

Alcohol Dependence Scale (ADS)

Scale items:

INSTRUCTIONS:

Carefully read each question and the possible answers provided. Answer each question by circling the ONE choice that is most true for you. The word "drinking" in a question refers to "drinking of alcoholic beverages." Take as much time as you need. Work carefully, and try to finish as soon as possible. Please answer ALL questions.

These questions refer to the past 12 months

1. How much did you drink the last time you drank?

- a. Enough to get high or less
- b. Enough to get drunk
- c. Enough to pass out

2. Do you often have hangovers on Sunday or Monday mornings?

- a. No
- b. Yes

3. Have you had the "shakes" when sobering up (hands tremble, shake inside)?

- a. No
- b. Sometimes
- c. Often

4. Do you get physically sick (e.g., vomit, stomach cramps) as a result of drinking?

- a. No
- b. Sometimes
- c. Almost every time I drink

5. Have you had the "DTs" (delirium tremens) - that is, seen, felt or heard things not really there; felt very anxious, restless, and over excited?

- a. No
- b. Sometimes
- c. Several times

6. When you drink, do you stumble about, stagger, and weave?

- a. No
- b. Sometimes
- c. Often

7. As a result of drinking, have you felt overly hot and sweaty (feverish)

- a. No
- b. Once
- c. Several times

8. As a result of drinking, have you seen things that were not really there?

- a. No
- b. Once
- c. Several times

9. Do you panic because you fear you may not have a drink when you need it?

- a. No
- b. Yes

10. Have you had blackouts ("loss of memory" without passing out) as a result of drinking?

- a. No, never
- b. Sometimes
- c. Often
- d. Almost every time I drink

11. Do you carry a bottle with you or keep one close at hand?

- a. No
- b. Some of the time
- c. Most of the time

12. After a period of abstinence (not drinking), do you end up drinking heavily again?

- a. No
- b. Sometimes
- c. Almost every time I drink

13. In the past 12 months, have you passed out as a result of drinking?

- a. No
- b. Once
- c. More than once

14. Have you had a convulsion (fit) following a period of drinking?

- a. No
- b. Yes
- c. Several times

15. Do you drink throughout the day?

- a. No
- b. Yes

16. After drinking heavily, has your thinking been fuzzy or unclear?

- a. No
- b. Yes, but only for a few hours
- c. Yes, for one or two days
- d. Yes, for many days

17. As a result of drinking, have you felt your heart beating rapidly?

- a. No
- b. Yes
- c. Several times

18. Do you almost constantly think about drinking and alcohol?

- a. No
- b. Yes

19. As a result of drinking, have you heard "things" that were not really there?

- a. No
- b. Yes
- c. Several times

20. Have you had weird and frightening sensations when drinking?

- a. No
- b. Once or twice
- c. Often

21. As a result of drinking have you "felt things" crawling on you that were not really there (e.g., bugs, spiders)?

- a. No
- b. Yes
- c. Several times

22. With respect to blackouts (loss; of memory):

a. Have never had a blackout
b. Have had blackouts that last less than an hour

c. Have had blackouts that last for several hours

d. Have had blackouts that last a day or more

23. Have you tried to cut down on your drinking failed?

a. No
b. Once
c. Several times

24. Do you gulp drinks (drink quickly?)

a. No
b. Yes

25. After taking one or two drinks, can you usually stop?

a. Yes
b. No