more problems concentrating or focusing on things than other children his/her age?

Is s/he able to concentrate when doing something alone?

Like playing?

Does this happen in any of the activities we talked about?

What does s/he do?

Is it like that in all activities?

Or just some activities?

DIFFICULTY CONCENTRATING ON TASKS OR PLAY ACTIVITIES REQUIRING SUSTAINED ATTENTION - WITH ADULT

Is s/he able to concentrate when doing things with an adult?

How long do you think s/he can concentrate?

How long can s/he sit and be read a book?

Can s/he watch a whole TV show?

Or play a game to the end?

Can s/he make him/herself concentrate if s/he really tries?

Is that all the time? Or just some times?

What about if you ask him/her to concentrate?
SUBJECTIVE COMPLAINTS ABOUT THINKING

INEFFICIENT THINKING
Unpleasant difficulty with thinking clearly or efficiently or concentrating, even about simple matters; daily total duration of at least 1 hour.

*Do your thoughts get muddled or confused easily?
  How long has it been like that?
  Can you think clearly if you need to?
  Does it cause you any trouble? What?
  Is there any interference with your thoughts?
  When did you start to have trouble with your thinking?

INDECISIVENESS
Unpleasant difficulty in reaching decisions, even about simple matters; a general rating of subject's ability to make decisions.

*What about decisions; are you good at making decisions (making up your mind)?
  Why not?
  *Have you had any trouble making decisions?
  Why?
  When was the last time you had that sort of trouble?
  What happens when you have to make up your mind?
  Can you remember the last time that happened?
  Have you always been like that?
  Does it cause you any trouble? What?
CONCENTRATION DIFFICULTIES

Difficulty in concentrating, or mind "going blank" when feeling anxious.

0 = Absent

2 = Concentration impairment sufficient to interfere with ongoing activities

INDECISIVENESS

Unpleasant difficulty in reaching decisions, even about simple matters; this is a generalized difficulty, and does not refer to making important life decisions in which uncertainty may reasonably be expected.

0 = Absent

2 = Indecisiveness sometimes uncontrollable in at least two activities.

3 = Indecisiveness almost always uncontrollable and occurs in relation to almost all decisions.

INEFFECTIVE THINKING

The subject complains that s/he is unable to think clearly or efficiently, even about simple matters, and finds the experience unpleasant. His/her thoughts are muddled and they may tend to go round and round in aimless circles (in which case consider the possibility that Rumination is present). This complaint is subjective and may be in contrast to the clear and efficient way in which the subject describes the symptom. Only the subjective complaint is coded. The total daily duration must be at least one hour.

Do not include difficulties thinking about schoolwork which the subject finds difficult or complicated.

If Thought Insertion, Commentary, Withdrawal or Broadcast or any kind of delusional explanation for the thought disorder are present, code S.
Distinguish from Subjective Slowed Thinking, which is a subjective sensation of the processes of thinking being slowed down. Differentiate from Subjective Motor Slowing which refers to actual speech and motor production. Differentiate from Ruminations, Worries, Poor Concentration and Indecisiveness.

2 = Inefficient thinking is sometimes uncontrollable in at least two activities.

3 = Inefficient thinking is almost always uncontrollable and occurs in relation to almost all situations where clear thinking is required.

INDECISIVENESS

Unpleasant difficulty in reaching decisions, even about simple matters; this is a generalized difficulty, and does not refer to making important life decisions in which uncertainty may reasonably be expected. There is no duration criterion here, since this is a general rating of the subject's ability to make decisions.

2 = Indecisiveness sometimes uncontrollable in at least two activities.

3 = Indecisiveness almost always uncontrollable and occurs in relation to almost all decisions.
### N, WEIGHTED PREVALENCE, AND MISSING DATA

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Missing data notes:
- PAPA: no notes
- CAPA: no notes
- YAPA: no notes

### OTHER VARIABLES

**J4ODEP8**: 'Onset age: problems with thinking/deciding';

### SAS CODE

```
***************SAS Code for PAPA**************
*** 8. decreased concentration ***;
if pdb6i01 ge 2 or pra7i01 ge 2 or pra7i02 ge 2 then do;
p4ndep8=1;
  if pdb6i01 ge 2 then p4odep8=(agedays-pdb6o01);
end;
else if pdb6i01 ne . or pra7i01 ne . or pra7i02 ne . then p4ndep8=0;
label p4ndep8='decreased concentration';
label p4odep8='Onset age: decreased concentration';

j4ndep8 = p4ndep8;
```
j4odep8 = p4odep8;

**SAS Code for CAPA**

If yapa ne 1 then do;

if pDB5I01 ge 2 or pDB6I01 ge 2 then do;
  if pDB5I01 ge 2 then do;
    p4ndep8=1;
    p4odep8=(agedays-pdb5o01);
  end;
  if pDB6I01 ge 2 then do;
    p4ndep8=1;
    p4odep8=min(p4odep8,(agedays-pdb6o01));
  end;
end;
else if pDB5I01 ne ' ' or pDB6I01 ne ' ' then p4ndep8=0;
if cDB5I01 ge 2 or cDB6I01 ge 2 then do;
  if cDB5I01 ge 2 then do;
    c4ndep8=1;
    c4odep8=(agedays-cdb5o01);
  end;
  if cDB6I01 ge 2 then do;
    c4ndep8=1;
    c4odep8=min(c4odep8,(agedays-cdb6o01));
  end;
else if cDB5I01 ne ' ' or cDB6I01 ne ' ' then c4ndep8=0;

if c4ndep8 = 1 or p4ndep8 = 1 then j4ndep8=1;
else if c4ndep8 ne . or p4ndep8 ne . then j4ndep8=0;

j4odep8=min(c4odep8,p4odep8);

**SAS Code for YAPA**

If yapa = 1 then do;

if c4ndep8 = 1 or p4ndep8 = 1 then j4ndep8=1;
else if c4ndep8 ne . or p4ndep8 ne . then j4ndep8=0;

j4odep8=min(c4odep8,p4odep8);

**SAS Code for CAPA**

If yapa ne 1 then do;

if pDB5I01 ge 2 or pDB6I01 ge 2 then do;
  if pDB5I01 ge 2 then do;
    p4ndep8=1;
    p4odep8=(agedays-pdb5o01);
  end;
  if pDB6I01 ge 2 then do;
    p4ndep8=1;
    p4odep8=min(p4odep8,(agedays-pdb6o01));
  end;
end;
else if pDB5I01 ne ' ' or pDB6I01 ne ' ' then p4ndep8=0;
if cDB5I01 ge 2 or cDB6I01 ge 2 then do;
  if cDB5I01 ge 2 then do;
    c4ndep8=1;
    c4odep8=(agedays-cdb5o01);
  end;
  if cDB6I01 ge 2 then do;
    c4ndep8=1;
    c4odep8=min(c4odep8,(agedays-cdb6o01));
  end;
else if cDB5I01 ne ' ' or cDB6I01 ne ' ' then c4ndep8=0;

if c4ndep8 = 1 or p4ndep8 = 1 then j4ndep8=1;
else if c4ndep8 ne . or p4ndep8 ne . then j4ndep8=0;

j4odep8=min(c4odep8,p4odep8);

**SAS Code for YAPA**

If yapa = 1 then do;
if cDB5I01 ge 2 or cDB6I01 ge 2 then do;
  if cDB5I01 ge 2 then do;
    c4ndep8=1;
    c4odep8=(agedays-cdb5o01);
  end;
  if cDB6I01 ge 2 then do;
    c4ndep8=1;
    c4odep8=min(c4odep8,(agedays-cdb6o01));
  end;
end;
else if cDB5I01 ne ' ' or cDB6I01 ne ' ' then c4ndep8=0;

label j4ndep8= 'Problems with thinking/deciding'
  j4odep8= 'Onset age: problems with thinking/deciding';

j4ndep8= c4ndep8;
j4odep8= c4odep8;

j4ndys6 = j4ndep8;
j4odys6 = j4odep8;

label j4ndys6=' Difficulty making decisions, poor concentration dysthymia';
label j4odys6='Onset age: Difficulty making decisions, poor concentration dysthymia';
end;
J4NDEP9: Think about, plan or attempt suicide

Depressive Disorders Variable List
Description
Raw Variable(s)
CAPA Interview Section
Glossary Notes
Additional Variables
N, Weighted Prevalence, and Missing Data
Citations
SAS CODE
Depression (symptom list)

DESCRIPTION

Definition: Suicide Score

Informant: PAPA- Parent only.
CAPA- Parent and child either/or rule.
YAPA- Self-report.

Note:

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</table>
SAMPLE INTERVIEW SECTION

Definitions and questions

SUICIDAL INTENT
Code the highest level of suicidal intent manifested in an attempt. Do not include potentially self-injurious behavior without suicidal intent here.

Which time was s/he most serious about killing him/herself?

What did s/he do?
Do you think s/he really wanted to die?
Was s/he serious about killing him/herself when s/he tried in the last 3 months?

LETHALITY OF SUICIDAL ATTEMPT
Code here the degree of threat to life resulting from the most serious suicidal attempt.
THINKING ABOUT DEATH

Thoughts about death and dying, whether referred to self or others.

Include thoughts about not being able to go on any longer and life not being worth living.

CODE THOUGHTS ABOUT TAKING ONE'S OWN LIFE UNDER SUICIDAL THOUGHTS (PAGE 113).

Ask under screening questions.

What do you think about?

How much do you think about it?

Do you sometimes wish you were dead?

Do you want to die?

Why do you feel like that?

How long have you been thinking like that?
SUICIDAL THOUGHTS

Thoughts specifically about killing oneself, by whatever means, with some intention to carry them out.

Do not include suicidal plans.

* Do you ever think about ending it all?

When was the last time?
What do you think about?

* Are you actually going to do this?

IF SUICIDAL THOUGHTS ARE PRESENT THEN ASK ABOUT SUICIDAL PLANS (PAGE 113)

OTHERWISE SKIP TO SUICIDAL ATTEMPTS (PAGE 114).

SUICIDAL PLANS

Suicidal thoughts that contain plans of a suicidal act and some intent to carry them out.

If suicide attempt has been made, determine whether a plan was present prior to the attempt.

* Have you thought about actually killing yourself?

Have you thought what you might do?
Are you going to do this?
Have you done anything to prepare for killing yourself?
What?

SUICIDAL PLANS

2 = A specific plan, considered on more than 1 occasion, over which no action was taken

3 = A specific plan, considered on more than 1 occasion, with preparatory action taken, for example storing up pills
SUICIDAL ATTEMPTS

Episodes of deliberately self-harmful behavior involving some intention to die at the time of the attempt. Rate here, no matter how unlikely the attempt was to cause death, so long as the subject's intention was to die.

*Have you ever actually tried to kill yourself?
What happened?
Where did you do it?
Were there any people around at the time?
How were you feeling?
Did you really want to die?
Who found you?
Did you go to the hospital?
When did you first try to kill yourself?
When did you last try to kill yourself?
How many times have you tried?
What do you think about it now?
Would you do it again if you had the chance?
Do you wish you were dead now?

IF A SUICIDE ATTEMPT HAS BEEN MADE IN THE PAST 3 MONTHS, COMPLETE ENTIRE SECTION

IF ATTEMPT HAS EVER BEEN MADE, BUT NOT IN LAST 3 MONTHS, COMPLETE EVER ITEMS IN SECTION

OTHERWISE, SKIP TO "SUICIDAL" BEHAVIOR WITHOUT INTENT (PAGE 119).
THINKING ABOUT DEATH

Thoughts about death and dying, whether referred to the self or others. Include thoughts about being the passive subject of a fatal accident or murder and thoughts about how sorry others will be when the child is gone. Include thoughts about not being able to go on any longer and life not being worth living in this rating. If the child has thoughts specifically about taking his/her own life, code under Suicidal Thoughts.

0 = Absent

2 = Present but not including thoughts about wanting to die. The thoughts should be intrusive into at least 2 activities and at least sometimes uncontrollable.

3 = Including thoughts about wanting to die. The thoughts should be intrusive into at least two activities and at least sometimes uncontrollable. Do not include thoughts about taking one's own life, these are coded under Suicidal Thoughts.

SUICIDAL THOUGHTS

Refers to thinking specifically about killing oneself, by whatever means. This may accompany thinking about death in general, or may be present if a child has reported a suicidal plan or past attempt.

Do not include suicidal plans.

0 = Absent

2 = At least sometimes uncontrollable suicidal thoughts, recurring in at least two activities.

3 = Usually uncontrollable suicidal thoughts intruding into most activities.

SUICIDAL PLANS

Refer to suicidal thoughts in which the child considers plans for a suicidal act. If a suicidal attempt has been made, determine whether a plan was present prior to the attempt.

0 = Absent
2 = A specific plan, considered on more than 1 occasion, over which no action was taken.

3 = A specific plan, considered on more than 1 occasion, with preparatory action taken, for example storing up tablets.

Note that each of these definitions is mutually exclusive by definition. Obviously, a suicidal plan is a form of suicidal thought in ordinary speech. However, by the specificity coding rule, consideration of a plan for killing oneself is coded only as a Suicidal Plan, and not as Suicidal Thoughts

**LIFETIME SUICIDAL BEHAVIOR**

Attempted self-harm, with the intention of ending life, occurring at any time in the child's life. Rate here, no matter how unlikely to cause death the attempt was, so long as the child's intention was to die.

0 = Absent

2 = Present

**SUICIDAL ATTEMPTS**

Episodes of deliberate self-harmful behavior, or potentially self-harmful behavior, involving some intention to die at the time of the attempt.

Differentiate from Non-suicidal Physical Self-damaging Acts.

If a parent is unsure whether his/her child actually had some intention to die, still code this item positive if the parent can describe a clear self-harmful act.

0 = No

2 = Yes
**SUICIDAL INTENT**

Code the highest level of suicidal intent manifested in an attempt. Do not include potentially self-injurious behavior without suicidal intent here; that is coded under "Suicidal" Behavior without Intent.

Ever and 3 month ratings coded separately.

1 = Interviewee reports child’s minimal intention to actually kill him/herself. S/he either revealed the attempt to others, or otherwise ensured that there was little risk to take his/her life.

2 = Substantial intent to kill self, but associated with ambivalence to a sufficient degree that the intention was not absolute.

3 = Absolute (or almost absolute) intention to commit suicide, expressed with little or no ambivalence or uncertainty. If uncertain whether to code 2 or 3, code 2.

**LETHALITY OF SUICIDAL ATTEMPT**

Code here the degree of threat to life, resulting from the most serious suicidal attempt.

1 = Mild; No medical attention needed or sought.

2 = Moderate; Some medical attention sought or required (e.g., sewing up cuts, stomach lavage)

3 = Serious; The attempt resulted in unconsciousness, the need for resuscitation, assisted respiration, blood transfusion, or operative intervention.

(Notes from CAPA Glossary)

**THINKING ABOUT DEATH**

Thoughts about death and dying, whether referred to the self or others. Include thoughts about being the passive subject of a fatal accident or murder and thoughts about how sorry others will be when the subject is gone. Include thoughts about not being able to go on any longer and life not being worth living in this rating. If the subject has thoughts specifically about taking his/her own life, code under Suicidal Thoughts.

2 = Present but *not* including thoughts about wanting to die. The thoughts should be intrusive into at least 2 activities and at least sometimes uncontrollable.

3 = Including thoughts about wanting to die. The thoughts should be intrusive into at least two activities and at least sometimes uncontrollable. Do not include thoughts about taking one's own life, these are coded under Suicidal Thoughts.
SUICIDAL THOUGHTS

Refers to thinking specifically about killing oneself, by whatever means. This may accompany thinking about death in general, or may be present if a subject reports a suicidal plan or past attempt.

Do not include suicidal plans.

2 = At least sometimes uncontrollable suicidal thoughts, recurring in at least two activities.

3 = Usually uncontrollable suicidal thoughts intruding into most activities.

SUICIDAL PLANS

Refer to suicidal thoughts in which the subject considers plans for a suicidal act. If a suicidal attempt has been made, determine whether a plan was present prior to the attempt.

2 = A specific plan, considered on more than 1 occasion, over which no action was taken.

3 = A specific plan, considered on more than 1 occasion, with preparatory action taken, for example storing up tablets.

Note that each of these definitions is mutually exclusive by definition. Obviously, a suicidal plan is a form of suicidal thought in ordinary speech. However, by the specificity coding rule, consideration of a plan for killing oneself is coded only as a Suicidal Plan, and not as Suicidal Thoughts.

LIFETIME SUICIDAL BEHAVIOR

Attempted self-harm, with the intention of ending life, occurring at any time in the subject's life. Rate here, no matter how unlikely to cause death the attempt was, so long as the subject's intention was to die.

0 = Absent

2 = Present

SUICIDAL ATTEMPTS

Episodes of deliberate self-harmful behavior, or potentially self-harmful behavior, involving some intention to die at the time of the attempt.

Differentiate from Non-suicidal Physical Self-damaging Acts.
If a parent is unsure whether his/her child actually had some intention to die, still code this Dep_varlist positive if the parent can describe a clear self-harmful act. However, a child must report at least some intention to die for this Dep_varlist to be coded in the child CAPA.

0 = No
2 = Yes

METHOD OF SUICIDE ATTEMPT

Note which of the following methods was employed for a suicidal attempt as defined above. More than one method may have been used, in which case code both or all.

- Overdose of prescribed or over-the-counter medication
- Illicit drug overdose
- Hanging
- Stabbing/Cutting
- Shooting
- Running into traffic
- Other
SUICIDAL INTENT

Code the highest level of suicidal intent manifested in an attempt. Do not include potentially self-injurious behavior without suicidal intent here; that is coded under "Suicidal" Behavior without Intent.

Ever and 3 month ratings coded separately.

1 = Subject reports minimal intention to actually kill him/herself, but either revealed the attempt to others, or otherwise ensured that there was little risk to take his/her life.

2 = Substantial intent to kill self, but associated with ambivalence to a sufficient degree that the intention was not absolute.

3 = Absolute (or almost absolute) intention to commit suicide, expressed with little or no ambivalence or uncertainty. If uncertain whether to code 2 or 3, code 2.

LETHALITY OF SUICIDAL ATTEMPT

Code here the degree of threat to life, resulting from the most serious suicidal attempt.

1 = Mild; No medical attention needed or sought.

2 = Moderate; Some medical attention sought or required (e.g., sewing up cuts, stomach lavage)

3 = Serious; The attempt resulted in unconsciousness, the need for resuscitation, assisted respiration, blood transfusion, or operative intervention.
N, WEIGHTED PREVALENCE, AND MISSING DATA

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Missing data notes:
- PAPA: no notes.
- CAPA: no notes.
- YAPA: no notes.

OTHER VARIABLES

J4ODEP9: Onset age: Think about, plan or attempt suicide;

SAS CODE

***************SAS Code for PAPA***********************;

*** suicidality ***;
*** note PDG1I01,I02 was split into two ***;
*** separate variables in ePAPA PDG1I01,PDG2I01 ***;
*** no onsets in 1.3, but both onsets in ePAPA (PDG1o01,PDG2o01) ***;

if version='1.3' then do;
  if pdc9i01 ge 2 or pdd0i01 ge 2 or pdd1i01 ge 2
  or pdd2e01 ge 2 or pdd5i01 ge 1 or pdg1i01 ge 2
  or pdg1i02 ge 2 then do;
    p4ndep9=1;
  if pdc9i01 ge 2 then p4odep9=min(p4odep9,(agedays-pdc9o01));
  if pdd0i01 ge 2 then p4odep9=min(p4odep9,(agedays-pdd0o01));
  if pdd1i01 ge 2 then p4odep9=min(p4odep9,(agedays-pdd1o01));
  if pdd2i01 ge 2 then p4odep9=min(p4odep9,(agedays-pdd2o01));
end;

else if pdc9i01 ne . or pdd0i01 ne . or pdd1i01 ne . or pdd2i01 ne . or pdd5i01 ne . or pdg1i01 ne . or pdg1i02 ne . then p4ndep9=0;
end;

if version in ('1.4', '2.0.3') then do;
  if pdc9i01 ge 2 or pdd0i01 ge 2 or pdd1i01 ge 2 or pdd2e01 ge 2 or pdd5i01 ge 2 or pdg1i01 ge 2 or pdg2i01 ge 2 then do;
    p4ndep9=1;
    if pdc9i01 ge 2 then p4odep9=min(p4odep9,(agedays-pdc9o01));
    if pdd0i01 ge 2 then p4odep9=min(p4odep9,(agedays-pdd0o01));
    if pdd1i01 ge 2 then p4odep9=min(p4odep9,(agedays-pdd1o01));
    if pdd2e01 ge 2 then p4odep9=min(p4odep9,(agedays-pdd2o01));
    if pdd5i01 ge 2 then p4odep9=min(p4odep9,(agedays-pdd5o01));
    if pdg1i01 ge 2 then p4odep9=min(p4odep9,(agedays-pdg1o01));
    if pdg2i01 ge 2 then p4odep9=min(p4odep9,(agedays-pdg2o01));
  end;
  else if pdc9i01 ne . or pdd0i01 ne . or pdd1i01 ne . or pdd2e01 ne . or pdd5i01 ne . or pdg1i01 ne . or pdg1i02 ne . then p4ndep9=0;
end;

label p4ndep9='suicidality';
label p4odep9='Onset age: suicidality';

j4ndep9 = p4ndep9;
j4odep9 = p4odep9;

label j4ndep9='suicidality';
label j4odep9='Onset age: suicidality';

*************** SAS Code for CAPA***********************;

If yapa ne 1 then do;

  psuif=sum(of pDC9F01 pDD0F01);

  if psuif ge 2 or pDD1I01 ge 2 or pDD2I01 ge 2 then do;
    if pdc9f01 ge 1 then do;
      p4ndep9=1;
      p4odep9=(agedays-pdc9o01);
    end;
    if pdd0f01 ge 1 then do;
      p4ndep9=1;
      p4odep9=min(p4odep9,(agedays-pdd0o01));
    end;
    if pDD1i01 ge 2 then do;
      p4ndep9=1;
      p4odep9=min(p4odep9,(agedays-pdd1o01));
    end;
    if pDD2I01 ge 2 then do;
      p4ndep9=1;
      p4odep9=min(p4odep9,(agedays-pdd2o01));
    end;
  end;
  else if psuif ne . or pDD1I01 ne .' or pDD2I01 ne .' then p4ndep9=0;

  csuif=sum(of cDC9F01 cDD0F01);
if csuif ge 2 or cDD1I01 ge 2 or cDD2I01 ge 2 then do;
if cdc9f01 ge 1 then do;
  c4ndep9=1;
  c4odep9=(agedays-cdc9o01);
end;
if cdd0f01 ge 1 then do;
  c4ndep9=1;
  c4odep9=min(c4odep9,(agedays-cdd0o01));
end;
if cDD1I01 ge 2 then do;
  c4ndep9=1;
  c4odep9=min(c4odep9,(agedays-cdd1o01));
end;
if cDD2I01 ge 2 then do;
  c4ndep9=1;
  c4odep9=min(c4odep9,(agedays-cdd2o01));
end;
else if csuif ne . or cDD1I01 ne ' ' or cDD2I01 ne ' ' then c4ndep9=0;

if c4ndep9 = 1 or p4ndep9 = 1 then j4ndep9=1;
else if c4ndep9 ne . or p4ndep9 ne . then j4ndep9=0;

j4odep9=min(c4odep9,p4odep9);
label j4ndep9= 'Significant weight loss or gain, or appetite disturbance' ;
label j4odep9='Onset age: Significant weight loss or gain, or appetite disturbance' ;

end;

***************SAS Code for YAPA***********************;
If yapa = 1 then do;
  csuif=sum(of cDC9F01 cDD0F01);
if csuif ge 2 or cDD1I01 ge 2 or cDD2I01 ge 2 then do;
  if cdc9f01 ge 1 then do;
    c4ndep9=1;
    c4odep9=(agedays-cdc9o01);
  end;
  if cdd0f01 ge 1 then do;
    c4ndep9=1;
    c4odep9=min(c4odep9,(agedays-cdd0o01));
  end;
  if cDD1I01 ge 2 then do;
    c4ndep9=1;
    c4odep9=min(c4odep9,(agedays-cdd1o01));
  end;
  if cDD2I01 ge 2 then do;
    c4ndep9=1;
    c4odep9=min(c4odep9,(agedays-cdd2o01));
  end;
else if csuif ne . or cDD1I01 ne ' ' or cDD2I01 ne ' ' then c4ndep9=0;

label c4ndep9= 'Significant weight loss or gain, or appetite disturbance' ;
label c4odep9='Onset age: Significant weight loss or gain, or appetite disturbance' ;
j4ndep9 = c4ndep9;
j4odep9 = c4odep9;

label j4ndep9 = 'Significant weight loss or gain, or appetite disturbance';
label j4odep9 = 'Onset age: Significant weight loss or gain, or appetite disturbance';

end;
**J4NDYS7: Hopelessness dysthymia**

**Depressive Disorders Variable List**

**Description**

**Raw Variable(s)**

**CAPA Interview Section**

**Glossary Notes**

**Additional Variables**

**N, Weighted Prevalence, and Missing Data**

**Citations**

**SAS CODE**

**Dysthymia (symptom list)**

---

**DESCRIPTION**

---

**Definition:** Hopelessness dysthymia

**Informant:**
- PAPA - Parent only.
- CAPA - Parent and child either/or rule.
- YAPA - Self-report.

---

**Note:**

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**RAW VARIABLE(S)**

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HELPLESSNESS

The subject feels that there is little or nothing s/he can do to improve his/her situation or psychological state, though such a change would be welcome. This is a generalized feeling.

"Is there anything about the way things are, or the way you are, that you would like to change?"

IF YES, ASK:

"Is there anything you could do to make things better?"

"Or make yourself feel better?"

What?
Would it work, do you think?

When did you start to feel that you couldn’t do anything to improve your situation?

HOPELESSNESS

The subject has a bleak, negative, pessimistic view of the future, and little hope that his/her situation will improve. This is a generalized feeling.

"What do you think the future will be like?"

"Will things get better for you? Or worse?"

Do you think anyone can help you?
Will things be better when you're grown up?

Do you feel hopeless about the future?

In what way?

How often do you feel like that?

Can you do anything about it?

When did you start to feel that the future didn’t hold good things for you?
HOPELESSNESS

The child has a bleak, negative, pessimistic view of the future, and little hope that his/her situation will improve. This is a generalized feeling.

0 = Absent

2 = The child feels hopeless and cannot always modify his/her feelings, but can report some positive expectations of the future.

3 = The child expresses almost no hope for the future at all.

HOPELESSNESS

The subject has a bleak, negative, pessimistic view of the future, and little hope that his/her situation will improve. This is a generalized feeling.

2 = The subject feels hopeless and cannot always modify his/her feelings, but can report some positive expectations of the future.

3 = The subject expresses almost no hope for the future at all.
### N, WEIGHTED PREVALENCE, AND MISSING DATA

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**Missing data notes:**
- PAPA: no notes
- CAPA: no notes
- YAPA: no notes

### OTHER VARIABLES

**J4ODYS7:** 'Onset age: Hopelessness dysthymia';

**SAS CODE**

```sas
***************SAS Code for PAPA***********************;
if pDC7I01 ge 2 then do;
p4ndys7=1;
p4odys7=(agedays-pdc7o01);
end;
else if pDC7I01 ne . then p4ndys7=0;
label p4ndys7='hopelessness dysthymia';
label p4odys7='Onset:hopelessness dysthymia';
j4ndys7 = p4ndys7;
j4odys7 = p4odys7;
label j4ndys7='hopelessness / dysthymia';
label j4odys7='Onset age: hopelessness / dysthymia';

***************SAS Code for CAPA***********************;
```
If yapa ne 1 then do;

if pdc7i01 ge 2 then do;
p4ndys7=1;
p4odys7=(agedays-pdc7001);
end;
else if pdc7i01 ne . then p4ndys5=0;
label p4ndys7='decreased concentration';
label p4odys7='Onset age: decreased concentration';

if cdc7i01 ge 2 then do;
c4ndys7=1;
c4odys7=(agedays-cdc7001);
end;
else if cdc7i01 ne . then c4ndys7=0;
label c4ndys7='decreased concentration';
label c4odys7='Onset age: decreased concentration';

if p4ndys7 = 1 or c4ndys7 = 1 then j4ndys7= 1;
else if p4ndys7 ne . or c4ndys7 ne . then j4ndys7 = 0;

jodys7=min(podys7,codys7);
label j4ndys7='decreased concentration';
label j4odys7='Onset age: decreased concentration';
end;

**************SAS Code for YAPA**************

If yapa = 1 then do;

if cDC7I01 ge 2 then do;
c4ndys7=1;
c4odys7=(agedays-cdc7001);
end;
else if cDC7I01 ne . then c4ndys7=0;
label c4ndys7='hopelessness dysthymia';
label c4odys7='Onset:hopelessness dysthymia';

j4ndys7 = c4ndys7;
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label j4ndys7='decreased concentration';
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**DESCRIPTION**

**Definition:** A. Five (or more) of the following symptoms have been present during the same 2-week period and represent a change from previous functioning: at least one of the symptoms is either (1) depressed mood or (2) loss of interest of pleasure.

Note: Do not include symptoms that are clearly due to a general medical condition, or mood-incongruent delusions or hallucinations.

1. (1) depressed mood most of the day, nearly every day, as indicated by either subjective report (eg., feels sad or empty) or observation made by others (eg., appears tearful). Note: In children and adolescents, can be irritable mood.

2. (2) markedly diminished interest or pleasure in all, or almost all, activities most of the day, nearly every day (as indicated by either subjective account or observation made by others).

3. (3) significant weight loss when not dieting or weight gain (eg., a change of more that 5% of body weight in a month), or decrease or increase in appetite nearly every day. Note: In children, consider failure to make expected weight gains.

4. (4) insomnia or hypersonmia nearly every day.

5. (5) psychomotor agitation or retardation nearly every day (observable by others, not merely subjective feelings of restlessness or being slowed down).

6. (6) fatigue or loss of energy nearly every day.
(7) feelings of worthlessness or excessive or inappropriate guilt (which may be delusional) nearly every day (not merely self-reproach or guilt about being sick).

(8) diminished ability to think or concentrate, or indecisiveness, nearly every day (either by subjective account or as observed by others).

(9) recurrent thoughts of death (not just fear of dying), recurrent suicidal ideation without a specific plan, or a suicide attempt or a specific plan for committing suicide.

B. The symptoms do not meet criteria for a Mixed Episode (see p. 335).

C. The symptoms cause clinically significant distress or impairment in social, occupational, or other important areas of functioning.

D. The symptoms are not due to the direct physiological effects of a substance (eg., a drug of abuse, a medication) or a general medical condition (eg., hypothyroidism).

The symptoms are not better accounted for by Bereavement, ie., after the loss of a loved one, the symptoms persist for longer than 2 months or are characterized by marked functional impairment, morbid preoccupation with worthlessness, suicidal ideation, psychotic symptoms, or psychomotor retardation. ***;

Changes: DSM-IV adds a Criterion C to ensure the clinical significance of the symptomatic presentation. In addition DSM-IV includes a Criterion E that clarifies the boundary with Bereavement--That is, a Major Depressive Episode may be diagnosed if the symptoms persist for longer than 2 months after the loss of a loved one.

Informant:  PAPA- Parent only.
CAPA- Parent and child either/or rule.
YAPA- Self-report.

Note:
SYMPTOM VARIABLE(S)

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<th>PAPA</th>
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<td>j4ndep1 (Period of depressed/irritable mood)</td>
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<td>Y</td>
<td>Y</td>
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<td>j4ndep2 (Anhedonia or loss of interest)</td>
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<td>Y</td>
<td>Y</td>
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<td>j4ndep3 (Weight loss / gain or appetite disturbance)</td>
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<td>Y</td>
<td>Y</td>
</tr>
<tr>
<td>j4ndep4 (Insomnia or hypersomnia nearly every day)</td>
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<td>Y</td>
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<td>j4ndep5 (Psychomotor agitation / retardation)</td>
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<td>Y</td>
<td>Y</td>
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<td>j4ndep6 (Fatigue or loss of energy)</td>
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<td>j4ndep7 (Worthlessness or guilt)</td>
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<tr>
<td>j4ndep8 (Problems with thinking / deciding)</td>
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<td>Y</td>
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<tr>
<td>j4ndep9 (Think about, plan or attempt suicide)</td>
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GLOSSARY NOTES

(Notes from PAPA Glossary)

DEPRESSION

Purposes of the Section

This section has 5 major functions:

(1) To provide information relevant to the diagnosis of a variety of depressive disorders.

(2) To provide an opportunity for the evaluation of the child's mood state in general.

(3) As a follow up to the worries and anxiety section.

(4) To provide an entry point for the suicide and self-injurious behavior section.

(5) To provide an entry point for the assessment of the child's functional incapacities resulting from his/her psychiatric symptoms.

Organization of the Section

The section is divided into 3 sub-areas:

(1) Depressed affect
(2) Conative problems
(3) Depressive cognitions

(Notes from CAPA Glossary)

Purposes of the Section

This section has 5 major functions:

(1) To provide information relevant to the diagnosis of a variety of depressive disorders.
(2) To provide an opportunity for the evaluation of the subjects' mood state in general.
(3) To provide a means of entry to the worries and anxiety section.
(4) To provide an entry point for the suicide and self-injurious behavior section.
(5) To provide an entry point for the assessment of the subject's functional Incapacities resulting from his/her psychiatric symptoms.

Organization of the Section

The section is divided into 4 sub-areas:

(1) Depressed affect
(2) Conative problems
(3) Subjective complaints about thinking
(4) Depressive cognitions
### N, WEIGHTED PREVALENCE, AND MISSING DATA

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Missing data notes:
- PAPA: no notes.
- CAPA: no notes.
- YAPA: no notes.

### OTHER VARIABLES

- **J4NDEP** = ‘Number of DSM-IV Depression symptoms’
- **J4ODEP** = ‘Onset age: DSM-IV Depression symptoms’
- **J4DDEP** = ‘Onset age: DSM-IV Depression diagnosis’

### SAS CODE

```
***************SAS Code for PAPA***************;
j4sdep=sum(of j4ndep1-j4ndep9);
j4odep=min(of j4odep1-j4odep9);
lable j4sdep='number of depression symptoms';
lable j4odep='Onset number of depression symptoms';

*** Major depression ***;
```
if j4sdep ge 5 and (j4ndep1=1 or j4ndep2=1) then j4_dep=1;
else if j4sdep ne . or j4ndep1 ne . or j4ndep2 ne . then j4_dep=0;

if j4_dep = 1 and p_inc = 1 then j4i_dep = 1;
else if j4_dep ne . or p_inc ne . then j4i_dep = 0;

label j4_dep='major depression DX';
label j4i_dep='major depression DX with impairment';

*** find the fifth largest date of onset to match the requirement for first 5 symptoms ***;
array j41dep j4odep1-j4odep9;
array j4xdep j4xdep1-j4xdep9;
if j4sdep ge 5 then do;
   do over j41dep;
      j4xdep=j41dep;
   end;
   do i=1 to 5;
      j4ddep=min(of j4xdep1-j4xdep9);
      if i<5 then do over j4xdep;
         if j4ddep=j4xdep and j4ddep^=. then do;
            j4ddep=.;
            j4xdep=.;
         end;
      end;
   end;
   drop j4xdep1-j4xdep9;

label j4ddep='Onset age: major depression diagnosis';

**************SAS Code for CAPA**********************;
If yapa ne 1 then do;
   j4sdep=sum(of j4ndep1-j4ndep9);
   j4odep=min(of j4odep1-j4odep9);
if j4sdep ge 5 and (j4ndep1=1 or j4ndep2=1) then j4_dep=1;
else if j4ndep ne . then j4_dep=0;

*** find the fifth largest date of onset to match the requirement for first 5 symptoms ***;
array j41dep j4odep1-j4odep9;
array j4xdep j4xdep1-j4xdep9;
if j4sdep ge 5 then do;
   do over j41dep;
      j4xdep=j41dep;
   end;
   do i=1 to 5;

j4ddep=min(of j4xdep1-j4xdep9);
if i<5 then do over j4xdep;
   if j4ddep=j4xdep and j4ddep^=. then do;
      j4ddep=.;
      j4xdep=.;
      end;
   end;
end;
end;
end;
end;

drop j4xdep1-j4xdep9;

**************SAS Code for YAPA**********************;

If yapa = 1 then do;
   j4sdep=sum(of j4ndep1-j4ndep9);
   j4odep=min(of j4odep1-j4odep9);
   if j4sdep ge 5 and (j4ndep1=1 or j4ndep2=1) then j4_dep=1;
   else if j4sdep ne . then j4_dep=0;

*** find the fifth largest date of onset to match the requirement for first 5 symptoms ***;
array j41dep j4odep1-j4odep9;
array j4xdep j4xdep1-j4xdep9;
if j4sdep ge 5 then do;
   do over j41dep;
      j4xdep=j41dep;
   end;
   do l=1 to 5;
      j4ddep=min(of j4xdep1-j4xdep9);
      if i<5 then do over j4xdep;
         if j4ddep=j4xdep and j4ddep^=. then do;
            j4ddep=.;
            j4xdep=.;
            end;
         end;
   end;
end;
end;
drop j4xdep1-j4xdep9;

end;
**J4_DYS: Dysthymia**

**Depressive Disorders Variable List**

**Description**

**Symptom Variable(s)**

**Glossary Notes**

**Additional Variables**

**N, Weighted Prevalence, and Missing Data**

**Citations**

**SAS CODE**

---

**DESCRIPTION**

---

**Definition:**

A. depressed mood for most of the day, for more days than not, as indicated either by subjective account or observation by others, for at least 2 years.

Note: In children and adolescents, mood can be irritable and duration must be at least 1 year. *****;

B. Presence, while depressed, of two (or more) of the following:

   (1) poor appetite or overeating
   (2) insomnia or hypersomnia
   (3) low energy or fatigue
   (4) low self-esteem
   (5) poor concentration or difficulty making decisions
   (6) feelings of hopelessness

C. During the 2-year period (1 year for children or adolescents) of the disturbance, the person has never been without the symptoms in Criteria A and B for more than 2 months at a time

D. No Major Depressive Episode (see p.327) has been present during the first 2 years of the disturbance (1 year for children and adolescents): ie., the disturbance is not better accounted for by chronic Major depressive Disorder, or Major depressive Disorder, In Partial Remission.

Note: there may have been a previous Major depressive Episode provided there was a full remission (no significant signs or symptoms for 2 months) before development of the Dysthymic
Disorder. In addition, after the initial 2 years (1 year in children or adolescents) of Dysthymic Disorder, there may be superimposed episodes of Major Depressive Disorder, in which case both diagnoses may be given when the criteria are met for a Major Depressive Episode.

E. There has never been a Manic Episode (see p. 332), a Mixed Episode (see p. 335), or a Hypomanic Episode (see p. 338), and criteria have never been met for Cyclothymic Disorder.

F. The disturbance does not occur exclusively during the course of a chronic Psychotic Disorder, such as Schizophrenia or Delusional Disorder.

G. The symptoms are not due to the direct physiological effects of a substance (eg., a drug of abuse, a medication) or a general medical condition (eg., hypothyroidism).

H. The symptoms cause clinically significant distress or impairment in social, occupational, or other important areas of functioning.

Specify if:
Early Onset: if onset is before age 21 years
Late Onset: if onset is age 21 years or older
Specify (for most recent 2 years of Dysthymic Disorder):
With Atypical Features (see p. 384)

Changes:
The DSM-III-R subtyping of primary versus secondary was dropped because of difficulty in applying it and lack of supportive evidence. DSM-IV adds a criterion to ensure the clinical significance of the symptomatic presentation.

Informant: PAPA- Parent only.
CAPA- Parent and child either/or rule.
YAPA- Self-report.

Note:
### SYMPTOM VARIABLE(S)

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<tr>
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### GLOSSARY NOTES

(Notes from PAPA Glossary)

**DEPRESSION**

#### Purposes of the Section

This section has 5 major functions:

1. **To provide information relevant to the diagnosis of a variety of depressive disorders.**
2. **To provide an opportunity for the evaluation of the child's mood state in general.**
3. **As a follow up to the worries and anxiety section.**
4. **To provide an entry point for the suicide and self-injurious behavior section.**
5. **To provide an entry point for the assessment of the child's functional incapacities resulting from his/her psychiatric symptoms.**

#### Organization of the Section

The section is divided into 3 sub-areas:

1. **depressed affect**
(2) Conative problems

(3) depressive cognitions

(Notes from CAPA Glossary)

Purposes of the Section

This section has 5 major functions:

(1) To provide information relevant to the diagnosis of a variety of depressive disorders.

(2) To provide an opportunity for the evaluation of the subjects' mood state in general.

(3) To provide a means of entry to the worries and anxiety section.

(4) To provide an entry point for the suicide and self-injurious behavior section.

(5) To provide an entry point for the assessment of the subject's functional Incapacities resulting from his/her psychiatric symptoms.

Organization of the Section

The section is divided into 4 sub-areas:

(1) depressed affect

(2) Conative problems

(3) Subjective complaints about thinking

(4) depressive cognitions
N, WEIGHTED PREVALENCE, AND MISSING DATA

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</tr>
</tbody>
</table>

Missing data notes:
- PAPA: no notes.
- CAPA: no notes.
- YAPA: no notes.

OTHER VARIABLES

J4NDSY = ‘Number of DSM-IV Dysthymia symptoms’
J4ODSY = ‘Onset age: DSM-IV Dysthymia symptoms’
J4DDSYY = ‘Onset age: DSM-IV Dysthymia diagnosis’

SAS CODE

***************SAS Code for PAPA**********************;

j4sdys=sum(of j4ndys1-j4ndys7);
j4odys=min(of j4odys1-j4odys7);

label j4sdys='sum of 7 dysthymia SXs';
label j4odys='Onset: first dysthymia SX';
*** find the second largest date of onset to match the requirement for first 2 symptoms ***;

```sas
array j4dys j4odys1-j4odys7;
array j4xdys j4xdys1-j4xdys7;
if j4sdys ge 2 then do;
    do over j41dys;
        j4xdys=j41dys;
    end;
    do i=1 to 2;
        j4ddys=min(of j4xdys1-j4xdys7);
        if i<2 then do over j4xdys;
            if j4ddys=j4xdys and j4ddys^=. then do;
                j4ddys=.;
                j4xdys=.;
            end;
        end;
    end;
end;
end;
drop j4xdys1-j4xdys7;

label j4ddys='Onset age:dys diagnosis';
```

*** Dysthymic disorder ***;
```sas
if j4ndys1=1 and (sum(of j4ndys2-j4ndys7) ge 2) and pda0i03 ne 0 then j4_dys=1;
else if j4sdys ne . then j4_dys=0;
label j4_dys='Dysthymia diagnosis';
```

```sas
if j4_dys=1 and (agedays-j4odys) ge 365 then do;
    j4l_dys=1;
    j4lodys=j4odys;
    j4lldys=j4ddys;
end;
else if j4_dys ne . then j4l_dys=0;
```
```sas
label j4_dys='dysthymia diagnosis';
label j4l_dys='DSM4 dysthymia Dx with onset requirement';
label j4lodys='Onset: dysthymia symptoms';
label j4lldys='Onset: dysthymia diagnosis';
```

**************SAS Code for CAPA**********************;
```sas
If yapa ne 1 then do;
```
```sas
j4sdys=sum(of j4ndys1-j4ndys7);
j4odys=min(of j4odys1-j4odys7);
label j4sdys='sum of 7 dysthymia SXs';
label j4odys='Onset: first dysthymia SX';
```
*** find the second largest date of onset to match the requirement for first 2 symptoms ***;

array j41dys j4odys1-j4odys7;
array j4xdys j4xdys1-j4xdys7;

if j4sdys ge 2 then do;
  do over j41dys;
    j4xdys=j41dys;
  end;
  do i=1 to 2;
    j4ddys=min(of j4xdys1-j4xdys7);
    if i<2 then do over j4xdys;
      if j4ddys=j4xdys and j4ddys^=. then do;
        j4ddys=.;
        j4xdys=.;
      end;
    end;
  end;
end;
end;
drop j4xdys1-j4xdys7;

label j4ddys='Onset age:dys diagnosis';

*** Dysthymic disorder ***;
if j4ndys1=1 and (sum (of j4ndys2-j4ndys7) ge 2) and (cDA0I03='2' or pDA0I03='2')then j4_dys=1;
else if j4sdys ne . then j4_dys=0;
label j4_dys='Dysthymia diagnosis';

if j4_dys=1 and (agedays-j4odys) ge 365 then do;
  j4l_dys=1;
  j4lodys=j4odys;
  j4lddys=j4ddys;
end;
else if j4_dys ne . then j4l_dys=0;
label j4_dys='Dysthymia diagnosis';
label j4l_dys='DSM4 dysthymia Dx with onset requirement';
label j4lodys='Onset: dysthymia symptoms';
label j4lddys='Onset: dysthymia diagnosis';

if j4ndys1=1 and j4ndys ge 2 and (cDA0I03='2' or pDA0I03='2') and (agedays-j4odys) ge 365 then do;
  j4l_dys=1;
  j4lodys=j4odys;
  j4lddys=j4ddys;
end;
else if j4ndys ne . then j4l_dys=0;

if j4ndys1=1 and j4ndys ge 2 then j4_dys=1;
else if j4ndys ne . then j4_dys=0;
if j41_dys=1 or j4_dys=1 then do;
    j41_dod=1;
    j41odod=min(j4odys,j41odys);
    j41ddod=min(j4ddys,j41ddys);
end;
else if j41_dys ne . or j4_dys ne . then j41_dod=0;
if j41_dys=1 and j4_dys=1 then do;
    j41_dd=1;
    j41odd=min(j4odys,j41odys);
    j41ddd=max(j4ddys,j41ddys);
end;
else if j41_dys ne . and j4_dys ne . then j41_dd=0;

label j4_dys='dysthymia diagnosis';
label j41_dys='DSM4 dysthymia Dx with onset requirement';
label j41odys='Onset: dysthymia symptoms';
label j41ddys='Onset: dysthymia diagnosis';

end;

***************SAS Code for YAPA**********************;

If yapa = 1 then do;

label j4sdys='sum of 7 dysthymia SXs';
label j4odys='Onset: first dysthymia SX';

*** find the second largest date of onset to match the requirement for first 2 symptoms ***;
array j41dys j4odys1-j4odys7;
array j4xdys j4xdys1-j4xdys7;

if j4sdys ge 2 then do;
    do over j41dys;
        j4xdys=j41dys;
    end;
    do i=1 to 2;
        j4ddys=min(of j4xdys1-j4xdys7);
        if i<2 then do over j4xdys;
            if j4ddys=j4xdys and j4ddys^=. then do;
                j4ddys=.;
                j4xdys=.;
            end;
        end;
    end;
end;

drop j4xdys1-j4xdys7;

label j4ddys='Onset age:dys diagnosis';

*** Dysthymic disorder ***;
if j4ndys1=1 and (sum (of j4ndys2-j4ndys7) ge 2) and cda0i03 ne 0 then j4_dys=1;
else if j4sdys ne . then j4 Dys=0;
label j4 Dys='Dysthymia diagnosis';

if j4 Dys=1 and (agedays-j4odys) ge 365 then do;
    j4l Dys=1;
    j4lodys=j4odys;
    j4lddys=j4ddys;
end;
else if j4 Dys ne . then j4l Dys=0;

label j4 Dys='dysthymia diagnosis';
label j4l Dys='DSM4 dysthymia Dx with onset requirement';
label j4lodys='Onset: dysthymia symptoms';
label j4lddys='Onset: dysthymia diagnosis';
end;
DESCRIPTION

Definition: The Depressive Disorder Not Otherwise Specified category includes disorders with depressive features that do not meet the criteria for Major Depressive Disorder, Dysthymic Disorder, Adjustment Disorder With Depressed Mood (see p. 623), or Adjustment Disorder With Mixed Anxiety and Depressed Mood (see p.624). Sometimes depressive symptoms can present as part of an Anxiety Disorder Not Otherwise Specified (see p. 444). Examples of Depressive Disorder Not Otherwise Specified include:

1. Premenstrual dysphoric disorder: in most menstrual cycles during the past year, symptoms (eg., markedly depressed mood, marked anxiety, marked affective lability, decreased interest in activities) regularly occurred during the last week of the luteal phase (and remitted within a few days of the onset of menses). These symptoms must be severe enough to markedly interfere with work, school, or usual activities and be entirely absent for at least 1 week postmenses(see p.715 for suggested research criteria).

2. Minor depressive disorder: episodes of at least 2 weeks of depressive symptoms but with fewer than the five items required for Major Depressive Disorder (see p.719 for suggested research criteria).

3. Recurrent brief depressive disorder: depressive episodes lasting from 2 days up to 2 weeks, occurring at least once a month for 12 months (not associated with the menstrual cycle)(see p.721 for suggested research criteria).

4. Post psychotic depressive disorder of Schizophrenia: a Major Depressive Episode that occurs during the residual phase of
Schizophrenia (see p.711 for suggested research criteria).

5. A major Depressive Episode superimposed on Delusional Disorder, Psychotic Disorder Not Otherwise Specified, or the active phase of Schizophrenia.

6. Situations in which the clinician has concluded that a depressive disorder is present but is unable to determine whether it is primary, due to a general medical condition, or substance induced.

Changes:

Informant:
- PAPA- Parent only.
- CAPA- Parent and child either/or rule.
- YAPA- Self-report.

Note:

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(Notes from PAPA Glossary)

DEPRESSION

Purposes of the Section

This section has 5 major functions:

(1) To provide information relevant to the diagnosis of a variety of depressive disorders.

(2) To provide an opportunity for the evaluation of the child's mood state in general.

(3) As a follow up to the worries and anxiety section.

(4) To provide an entry point for the suicide and self-injurious behavior section.

(5) To provide an entry point for the assessment of the child's functional incapacities resulting from his/her psychiatric symptoms.

Organization of the Section

The section is divided into 3 sub-areas:

(1) Depressed affect

(2) Conative problems

(3) Depressive cognitions

(Notes from CAPA Glossary)
Purposes of the Section

This section has 5 major functions:

(1) To provide information relevant to the diagnosis of a variety of depressive disorders.

(2) To provide an opportunity for the evaluation of the subjects' mood state in general.

(3) To provide a means of entry to the worries and anxiety section.

(4) To provide an entry point for the suicide and self-injurious behavior section.

(5) To provide an entry point for the assessment of the subject's functional Incapacities resulting from his/her psychiatric symptoms.

Organization of the Section

The section is divided into 4 sub-areas:

(1) Depressed affect

(2) Conative problems

(3) Subjective complaints about thinking

(4) Depressive cognitions
### N, WEIGHTED PREVALENCE, AND MISSING DATA

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Missing data notes:
- PAPA: no notes.
- CAPA: no notes.
- YAPA: no notes.

### OTHER VARIABLES

- \textbf{J4NDNOS} = ‘Number of DSM-IV Depression NOS symptoms’
- \textbf{J4ODNOS} = ‘Onset age: DSM-IV Depression NOS symptoms’
- \textbf{J4DDNOS} = ‘Onset age: DSM-IV Depression NOS diagnosis’

### SAS CODE

```
******************SAS Code for PAPA********************
if (j4_dys=1 and j4odys ge 30 and j4l Dys ne 1) or 
   (j4ndep ge 3 and (j4ndep1=1 or j4ndep2=1) and j4_dnos ne 1) 
then do;
if (j4_dys=1 and j4odys ge 30 and j4l Dys ne 1) then do;
   j4_dnos=1;
   j4odnos=j4odys;
   j4ddnos=j4ddys;
```
end;
if (j4ndep ge 3 and (j4ndep1=1 or j4ndep2=1) and j4_dnos ne 1) then do;
  j4_dnos=1;
  j4odnos=min(j4odnos,j4odep);
  j4ddnos=min(j4ddnos,j4ddep);
end;
else if j4_dys ne . or j4_dnos ne . then j4_dnos=0;

label
  j4_dnos='depressive episode/NOS'
  j4odnos='Onset age:depressive symptom/NOS'
  j4ddnos='Onset age:depressive episode/NOS';

**************SAS Code for CAPA*****************************;
If yapa ne 1 then do;
  if (j4_dys=1 and j4odys ge 30 and j4l_dys ne 1) or
     (j4ndep ge 3 and (j4ndep1=1 or j4ndep2=1) and j4_dnos ne 1) then do;
    if (j4_dys=1 and j4odys ge 30 and j4l_dys ne 1) then do;
      j4_dnos=1;
      j4odnos=j4odys;
      j4ddnos=j4ddys;
    end;
    if (j4ndep ge 3 and (j4ndep1=1 or j4ndep2=1) and j4_dnos ne 1) then do;
      j4_dnos=1;
      j4odnos=min(j4odnos,j4odep);
      j4ddnos=min(j4ddnos,j4ddep);
    end;
  end;
else if j4_dys ne . or j4_dnos ne . then j4_dnos=0;

label
  j4_dnos='depressive episode/NOS'
  j4odnos='Onset age:depressive symptom/NOS'
  j4ddnos='Onset age:depressive episode/NOS';
end;

**************SAS Code for YAPA*****************************;
If yapa = 1 then do;
  if (j4_dys=1 and j4odys ge 30 and j4l_dys ne 1) or
     (j4ndep ge 3 and (j4ndep1=1 or j4ndep2=1) and j4_dnos ne 1) then do;
    if (j4_dys=1 and j4odys ge 30 and j4l_dys ne 1) then do;
      j4_dnos=1;
      j4odnos=j4odys;
      j4ddnos=j4ddys;
    end;
    if (j4ndep ge 3 and (j4ndep1=1 or j4ndep2=1) and j4_dnos ne 1) then do;
      j4_dnos=1;
      j4odnos=min(j4odnos,j4odep);
      j4ddnos=min(j4ddnos,j4ddep);
    end;
  end;
else if j4_dys ne . or j4_dnos ne . then j4_dnos=0;

label
  j4_dnos='depressive episode/NOS'
  j4odnos='Onset age:depressive symptom/NOS'
j4ddnos='Onset age:depressive episode/NOS';

end;
J4_ANYD: Any Depression

Depressive Disorders Variable List

Description
Symptom Variable(s)
Glossary Notes
Additional Variables
N, Weighted Prevalence, and Missing Data
Citations
SAS CODE

DESCRIPTION

Definition:

Changes:

Informant:  PAPA- Parent only.
CAPA- Parent and child either/or rule.
YAPA- Self-report.

Note:

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SYMPTOM VARIABLE(S)

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<td>j4ndep3 (Weight loss / gain or appetite disturbance)</td>
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(Psychomotor agitation / retardation) Y Y Y
(Fatigue or loss of energy) Y Y Y
(Worthlessness or guilt) Y Y Y
(Problems with thinking / deciding) Y Y Y
(Think about, plan or attempt suicide) Y Y Y

Y Y Y

(Y4ndep5) (Psychomotor agitation / retardation)
(Y4ndep6) (Fatigue or loss of energy)
(Y4ndep7) (Worthlessness or guilt)
(Y4ndep8) (Problems with thinking / deciding)
(Y4ndep9) (Think about, plan or attempt suicide)

Y Y Y

(Y4ndys1) (Dysthymia)
(Y4ndys2) (Poor appetite weight change dysthymia)
(Y4ndys3) (Insomnia)
(Y4ndys4) (Fatigue/ tiredness/ dysthymia)
(Y4ndys5) (Low self-esteem/ dysthymia)
(Y4ndys6) (Difficulty making decisions, poor concentration dysthymia)
(Y4ndys7) (Hopelessness dysthymia)

Y Y Y

GLOSSARY NOTES

(Notes from PAPA Glossary)

DEPRESSION

Purposes of the Section

This section has 5 major functions:

(1) To provide information relevant to the diagnosis of a variety of depressive disorders.

(2) To provide an opportunity for the evaluation of the child's mood state in general.

(3) As a follow up to the worries and anxiety section.

(4) To provide an entry point for the suicide and self-injurious behavior section.

(5) To provide an entry point for the assessment of the child's functional incapacities resulting from his/her psychiatric symptoms.

Organization of the Section

The section is divided into 3 sub-areas:

(1) Depressed affect
(2) Conative problems

(3) Depressive cognitions

(Notes from CAPA Glossary)

Purposes of the Section

This section has 5 major functions:

(1) To provide information relevant to the diagnosis of a variety of depressive disorders.

(2) To provide an opportunity for the evaluation of the subjects' mood state in general.

(3) To provide a means of entry to the worries and anxiety section.

(4) To provide an entry point for the suicide and self-injurious behavior section.

(5) To provide an entry point for the assessment of the subject's functional Incapacities resulting from his/her psychiatric symptoms.

Organization of the Section

The section is divided into 4 sub-areas:

(1) Depressed affect

(2) Conative problems

(3) Subjective complaints about thinking

(4) Depressive cognitions
N, WEIGHTED PREVALENCE, AND MISSING DATA

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Missing data notes:
- PAPA: no notes.
- CAPA: no notes.
- YAPA: no notes.

OTHER VARIABLES

J4ODANYD = ‘Onset age: Any Depression symptoms’

J4DANYD = ‘Onset age: Any Depression diagnosis’

SAS CODE

***************SAS Code for PAPA***************;
if j4_dep = 1 or j4l_dys = 1 or j4_anyd = 1 then do;
   if j4_dep=1 then do;
      j4_anyd=1;
      j4oanyd=j4odep;
      j4danyd=j4ddep;
   end;
   if j4l_dys=1 then do;
      j4_anyd=1;
   end;
j4oanyd=min(j4oanyd, j4lodys);
j4danyd=min(j4danyd, j4lddys);
end;
if j4_anyd=1 then do;
j4oanyd=1;
j4oanyd=min(j4oanyd, j4odnos);
j4danyd=min(j4danyd, j4ddnos);
end;
else if j4_depl ne . or j4l dys ne . or j4_anyd ne . Then j4_depl=0;

label
j4oanyd = 'Any depression: major depression, depression NOS and/or dysthymia '
j4danyd = 'Onset of first sx for any depressive episode '
j4anyd = 'Onset of dx of any depressive episode '

**************SAS Code for CAPA**********************;
If yapne 1 then do;
if j4_depl = 1 or j4l dys = 1 or j4_anyd = 1 then do;
  if j4_depl=1 then do;
    j4oanyd=1;
j4oanyd=j4odep;
j4danyd=j4ddep;
end;
  if j4l dys=1 then do;
    j4oanyd=1;
j4oanyd=min(j4oanyd, j4lodys);
j4danyd=min(j4danyd, j4lddys);
end;
  if j4_anyd=1 then do;
    j4oanyd=1;
j4oanyd=min(j4oanyd, j4odnos);
j4danyd=min(j4danyd, j4ddnos);
end;
end;
else if j4_depl ne . or j4l dys ne . or j4_anyd ne . Then j4_depl=0;

label
j4oanyd = 'Any depression: major depression, depression NOS and/or dysthymia '
j4danyd = 'Onset of first sx for any depressive episode '
j4anyd = 'Onset of dx of any depressive episode '

end;

********************SAS Code for YAPA**********************;
If yap = 1 then do;
if j4_depl = 1 or j4l dys = 1 or j4_anyd = 1 then do;
  if j4_depl=1 then do;
    j4oanyd=1;
j4oanyd=j4odep;
j4danyd=j4ddep;
end;
  if j4l dys=1 then do;
    j4oanyd=1;
j4oanyd=min(j4oanyd, j4lodys);
j4danyd=min(j4danyd, j4lddys);
end;
  if j4_anyd=1 then do;
    j4oanyd=1;
j4oanyd=min(j4oanyd, j4odnos);
j4danyd=min(j4danyd, j4ddnos);
end;
end;
else if j4_dep ne . or j41_dys ne . or j4_anyd ne . Then j4_anyd=0;

label
j4_anyd = 'Any depression: major depression, depression NOS and/or dysthymia '
j4oanyd = 'Onset of first sx for any depressive episode '
j4danyd = 'Onset of dx of any depressive episode '

end;
**J4_DD: Double Depression**

**Depressive Disorders Variable List**

**Description**

**Symptom Variable(s)**

**Glossary Notes**

**Additional Variables**

**N, Weighted Prevalence, and Missing Data**

**Citations**

**SAS CODE**

---

**DESCRIPTION**

Definition:

Changes:

Informant:  
- PAPA- Parent only.  
- CAPA- Parent and child either/or rule.  
- YAPA- Self-report.

Note:

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### j4ndep7 (Worthlessness or guilt)  
Y Y Y

### j4ndep8 (Problems with thinking / deciding)  
Y Y Y

### j4ndep9 (Think about, plan or attempt suicide)  
Y Y Y

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**GLOSSARY NOTES**

(Notes from PAPA Glossary)

### DEPRESSION

**Purposes of the Section**

This section has 5 major functions:

1. To provide information relevant to the diagnosis of a variety of depressive disorders.
2. To provide an opportunity for the evaluation of the child's mood state in general.
3. As a follow up to the worries and anxiety section.
4. To provide an entry point for the suicide and self-injurious behavior section.
5. To provide an entry point for the assessment of the child's functional incapacities resulting from his/her psychiatric symptoms.

**Organization of the Section**

The section is divided into 3 sub-areas:

1. Depressed affect
2. Conative problems
(3) Depressive cognitions

(Notes from CAPA Glossary)

Purposes of the Section

This section has 5 major functions:

(1) To provide information relevant to the diagnosis of a variety of depressive disorders.

(2) To provide an opportunity for the evaluation of the subjects' mood state in general.

(3) To provide a means of entry to the worries and anxiety section.

(4) To provide an entry point for the suicide and self-injurious behavior section.

(5) To provide an entry point for the assessment of the subject's functional Incapacities resulting from his/her psychiatric symptoms.

Organization of the Section

The section is divided into 4 sub-areas:

(1) Depressed affect

(2) Conative problems

(3) Subjective complaints about thinking

(4) Depressive cognitions
N, WEIGHTED PREVALENCE, AND MISSING DATA

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<td>99.41 %</td>
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</table>

Missing data notes:
- PAPA: no notes.
- CAPA: no notes.
- YAPA: no notes.

OTHER VARIABLES

SAS CODE

'**************SAS Code for PAPA**************';
if (j4_dep=1 or j4_dnos=1) and j4l_dys=1 then j4_dd=1;
else if j4_dep ne . or j4_dnos ne . or j4l_dys ne . then j4_dd=0;
label j4_dd='Double depression: (Major or minor depression) and dysthymia';

'**************SAS Code for CAPA**************';
if yapa ne 1 then do;
if (j4_dep=1 or j4_dnos=1) and j4l_dys=1 then j4_dd=1;
else if j4_dep ne . or j4_dnos ne . or j4l_dys ne . then j4_dd=0;
label j4_dd='Double depression: (Major or minor depression) and dysthymia';
end;

'**************SAS Code for YAPA**************';
if yapa = 1 then do;
if (j4_dep=1 or j4_dnos=1) and j4l_dys=1 then j4_dd=1;
else if j4_dep ne . or j4_dnos ne . or j4l_dys ne . then j4_dd=0;
label j4_dd='Double depression: (Major or minor depression) and dysthymia';end;
J4_DIRR: Depression with Irritable Mood

Depressive Disorders Variable List

Description

Symptom Variable(s)

Glossary Notes

Additional Variables

N, Weighted Prevalence, and Missing Data

Citations

SAS CODE

DESCRIPTION

Definition:

Changes:

Informant: PAPA- Parent only.
      CAPA- Parent and child either/or rule.
      YAPA- Self-report.

Note:

<table>
<thead>
<tr>
<th>PAPA</th>
<th>CAPA</th>
<th>YAPA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Y</td>
<td>Y</td>
<td>Y</td>
</tr>
</tbody>
</table>

SYMPTOM VARIABLE(S)

<table>
<thead>
<tr>
<th>j4ndep1 (Period of depressed/irritable mood)</th>
<th>PAPA</th>
<th>CAPA</th>
<th>YAPA</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Y</td>
<td>Y</td>
<td>Y</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>j4ndep2 (Anhedonia or loss of interest)</th>
<th>PAPA</th>
<th>CAPA</th>
<th>YAPA</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td>Y</td>
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</table>

<table>
<thead>
<tr>
<th>j4ndep3 (Weight loss / gain or appetite disturbance)</th>
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<th>CAPA</th>
<th>YAPA</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>j4ndep4 (Insomnia or hypersomnia nearly every day)</th>
<th>PAPA</th>
<th>CAPA</th>
<th>YAPA</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Y</td>
<td>Y</td>
<td>Y</td>
</tr>
<tr>
<td></td>
<td>j4ndep5 (Psychomotor agitation / retardation)</td>
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<td>Y</td>
</tr>
<tr>
<td>---</td>
<td>---------------------------------------------</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td></td>
<td>j4ndep6 (Fatigue or loss of energy)</td>
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<td>Y</td>
</tr>
<tr>
<td></td>
<td>j4ndep7 (Worthlessness or guilt)</td>
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<td>Y</td>
</tr>
<tr>
<td></td>
<td>j4ndep8 (Problems with thinking / deciding)</td>
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<td>Y</td>
</tr>
<tr>
<td></td>
<td>j4ndep9 (Think about, plan or attempt suicide)</td>
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<table>
<thead>
<tr>
<th></th>
<th>j4ndys1 (Dysthymia)</th>
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<tbody>
<tr>
<td></td>
<td>j4ndys2 (Poor appetite weight change dysthymia)</td>
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<td>Y</td>
<td>Y</td>
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<tr>
<td></td>
<td>j4ndys3 (Insomnia)</td>
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<td>Y</td>
<td>Y</td>
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<tr>
<td></td>
<td>j4ndys4 (Fatigue/ tiredness/ dysthymia)</td>
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<td>Y</td>
<td>Y</td>
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<tr>
<td></td>
<td>j4ndys5 (Low self-esteem/ dysthymia)</td>
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<td>Y</td>
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<td></td>
<td>j4ndys6 (Difficulty making decisions, poor concentration dysthymia)</td>
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<td></td>
<td>j4ndys7 (Hopelessness dysthymia)</td>
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GLOSSARY NOTES

(Notes from PAPA Glossary)

DEPRESSION

Purposes of the Section

This section has 5 major functions:

1. To provide information relevant to the diagnosis of a variety of depressive disorders.

2. To provide an opportunity for the evaluation of the child's mood state in general.

3. As a follow up to the worries and anxiety section.

4. To provide an entry point for the suicide and self-injurious behavior section.

5. To provide an entry point for the assessment of the child's functional incapacities resulting from his/her psychiatric symptoms.

Organization of the Section

The section is divided into 3 sub-areas:

1. Depressed affect
(2) Conative problems

(3) Depressive cognitions

(Notes from CAPA Glossary)

Purposes of the Section

This section has 5 major functions:

(1) To provide information relevant to the diagnosis of a variety of depressive disorders.
(2) To provide an opportunity for the evaluation of the subjects' mood state in general.
(3) To provide a means of entry to the worries and anxiety section.
(4) To provide an entry point for the suicide and self-injurious behavior section.
(5) To provide an entry point for the assessment of the subject's functional Incapacities resulting from his/her psychiatric symptoms.

Organization of the Section

The section is divided into 4 sub-areas:

(1) Depressed affect

(2) Conative problems

(3) Subjective complaints about thinking

(4) Depressive cognitions
## N, WEIGHTED PREVALENCE, AND MISSING DATA

<table>
<thead>
<tr>
<th></th>
<th>PAPA Weighted %</th>
<th>PAPA N</th>
<th>CAPA Weighted %</th>
<th>CAPA N</th>
<th>YAPA Weighted %</th>
<th>YAPA N</th>
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Missing data notes:
- PAPA: no notes.
- CAPA: no notes.
- YAPA: no notes.

## OTHER VARIABLES

### SAS CODE

```
**************SAS Code for PAPA**************;
psIrritable=pda8f01 + 0;
pDepMood =pda0f01 + 0;
if psIrritable ge 45 and psDepMood not ge 45 then do;
  p4ndirr1=1;
  if psIrritable ge 45 then p4odirr1=min(p4odirr1, pda8o01);
  if psDepMood not ge 45 then p4odirr1=min(p4odirr1, pda6o01);
end;
else if psIrritable ne . or psDepMood ne . then p4ndirr1=0;
label p4ndirr1='Irritable mood';
j4ndirr1 = p4ndirr1;
label j4ndirr1='Irritable mood';

**************SAS Code for CAPA**************;
```
If yapa ne 1 then do;

psIrritable = pda8f01 + 0;
psDepMood = pda8f01 + 0;

if psIrritable ge 45 and psDepMood not ge 45 then do;
p4ndirr1=1;
   if psIrritable ge 45 then p4odirr1=min(p4odirr1, pda8o01);
   if psDepMood not ge 45 then p4odirr1=min(p4odirr1, pda6o01);
end;
else if psIrritable ne. or psDepMood ne. then p4ndirr1=0;
lable p4ndirr1='Irritable mood';

csIrritable=pda8f01 + 0;
csDepMood = pda8f01 + 0;

if csIrritable ge 45 and csDepMood not ge 45 then do;
c4ndirr1=1;
   if csIrritable ge 45 then c4odirr1=min(c4odirr1, cda8o01);
   if csDepMood not ge 45 then c4odirr1=min(c4odirr1, cda6o01);
end;
else if csIrritable ne. or csDepMood ne. then c4ndirr1=0;
lable c4ndirr1='Irritable mood';

if c4ndirr1 = 1 or p4ndirr1 = 1 then j4ndirr1 = 1;
else if c4ndirr1 ne. or p4ndirr1 ne 1 then j4ndirr1 = 0;

label j4ndirr1='Irritable mood';

if j4sdep ge 5 and j4ndirr1=1 then j4_dirr=1;
else if j4sdep ne. or j4ndirr1 ne . then j4_dirr=0;
label j4_dirr='Depression with irritable mood (not depressed mood)';
end;

*************SAS Code for YAPA**********************;

If yapa = 1 then do;

csIrritable=pda8f01 + 0;
csDepMood = pda8f01 + 0;

if csIrritable ge 45 and csDepMood not ge 45 then do;
c4ndirr1=1;
   if csIrritable ge 45 then c4odirr1=min(c4odirr1, cda8o01);
   if csDepMood not ge 45 then c4odirr1=min(c4odirr1, cda6o01);
end;
else if csIrritable ne . or csDepMood ne . then c4ndirr1=0;
lable c4ndirr1='Irritable mood';

j4ndirr1 = p4ndirr1;
lable j4ndirr1='Irritable mood';

if j4sdep ge 5 and j4ndirr1=1 then j4_dirr=1;
else if j4sdep ne. or j4ndirr1 ne . then j4_dirr=0;
label j4_dirr='Depression with irritable mood (not depressed mood)';
end;