

INFORMATION FOR PATIENTS ABOUT ECT

THE HISTORY OF ECT:

Electro-convulsive therapy, or ECT, is an important and often misunderstood treatment. Many people are scared of ECT, or have heard only bad things about it from films like "Cuckoo's Nest" or Janet Frame's story. In fact, it is now a safe and effective treatment, especially for severe depressions, and has been used, and very thoroughly researched, for over 50 years.

Most of the bad publicity about ECT comes from the early days of psychiatric treatments in the 1950's and 1960's, when few medicines were known and doctors hadn't realised that ECT worked just as well if given with an anaesthetic. At that time ECT was used too often, as so few other treatments were available, and although it worked, it was scary and unpleasant to have it without anaesthetic. "Cuckoo's Nest" and Janet Frame's books are set back in this time, in the 1950s and 1960s. Since then we have hugely improved our ability to use ECT appropriately, and have modernised the equipment to make it safe and much more fine-tuned.

WHAT IS ECT USED FOR?

ECT is still a widely used treatment for psychiatric illnesses today. It is very effective in severe disturbances of the moods - especially severe depressions. In a severe depression, the sufferer can have disturbed thinking with excessive fears or guilt (what we call depressive delusions), or even hallucinations such as hearing unpleasant or critical "voices" caused by the depression. These are all due to the severely depressed mood affecting the thinking and senses. ECT is especially effective in depressions of this kind, and can bring relief from tormenting fears and worries much more quickly than medication can.

Antidepressant medications and psychological therapies often work well, but only in about two-thirds of people who are depressed. ECT is effective in a higher percentage of depressions – especially in the more severe depressions. Relief from the misery of depression is often faster with ECT, with some improvement after 2 or 3 treatments. While the medications can work for many people, their effect builds up over a longer period of time, so that it can take 3 to 4 weeks for real improvement - and longer if the first medicine tried isn't effective and it has to be changed to an alternative type. In a very severe depression, more than one kind of medication will often be needed - as well as an antidepressant, an antipsychotic drug (to treat the delusions or hallucinations), is essential. This means putting up with more side-effects, and sometimes even the combined medications just aren't effective enough.

HOW DOES ECT WORK?

Some people think that ECT works by "shocking" a person out of a depression, like the proverbial "short sharp shock". This isn't so at all. ECT works in a complex way, and exactly why it is so effective in most cases isn't yet fully understood - but seems to be due to physical and electrical changes in the brain's functioning. During ECT, a very brief electrical stimulus is applied across the head, causing a wave of electrical activity across the brain. This has a number of effects, one of which is to cause the release of several "messenger chemicals" which are active in areas of the brain that control our moods. ECT thus has a physical effect, as the medications do, on a basic physical disturbance in the brain that underlies severe mood disturbances.

HOW ECT IS GIVEN:

ECT is given with a very brief general anaesthetic, which puts the person off to sleep for 10 minutes so that they don't feel anything. A medication to relax all the muscles is also given. The treatment is all over in a minute and within half an hour the person having ECT will be awake and thinking about having breakfast. ECT is given by a psychiatric doctor together with a specialist anaesthetist, at a hospital anaesthetic Recovery Room. A nurse takes patients to Recovery from the ward or from home (for out-patients), and they return to the ward or to home as soon as they have woken up. The treatments are usually given on alternate days (e.g. Monday, Wednesday and Friday), first thing in the morning. The general anaesthetic in ECT is very safe - safer than in many minor operations, as it is so brief.

HOW MANY ECT TREATMENTS MIGHT I NEED?

Most people need several treatments to get completely better. This usually means about two or three weeks of treatments. People usually start feeling better in themselves after a treatment, and then slip back a bit before the next treatment. As their course of ECT continues their improvement increases and becomes more lasting. The psychiatrist decides how many treatments are enough, together with people and their families, according to their recovery - ECT is ceased once a person is fully recovered.

IS MEDICATION NEEDED AS WELL AS ECT?

Towards the end of an ECT course it is necessary to start medication to keep up the benefit of the ECT, as ECT works very well when you have it, but the benefit can fade after a couple of weeks and the six months after a severe depression are a high-risk time for a relapse developing. It is the same with antidepressant medicine – when this works well it is necessary to keep taking it to continue the benefit, in the months after a depression. Because of this, it's recommended to restart a medication to keep up the effectiveness of the ECT and protect people from any recurrence over these months. During the course of ECT, however, it is usual to temporarily stop or at least reduce most other medications.

WHAT ARE THE RISKS OR SIDE-EFFECTS OF ECT?

There is a very small risk of a complication due to the general anaesthetic. This is extremely rare and is no greater than the risk of a serious medical complication due to taking antidepressant tablets.

People often worry that ECT sounds scary and that it might hurt them or cause "brain damage". This isn't true - ECT doesn't damage the brain physically, or alter a person's personality. However, all treatments have side-effects, and the main concern with ECT is its effect on memory. There is often some disruption to the memory, just after an ECT treatment, with forgetfulness for day-to-day events. This clears up within a few weeks (usually 2-3 weeks) after the last ECT treatment. Occasionally some people have temporary confusion just after an ECT treatment, but this is usually short-lived. Rarely, especially if a person has needed many treatments to recover, there can be some longer-term memory gaps - details of some past personal memories that remain elusive. Psychiatrists work to avoid this by adjusting the technique of ECT for each person so that it is as gentle as possible while still being effective. Against these concerns about possible memory side-effects we have to weigh up the very real dangers that depression causes - from a risk of self-harm or suicide to difficulty even in eating or drinking in a really severe depression. A seriously depressed person just cannot enjoy their life or get on with work, or care for their family. A small risk of some longer-term memory gaps has to be weighed against these very real problems, and ECT can often actually be life-saving. As a person responds to ECT and the depression lifts, their alertness, concentration and thus their overall memory actually improve, especially as the temporary muddling effects of the actual ECT treatments wear off.

Some people experience a headache or muscle-aching just after ECT, but this can generally be treated by paracetamol or other pain-relief medicine, if needed.

IS ECT EVER USED FOR ILLNESSES OTHER THAN DEPRESSIONS?

While ECT is most commonly used for severe depressions, it does treat any illness of the moods effectively, and is occasionally used to treat a manic episode. ECT is hardly ever needed for this, as usually the medications are effective by themselves. It may be used, however, when a manic episode doesn't get better with medications, or if a person is allergic to the medications, or is just very unwell indeed, and very urgent treatment is essential. ECT is also a very effective treatment for a psychotic illness called catatonia which is like a coma. ECT does treat symptoms such as delusions or hallucinations quite well, and it used to be used to treat schizophrenia in the old days, as so few medications were available. These days ECT is hardly ever used to treat schizophrenia, as it only has a short-term benefit on this illness. Severe depressions are still the main condition that ECT is used for, and it works especially well in older people where side-effects of medications can be risky or very troublesome. ECT is one of the most thoroughly researched treatments in psychiatry, since the 1950s, and is both safe and effective.

It is important to feel reassured about any treatments,
especially a treatment such as ECT that many people would see as controversial.
Please ask your doctor or nurse about any other questions you have, at any stage.