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Corrigendum for The MDS-16 (English version) cutoff score

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In 2017, we (Somer, Soffer-Dudek, Ross, & Halpern) authored the publication “*Maladaptive Daydreaming: Proposed Diagnostic Criteria and Their Assessment with a Structured Clinical Interview*”, and in that publication reported an optimal cutoff score of 50 for identifying clinical-level maladaptive daydreamers using the English version of the MDS-16.

Unfortunately, this week we found out that there was a technical error with the scaling of the MDS items, causing us to report 50 instead of the correct number which was **40**.

Specifically, the items of the MDS are based on the scale: 0, 10, 20, 30, ..., 100. In the Survey program, we thought we were using a coding of 0, 1, 2, 3, ..., 10, representing tens, but, that program does not accept zero as a code, so it changed our coding to 1, 2, 3, 4, ..., 11.

I (NSD) had originally overlooked this automatic change, and only now noticed it coincidentally while re-analyzing the data in order to develop a short form for the MDS.

When using the correct item scaling, a mean MDS-16 score of 40 is the correct number yielding the sensitivity and specificity reported in the publication. All the other figures in the study have not been affected by the mistake. For example, calculation of the Kappa agreement coefficient between the MDS cutoff and the interview classifications does not change, whether we use the old scale with a cutoff of 50, or the corrected scale with a cutoff of 40. The mistake is only relevant for other studies using the correct scale. If they will use a cutoff of 50 instead of 40, according to our corrected table (see below) their false positives will still be zero, but their false negatives will increase unnecessarily (i.e., individuals with MDS scores of between 40 and 50 are most likely positive for Maladaptive Daydreaming and they will be missed).

Attached below is the relevant table with an addition of the corrected cutoff scores reported alongside the original ones.

Table 1.

The corrected versus original cutoff scores for Table 5 of the original paper, depicting coordinates of the ROC curve for the mean MDS-16 total score.

MDS-16 originally reported cutoff score	MDS-16 cutoff score – corrected scale	Sensitivity %	Specificity %
0.00	-1.00	100	0.0
10.31	0.31	100	9.7
32.81	22.81	100	83.9
36.56	26.56	100	87.1
40.63	30.63	96.8	87.1
42.19	32.19	96.8	90.3
45.94	35.94	96.8	93.5
49.69	39.69	96.8	100
50.31	40.31	93.5	100
51.25	41.25	90.3	100
106.25	96.25	3.2	100
118.13	99.13	0.0	100

Note. (a) The optimal cutoff score, maximizing both sensitivity and specificity, is in bold (MDS-16 mean of 39.69). Because the next score in line is well over 40, the MDS optimal cutoff score may be considered to be a score of 40. (b) Shaded areas indicate that there were additional values in between that are not shown in the table, as they have no practical significance. (c) the smallest cutoff value is the minimum observed value minus 1, and the largest cutoff value is the maximum observed value plus 1.