## **Bush-Francis Catatonia Rating Scale**

Severity Score (Number of points for items 1 -23) \_\_\_\_\_\_

Screening Score (Presence or absence of items 1 - 14) \_\_\_\_\_\_

Number of items 1-23 \_\_\_\_\_\_

Patient: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_ Examiner: \_\_\_\_\_

- **1. Immobility/stupor:** Extreme hypoactivity, immobile, minimally responsive to stimuli.
  - 0 Absent.
  - 1 Sits abnormally still, may interact briefly.
  - 2 Virtually no interaction with external world.
  - 3 Stuporous, non-reactive to painful stimuli.
- **2. Mutism:** Verbally unresponsive or minimally responsive.
  - 0 = Absent.
  - 1 = Verbally unresponsive to majority of questions; incomprehensible whisper.
  - 2 =Speaks less than 20 words/5mins.
  - 3 =No speech.
- **3.** = **Staring:** Fixed gaze, little or no visual scanning of environment, decreased blinking.
  - 0 = Absent.
  - 1 = Poor eye contact, repeatedly gazes less than 20 s between shifting of attention; decreased blinking.
  - 2 = Gaze held longer than 20 s, occasionally shifts attention.
  - 3 = Fixed gaze, non-reactive.
- **4. Posturing/catalepsy:** Spontaneous maintenance of posture (s), including mundane (e.g. sitting or standing for long periods without reacting).
  - 0 = Absent.
  - 1 = Less than I min.
  - 2 Greater than one minute, less than 15 min.
  - 3 Bizarre posture, or mundane maintained more than 15 min.
- **5. Grimacing:** Maintenance of odd facial expressions.
  - 0 = Absent.
  - 1 =Less than 10seconds.
  - 2 = Less than 1 min.
  - 3 = Bizarre expression(s) or maintained more than 1 min.
- **6. Echopraxia/echolalia:** Mimicking of examiner's movements (echopraxia) or speech (echolalia).
  - 0 = Absent
  - 1 = Occasional.
  - 2 = Frequent.
  - 3 = Constant
- **7. Stereotypy:** Repetitive, non-goal-directed motor activity (e.g. finger-play, repeatedly touching, patting or rubbing self); abnormality not inherent in act but in its frequency.
  - 0 Absent
  - 1 Occasional.
  - 2 Frequent.

- 3 Constant.
- **8. Mannerisms:** Odd, purposeful movements (hopping or walking tiptoe, saluting passers-by or exaggerated caricatures of mundane movements); abnormality inherent in act itself.
  - 0 Absent
  - 1 Occasional.
  - 2 Frequent.
  - 3 Constant.
- **9. Stereotyped & meaningless repetition of words & phrases** (verbigeration): Repetition of phrases or sentences (like a scratched records).
  - 0 Absent.
  - 1 Occasional.
  - 2 Frequent, difficult to interrupt.
  - 3 Constant.
- **10. Rigidity:** Maintenance of a rigid position despite efforts to be moved (exclude if cog-wheeling or tremor present)
  - 0 = Absent.
  - 1 = Mild resistance.
  - 2 = Moderate.
  - 3 =Severe, cannot be repostured.
- **11. Negativism:** Apparently motiveless resistance to instructions or attempts to move/examine patients. Contrary behavior, does exact opposite of instruction.
  - 0 Absent
  - 1 Mild resistance and/or occasionally contrary.
  - 2 Moderate resistance and/or frequently contrary.
  - 3 Severe resistance and/or continually contrary.
- **12. Waxy flexibility:** During repositioning of patient, patient offers initial resistance before allowing him/herself to be repositioned, similar to that of a bending candle. (also defined as slow resistance to movement as the patient allows the examiner to place his/her extremities in unusual positions. The limb may remain in the position in which they are placed or not)
  - 0 Absent
  - 3 Present.
- **13. Withdrawal:** Refusal to eat, drink and/or make eye contact.
  - 0 = Absent.
  - 1 = Minimal oral intake/interaction for less than 1 day.
  - 2 = Minimal oral intake/interaction for more than 1 day.
  - 3 = No oral intake/interaction for 1 day or more.
- **14. Excitement:** Extreme hyperactivity, constant motor unrest which is apparently non-purposeful. Not to be attributed to akathisia or goal-directed agitation.
  - 1 Excessive motion, intermittent.
  - 2 Constant motion, hyperkinetic without rest periods.
  - 3 Full-blown catatonic excitement, endless frenzied motor activity.

- 15. Impulsivity: Patient suddenly engages in inappropriate behavior (e.g. runs down hallway, starts screaming or takes off clothes) without provocation. Afterwards can give no, or only a facile explanation. 0 - Absent. 1 - Occasional. 2 - Frequent. 3 - Constant or not redirectable. **16.** Automatic obedience: Exaggerated cooperation with examiner's request or spontaneous continuation of movement requested. 0 = Absent.
- - 1 = Occasional
  - 2 = Frequent
  - 3 = Constant.
- **17. Passive Obedience** (mitgehen): Patient raises arm in response to light pressure of finger, despite instructions to the contrary.
  - 0 = Absent.
  - 3 = Present.
- **18.** Muscle Resistance (gegenhalten): Involuntary resistance to passive movement of a limb to a new position. Resistance increases with the speed of the movement.
  - 0 Absent
  - 3 Present.
- 19. Motorically Stuck (ambitendency): Patient appears stuck in indecisive, hesitant motor movements.
  - 0 Absent.
  - 3 = Present.
- 20. Grasp reflex: Striking the patient's open palm with two extended fingers of the examiner's hand results in automatic closure of patients hand.
  - 0 = Absent
  - 3 = Present
- **21. Perseveration:** Repeatedly returns to same topic or persists with the same movements.
  - 0 = Absent.
  - 3 = Present.
- 22. Combativeness: Belligerence or aggression, Usually in an undirected manner, without explanation.
  - 0 = Absent
  - 1 = Occasionally strikes out, low potential for injury.
  - 2 = Frequently strikes out, moderate potential for injury.
  - 3 =Serious danger to others.
- 23. Autonomic abnormality: Abnormality of body temperature (fever), blood pressure, pulse, respiratory rate, inappropriate sweating, flushing.
  - 0 = Absent
  - 1 = Abnormality of one parameter (exclude pre-existing hypertension).
  - 2 = Abnormality of two parameters.
  - 3 = Abnormality of three or more parameters.

**Appendix I - Standardized examination for catatonia.** The method described here is used to complete the 23-item Bush-Francis Catatonia Rating Scale (CRS) and the 14-item Catatonia Screening Instrument (CSI). Item definitions on the two scales are the same. The CRS measures the severity of 23 signs on a 0- 3 scale, while the CSI measures only the presence or absence of the first 14 signs.

Ratings are to be made solely on the basis of observed behaviour during the examination with the exception of completion of the items for 'withdrawal' and autonomic abnormality', which may be based on directly observed behaviour and for chart documentation. As a general rule, only rate items which are clearly present. If uncertain as to the presence of an item, rate the item as '0'.

	Procedure	Examines
1	Unserve nationt while trying to engage in a conversation	Activity level, Abn
		movements Abn speech
2	Examiner scratches head in exaggerated manner	Echopraxia
3	Examine arm for cogwheeling. Attempt to reposture, instructing patient to	Negativism, Waxy
	"keep your arm loose" - move arm with alternating lighter & heavier force.	flexibility
4	Ask patient to extend arm. Place one finger beneath hand and try to raise	Passive obedience
4	slowly after stating, "Do NOT let me raise your arm".	
5	Extend hand stating "Do NOT shake my hand". Gets stuck trying to do both.	Motorically stuck
6	Reach into pocket and state, "Stick out your tongue, I want to stick a pin in	Automatic obedience
	it".	
7	Check for grasp reflex.	Grasp reflex
8	Check chart for reports of previous 24-hour period. In particular check for	
	oral intake, vital signs, and any incidents.	
9	Observe patient indirectly, at least for a brief period, each day.	
	Fink, 1996, c/o David Healy, Modified by Miles, 2013	

## References:

Bush G, Fink M, Petrides G, Dowling F, Francis A. Catatonia. I. Rating scale and standardized examination. *Acta Psychiatr Scand.* 1996;93(2):129–136.

Prancis A. Catatonia: diagnosis, classification and treatment. <i>Curr Psychiatry Rep.</i> 2010;12:180-185.  Dhossche DM. Decalogue of catatonia in autism spectrum disorder. <i>Front Psychiatry</i> . 2014;5:1-4.		