Electroconvulsive therapy (ECT) is generally used to treat major depression. At the Epworth Clinic we provide individualised patient care. Your treating psychiatrist would have discussed with you, both your diagnosis and suitable treatment options available to you to treat your condition.

Electroconvulsive Therapy (ECT) is used to treat a number of psychiatric conditions.

ECT has been shown to be a very effective treatment. For uncomplicated severe depression evidence suggests at least an 80% improvement. However, not all patients improve at the same rate, as with all forms of medical treatment. It is important to note that generally it will take around 4 to 5 treatments before you will feel an improvement in your symptoms.

ECT is conducted in our ECT suite by a specialist ECT Consultant Psychiatrist, Consultant Anaesthetist, along with a specialised team of nursing professionals experienced and trained in ECT.

You are required to sign informed consent documents authorising the use of ECT.

“Consent” means that you understand the procedure as well as its risks and benefits. At anytime during your treatment you can withdraw consent to treatment.

If at any time you feel concerned or wish to discuss your progress, or have any questions regarding treatment do not hesitate to discuss these with the ECT staff and your doctor.

Before your first ECT treatment, you will have a thorough psychiatric evaluation as well as a complete physical health examination to ensure that ECT is indicated for your health condition.
Important Information to prepare for ECT

- Fast from midnight
- If medications have been prescribed prior to ECT take with only a small sip of water.
- Ensure hair is clean and dry
- Do not apply face creams, moisturisers or makeup. Remove nail polish and jewellery.
- Do not bring cigarettes, lighters and mobile phones into the treatment room.
- Dress in loose clothing to enable the easy application of the monitors
- If you wear contact lenses, glasses or dentures these can be removed in the treatment room and placed under your trolley. If you have worn contact lenses please ensure you bring a case.

Treatment Process

- The ECT procedure is administered under a general anaesthetic in the ECT treatment room.
- The ECT procedure will take 15-20 minutes after which you will wake from your anaesthetic in the recovery room. You will remain in the recovery room for an additional 30 minutes where you will be observed by our experienced nursing staff for 30 minutes.
- Once you have recovered from the ECT procedure the nursing staff will accompany you back to the ward.
- Breakfast and any medications will be administered.
- A post ECT medical review will be conducted.

Important Information following ECT

It is important that you remain on the ward until you have been reviewed by your psychiatrist.

Refrain from smoking or participating in excessive exercise for at least 2 hours.

For 24 hours after ECT:

- Avoid driving a motor vehicle or operating machinery, including domestic appliances.
- Avoid making any major personal decisions, sign contracts or enter into any business arrangements during an acute course of treatment.
Why is ECT given?
ECT is most commonly used to treat severe depression; it is sometimes used to treat severe mania and certain types of schizophrenia.

ECT has been shown to be an effective treatment option for patients who are unable to tolerate medications due to the side effects.

What are the benefits?
ECT appears to work more rapidly and effectively than medications for some mental disorders. ECT can be used in combination with medication to help in your current episode of illness.

How does it work?
It is believed ECT acts by altering the complex electrical and chemical processes within the brain that are temporarily impaired in some mental conditions. It is believed it may help return these processes towards the correct balance.

What consent do I have to give?
Once you have read all the relevant information and discussed with your psychiatrist the benefits and risks associated with ECT treatment. You are able to give informed consent to proceed with the ECT treatment. As a voluntary patient you can withdraw consent at any time.

Your psychiatrist will explain and outline all the risks involved in the treatment and the risks associated with early termination of the treatment course.

You will be provided with both written and verbal information.
You should read any local information regarding your rights and discuss any issues that arise with the treating psychiatrist.

What tests and assessments are required pre-ECT?
Prior to your first ECT treatment any tests/reviews will be discussed with you.

- Blood tests, ECG and chest x-ray may be ordered by your treating psychiatrist.
- Medications will be reviewed and may be adjusted by your treating psychiatrist.
- Anaesthetic review will be conducted by the ECT anaesthetist.
What are the number and frequency of treatments?
Generally patients undergo an average of ten ECT treatments. This depends on your individual progress and assessment.
Treatments are usually given 2-3 times per week for the initial treatment course.

What are the risks/side effects?
ECT carries the risks associated with having a general anaesthetic. Some patients with pre-existing medical conditions have an increased risk associated with ECT. All patients undergo a medical review prior to ECT.
Patients with severe depression commonly experience impaired concentration and attention, which usually improves with ECT. Most patients will have some memory impairment of the time surrounding the ECT treatment and associated time in hospital. Some of this will be from the depression, as memories are not well formed when you are experiencing poor concentration.
Over the course of ECT, it may be more difficult to remember newly learned information. This difficulty disappears following completion of the ECT course.

Some patients also report a partial loss of memory for events that occurred during the time prior to ECT. While many of these memories typically return after ECT, rarely a few patients do report long-lasting memory impairment.
The extent and duration of memory impairment can depend on type and frequency of ECT. This is why it is important to report any perceived memory impairment as the treatment can be adjusted.

Will I experience any pain?
ECT is not painful as you are administered a general anaesthetic and you will be asleep for the treatment. You may experience headache and/or muscle pain usually within the first few hours after ECT. This is often more marked following the first treatment and less for subsequent treatments. This can be easily alleviated with analgesia e.g., paracetamol.
**Do I have to remain in hospital whilst having ECT?**

Whether you require an admission to hospital for ECT or that you are to receive ECT as a day patient depends on a number of factors.

Patients that require an acute course are better treated initially as inpatients.

Outpatient status may be considered for treatment in the latter stages of treatment or those considered for maintenance treatment.

You will need to discuss these options with your psychiatrist.

**What will happen towards the end of my acute course of ECT?**

To remain well after a course of ECT, it is important to continue with a form of antidepressant treatment. An antidepressant or other drug may be introduced towards the end of the course to help prevent relapse.

Outpatient day program, counselling and other supports may be introduced to assist your return to a normal life.

For a few patients who do not remain well on medications, maintenance ECT may be offered.

**What is maintenance ECT and will I be offered this option?**

Your psychiatrist may discuss maintenance ECT with you towards the end of your acute course of ECT. This will be based on an individual clinical assessment as to whether this is a viable option for you.

This is given on a gradually extended basis starting at weekly and progressing to monthly or even longer between treatments.

**What if I relapse?**

If there is a relapse in your illness, it is important to treat quickly. It may require changes to medications, or it may require a further course of ECT.

In either case it is essential to act promptly so you do not have to endure an extended period of illness.

**Are there any additional costs?**

ECT is performed by a team of specialist ECT Psychiatrists and anaesthetists. You may have “out of pocket” expenses for each treatment. More detailed information will be provided as part of informed financial consent.
Where to obtain further information on ECT
VkPCReN0TSc.email

Epworth Clinic
888 Toorak Road,
Camberwell VIC 3124
Intake Clinician for inpatient referral and enquiries:
Phone 03 9805 4338
Fax 03 9805 4233
Email ERC.intakeclinician@epworth.org.au

References
2006 Chief Psychiatrists Guidelines on Practising ECT in Western Australia

Electroconvulsive Therapy An Australasian Guide
2003 JWG Tiller
& RW Lyndon

Electroconvulsive Therapy A Programmed Text


Electroshock, Healing Mental Illness
– Max Fink M.D. 1999


Victorian Department of Health 2012
– “Electroconvulsive therapy About your rights”
