

Mood disorders and Parkinson's disease

This is a questionnaire about several types of mental health conditions. Please answer these to the best of your ability.

The first set of questions is about bipolar disorder. Bipolar disorder, sometimes called manic depression, is a condition that causes unusual, extreme, and fluctuating changes in mood, energy, activity, concentration, or focus.

Block 1: Bipolar disorder

Multiple choice, single answer, required

1. Do you currently have a diagnosis of Parkinson's disease, or parkinsonism, by a physician or other health care professional?
 - a. Yes
 - b. No

Multiple choice, single answer, required

2. Have you ever been diagnosed by a health professional with bipolar disorder, manic depression, or mania?
 - a. Yes
 - b. No
 - c. Not sure
 - d. Prefer not to answer

Multiple choice, single answer, required

3. Even if you have not been diagnosed, do you think you may have experienced symptoms of bipolar disorder or mania?
 - a. Yes
 - b. No
 - c. Not sure
 - d. Prefer not to answer

Display Logic: If (b. No), (c. Not sure) or (d. Prefer not to answer) is selected for "Have you ever been diagnosed by a health professional with bipolar disorder, manic depression, or mania?"

Skip Logic: If (a. Yes) is selected, skip to "Do you think you have had an episode of mania?"

Skip Logic: If (b. No), (c. Not sure) or (d. Prefer not to answer) is selected, skip to "Have you ever regularly taken one of these types of medications?"

Multiple choice, single answer, required

4. Have you been diagnosed with Bipolar Type 1 (defined by episodes of long-lasting or severe mania and episodes of depression) or Bipolar Type 2 (defined by episodes of depression and episodes of "hypomania," where symptoms are similar to but not as severe as the mania of Type 1)?
 - a. Type 1
 - b. Type 2
 - c. Both
 - d. Not sure
 - e. Prefer not to answer

Display Logic: If (a. Yes) is selected for “Have you ever been diagnosed by a health professional with bipolar disorder, manic depression, or mania?”

Text box, limited to numbers between 0-99, required

5. How old were you when you were **first diagnosed** with bipolar disorder, manic depression, or mania?

If you are not sure, please make your best guess.

Age: _____

Display Logic: If (a. Yes) is selected for “Have you ever been diagnosed by a health professional with bipolar disorder, manic depression, or mania?”

Multiple choice, single answer, required

6. Bipolar disorder involves episodes of **mania** that can last for **a week or sometimes longer**. During these episodes, people **experience intense feelings** of being extremely “up,” elated, irritable, or touchy. Along with these mood changes, people have **changes in behavior** that may include hyperactivity, racing thoughts, less sleep, thinking you can do a lot of things at once, or feeling like you are unusually important, talented, or powerful. These behaviors are **noticeable to others** and **cause problems with daily activities or interactions**.

Do you think you have had an episode of mania?

- a. Yes
- b. No
- c. Not sure
- d. Prefer not to answer

Display Logic: If (a. Yes) is selected for “Have you ever been diagnosed by a health professional with bipolar disorder, manic depression, or mania?”

Skip Logic: If (b. No), (c. Not sure), or (d. Prefer not to answer) is selected, skip to “Have you experienced an episode of hypomania?”

Text box, limited to numbers between 0-99, required

7. How old were you the **first time** you had an episode of mania?

If you are not sure, please make your best guess.

Age: _____

Display Logic: If (a. Yes) is selected for “Do you think you have had an episode of mania?”

Text box, limited to numbers between 0-99, required

8. How old were you the **last time** you had an episode of mania?

If you are not sure, please make your best guess.

Age: _____

Display Logic: If (a. Yes) is selected for “Do you think you have had an episode of mania?”

Multiple choice, single answer, required

9. Some people with bipolar disorder experience similar symptoms to mania, but they are not as troublesome, do not cause as many problems, or last for less than a week. These episodes are known as **hypomania**.

Have you experienced an episode of hypomania?

- a. Yes

- b. No
- c. Not sure
- d. Prefer not to answer

Display Logic: If (a. Yes) is selected for “Have you ever been diagnosed by a health professional with bipolar disorder, manic depression, or mania?”

Skip Logic: If (b. No), (c. Not sure) or (d. Prefer not to answer) is selected, skip to “Thinking now about your experience with bipolar disorder, have you experienced symptoms of depression?”

Text box, limited to numbers between 0-99, required

10. How old were you the **first time** you had an episode of hypomania?
If you are not sure, please make your best guess.

Age: _____

Display Logic: If (a. Yes) is selected for “Have you experienced an episode of hypomania?”

Text box, limited to numbers between 0-99, required

11. How old were you the **last time** you had an episode of hypomania?
If you are not sure, please make your best guess.

Age: _____

Display Logic: If (a. Yes) is selected for “Have you experienced an episode of hypomania?”

Multiple choice, single answer, required

12. Have you experienced symptoms of depression?
- a. Yes
 - b. No
 - c. Not sure
 - d. Prefer not to answer

Display Logic: If (a. Yes) is selected for “Have you ever been diagnosed by a health professional with bipolar disorder, manic depression, or mania?”

Skip Logic: If (b. No), (c. Not sure), or (d. Prefer not to answer) is selected, skip to “Have you ever been hospitalized for bipolar disorder, manic depression, or mania?”

Text box, limited to numbers between 0-99, required

13. How old were you the **first time** you had symptoms of depression?
If you are not sure, please make your best guess.

Age: _____

Display Logic: If (a. Yes) is selected for “Have you experienced symptoms of depression?”

Multiple choice, single answer, required

14. Do you still sometimes have symptoms of depression?
- a. Yes
 - b. No
 - c. Not sure
 - d. Prefer not to answer

Display Logic: If (a. Yes) is selected for “Have you experienced symptoms of depression?”

Text box, limited to numbers between 0-99, required

15. How old were you the **last time** you had symptoms of depression? If you are not sure, please make your best guess.

Age: _____

Display Logic: If (b. No) is selected for “Do you still sometimes have symptoms of depression?”

Multiple choice, single answer, required

16. Have you ever been hospitalized for bipolar disorder, manic depression, or mania?
- a. Yes
 - b. No
 - c. Not sure
 - d. Prefer not to answer

Display Logic: If (a. Yes) is selected for “Have you ever been diagnosed by a health professional with bipolar disorder, manic depression, or mania?” OR (a. Yes) is selected for “Even if you have not been diagnosed, do you think you may have experienced symptoms of bipolar disorder or mania?”

Text box, limited to numbers between 0-99, required

17. How old were you at the time of your **first** hospitalization for bipolar disorder, manic depression, or mania?
- If you are not sure, please make your best guess.

Age: _____

Display Logic: If (a. Yes) is selected for “Have you ever been hospitalized for bipolar disorder, manic depression, or mania?”

Multiple choice, single answer, required

18. Have you received outpatient treatment for bipolar disorder, manic depression, or mania (for example, saw a health professional in a clinic)?
- a. Yes
 - b. No
 - c. Not sure
 - d. Prefer not to answer

Display Logic: If (a. Yes) is selected for “Have you ever been diagnosed by a health professional with bipolar disorder, manic depression, or mania?” OR (a. Yes) is selected for “Even if you have not been diagnosed, do you think you may have experienced symptoms of bipolar disorder or mania?”

Block 2: Medications

Multiple choice, single answer, required

19. The following is a list of medications that can be prescribed for multiple different reasons, including conditions that affect mood (such as depression, bipolar disorder, or schizophrenia) or sometimes other conditions. They are sometimes known as “neuroleptic” or “antipsychotic” medications.

Aripiprazole (Abilify)
Asenapine (Saphris, Sycrest, Secuado)
Cariprazine (Vraylar, Reagila)
Brexpiprazole (Rexulti)
Chlorpromazine (Largactil, Thorazine)
Clozapine (Clozaril)
Fluphenazine (Modecate, Moditen, Prolixin)
Haloperidol (Haldol, Peridol)

Lurasidone (Latuda)
Olanzapine (Zyprexa, Symbyax)
Paliperidone (Invega, Xeplion, Trevicta)
Pimozide (Orap)
Quetiapine (Seroquel)
Risperidone (Risperdal, Rispolept, Consta)
Thioridazine (Mellaril)
Ziprasidone (Geodon, Zeldox, Zipwell)

Have you ever regularly taken one of these types of medications?

By regularly taking, we mean for at least 30 days.

- a. Yes
- b. No
- c. Not sure
- d. Prefer not to answer

Text box, limited to numbers between 0-99, required

20. At what age did you **start** regularly taking one of these types of medications?

If you are not sure, please make your best guess.

Age: _____

Display Logic: If (a. Yes) is selected for “Have you ever regularly taken on of these types of medications?”

Multiple choice, single answer, required

21. Are you still regularly taking one of these types of medications?

- a. Yes
- b. No
- c. Not sure
- d. Prefer not to answer

Display Logic: If (a. Yes) is selected for “Have you ever regularly taken on of these types of medications?”

Text box, limited to numbers between 0-99, required

22. At what age did you **stop** taking these medications?

If you are not sure, please make your best guess.

Age: _____

Display Logic: If (b. No) is selected for “Are you still taking regularly taking one of these types of medications?”

Multiple choice, single answer, required

23. Have you ever regularly taken Lithium (also called Eskalith or Lithobid)?

By regularly taking, we mean for at least 30 days.

- a. Yes
- b. No
- c. Not sure
- d. Prefer not to answer

Text box, limited to numbers between 0-99, required

24. At what age did you start regularly taking Lithium?

If you are not sure, please make your best guess.

Age: _____

Display Logic: If (a. Yes) is selected for “Have you ever regularly taken Lithium (also called, Eskalith, or Lithobid)?”

Multiple choice, single answer, required

25. Are you still taking Lithium?

- a. Yes
- b. No
- c. Not sure
- d. Prefer not to answer

Display Logic: If (a. Yes) is selected for “Have you ever regularly taken Lithium (also called, Eskalith, or Lithobid)?”

Text box, limited to numbers between 0-99, required

26. At what age did you stop taking Lithium?

If you are not sure, please make your best guess.

Age: _____

Display Logic: If (b. No) is selected for “Are you still taking Lithium?”

Block 3: Depression and Anxiety

Multiple choice, single answer, required

27. Depression, also known as major depressive disorder or clinical depression, is a condition that involves **severe mood symptoms** such as feeling low, sad, hopeless, worthless, uninterested in hobbies and activities, or having decreased energy. These symptoms are **present for at least two weeks** and often longer, and **cause problems with daily activities**.

Have you ever been diagnosed by a health professional with depression?

- a. Yes
- b. No
- c. Not sure
- d. Prefer not to answer

Display Logic: If (b. No), (c. Not sure), or (d. Prefer not to answer) is selected for “Have you ever been diagnosed by a health professional with bipolar disorder, manic depression or mania?” AND (b. No), (c. Not sure), or (d. Prefer not to answer) is selected for “Even if you have not been diagnosed, do you think you may have experienced symptoms of bipolar disorder or mania?”

Text box, limited to numbers between 0-99, required

28. How old were you when you were **first diagnosed** with depression?

If you are not sure, please make your best guess.

Age: _____

Display Logic: If (a. Yes) is selected for “Have you ever been diagnosed by a health professional with depression?”

Text box, limited to numbers between 0-99, required

29. How old were you the **first time** you had symptoms of depression?

If you are not sure, please make your best guess.

Age: _____

Display Logic: If (a. Yes) is selected for “Have you ever been diagnosed by a health professional with depression?”

Multiple choice, single answer, required

30. Do you still sometimes have symptoms of depression?

- a. Yes
- b. No
- c. Not sure
- d. Prefer not to answer

Display Logic: If (a. Yes) is selected for “Have you ever been diagnosed by a health professional with depression?”

Text box, limited to numbers between 0-99, required

31. How old were you the last time you had symptoms of depression?

If you are not sure, please make your best guess.

Age: _____

Display Logic: If (b. No) is selected for “Do you still have symptoms of depression?”

Multiple choice, single answer, required

32. Have you ever been diagnosed by a health professional with an anxiety disorder?

- a. Yes
- b. No
- c. Not sure
- d. Prefer not to answer

Skip Logic: If (b. No), (c. Not sure), or (d. Prefer not to answer) is selected, skip to “Have any of your first-degree biological relatives (mother, father, sibling, or child) been diagnosed with any of the following psychiatric conditions?”

Text box, limited to numbers between 0-99, required

33. How old were you when you were **first diagnosed** with an anxiety disorder?

If you are not sure, please make your best guess.

Age: _____

Display Logic: If (a. Yes) is selected for “Have you ever been diagnosed by a health professional with an anxiety disorder?”

Text box, limited to numbers between 0-99, required

34. How old were you the **first time** you had symptoms of an anxiety disorder?

If you are not sure, please make your best guess.

Age: _____

Display Logic: If (a. Yes) is selected for “Have you ever been diagnosed by a health professional with an anxiety disorder?”

Multiple choice, single answer, required

35. Do you still sometimes have symptoms of an anxiety disorder?

- a. Yes
- b. No
- c. Not sure
- d. Prefer not to answer

Display Logic: If (a. Yes) is selected for “Have you ever been diagnosed by a health professional with an anxiety disorder?”

Text box, limited to numbers between 0-99, required

36. How old were you the **last time** you had symptoms of an anxiety disorder?

If you are not sure, please make your best guess.

Age: _____

Display Logic: If (a. No) is selected for “Do you still sometimes have symptoms of an anxiety disorder?”

Block 4: Family History

Multiple choice, multiple answer, required

37. Have any of your **first-degree** biological relatives (mother, father, sibling, or child) been diagnosed with any of the following psychiatric conditions?

Please select all that apply.

- a. Bipolar Disorder or Manic Depression
- b. Depression
- c. Anxiety disorder
- d. Schizophrenia or schizoaffective disorder
- e. No first-degree biological relatives have been diagnosed with any of these conditions
- f. Not sure
- g. Prefer not to answer

Skip Logic: If (e. No first-degree biological relatives have been diagnosed with any of these conditions.), (f. Not sure) or (g. Prefer not to answer) is selected, skip to End of Survey

Multiple choice, multiple answer, required

38. Who in your family has been diagnosed with bipolar disorder or manic depression?

Please select all that apply.

- a. Mother
- b. Father
- c. Sister
- d. Brother
- e. Daughter
- f. Son
- g. Not sure
- h. Prefer not to answer

Display Logic: If (a. Bipolar Disorder or Manic Depression) is selected for “Have any of your first-degree relatives (e.g. mother, father, sibling, or child) been diagnosed with any of the following psychiatric conditions?”

Multiple choice, multiple answer, required

39. Who in your family has been diagnosed with depression?

Please select all that apply.

- a. Mother
- b. Father
- c. Sister
- d. Brother
- e. Daughter

- f. Son
- g. Not sure
- h. Prefer not to answer

Display Logic: If (b. Depression) is selected for “Have any of your first-degree relatives (e.g. mother, father, sibling, or child) been diagnosed with any of the following psychiatric conditions?”

Multiple choice, multiple answer, required

40. Who in your family has been diagnosed with an anxiety disorder?

Please select all that apply.

- a. Mother
- b. Father
- c. Sister
- d. Brother
- e. Daughter
- f. Son
- g. Not sure
- h. Prefer not to answer

Display Logic: If (c. Anxiety disorder) is selected for “Have any of your first-degree relatives (e.g. mother, father, sibling, or child) been diagnosed with any of the following psychiatric conditions?”

Multiple choice, multiple answer, required

41. Who in your family has been diagnosed with schizophrenia or schizoaffective disorder?

Please select all that apply.

- a. Mother
- b. Father
- c. Sister
- d. Brother
- e. Daughter
- f. Son
- g. Not sure
- h. Prefer not to answer

Display Logic: If (d. Schizophrenia or schizoaffective disorder) is selected for “Have any of your first-degree relatives (e.g. mother, father, sibling, or child) been diagnosed with any of the following psychiatric conditions?”

End of Survey

Thank you for sharing your experiences with mental health conditions. **Please click on the next arrow below (>>) to submit your responses and be redirected to the Fox Insight website.**