

Electroconvulsive Therapy

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Electroconvulsive therapy (known as ECT) is a treatment to help the brain regulate mood. The patient is given a general anesthesia to sleep during the treatment. The psychiatrist gives a brief electrical stimulation to the brain.

ECT has been shown to help more than 70 percent of patients who use it as part of their therapy.

ECT may be right for you if medicine or psychotherapy does not work, if they are too slow to relieve your symptoms, or if you previously had successful response to ECT treatments.

Treatments may be given if you are staying in the hospital (inpatient) or coming from home (outpatient).

ECT is given under general anesthesia that will make you sleepy. You will be unaware during the procedure.

Number of Treatments Needed

The number of treatments varies for each patient. In general, a patient may receive 2 to 3 treatments a week for a total of 3 to 12 treatments.

If you need more treatments after the initial cycle, you and your psychiatrist will talk about a schedule.

When ECT May Be Helpful

ECT may be helpful for treating the following:

- major depression
- bipolar affective disorder
- schizophrenia
- neuroleptic malignant syndrome
- delirium.

What To Do Before Starting ECT Treatment

- You will need to have a health history and physical exam within 30 days of your scheduled treatment. The exam will determine if you are healthy enough to have ECT treatment and if you need lab work or more tests.
- Tell your doctor all of your medical conditions.
- Tell your doctor the medicines you take. Include all prescription, over-the-counter, herbal and natural medicines.

ECT treatment as an outpatient

- For your safety, you will need a responsible adult to drive you home and to stay with you for 24 hours.
- For 24 hours:
 - Do not drive or use any machinery.
 - Do not make important decisions.
 - Do not drink alcohol. (It is also important to not drink alcohol as long as you are taking prescription pain medicine.)

(over)

Food and Liquid Directions Before Your Procedure

These directions are based on your scheduled arrival time. Not following these directions could mean your procedure will be delayed or canceled.

Alcohol and tobacco: 24 hours

- Do not drink any alcohol 24 hours before your scheduled arrival time.
- Do not smoke, vape, use chewing tobacco or use any other tobacco products up to 24 hours before your scheduled arrival time.

Regular foods: 8 hours

- Eat your regular foods up to 8 hours before your scheduled arrival time.

Light solid foods: 6 hours

- You may eat light solid foods up to 6 hours before your scheduled arrival time.
A light meal is:
 - juice or coffee with milk or cream
 - 1 piece of toast **or** 1 bowl of oatmeal or hot cereal.
- Do not eat any nuts or nut butters.
- Do not eat foods that are heavy or high in fat such as meat or fried foods.

Clear liquids: 2 hours

- Drink only clear liquids up to 2 hours before your scheduled arrival time.
 - Drink water, fruit juice without pulp, black coffee, clear pop or tea.
 - Do not have milk, yogurt or energy drinks.

Medicines

- Take your medicines as directed with a small sip of water.

Guidelines for babies

- **6 hours** before the scheduled arrival time
 - you may give formula.
- **4 hours** before the scheduled arrival time
 - you may give breastmilk.

How to Prepare for ECT Treatment

- Take your blood pressure medicines and medicines for acid reflux unless your doctor gives you other directions.
- Avoid using make-up.
- You will be asked to use the bathroom before your treatment.

During an ECT Treatment

A psychiatrist, an anesthesiologist and a registered nurse will be in the room with you during each treatment.

- If you are coming to the hospital for treatment, you may be asked to wear a hospital gown.
- Appropriate consent will be given.
- You will lie down.
- The nurse will:
 - start an intravenous (IV) line in your hand or arm for the anesthesia
 - put a blood pressure cuff on your arm to monitor your blood pressure
 - attach a pulse oximeter on your finger to monitor your oxygen levels.
- Electrocardiogram (EKG) monitor patches will be placed on your chest to monitor your heart rate.
- The psychiatrist places the ECT leads to your scalp.
- The anesthesiologist will give you a general anesthesia through the IV. (Before the anesthesia, you may have an oxygen mask around your mouth and nose.)
- After you are asleep, the psychiatrist will give you a brief electrical stimulation through the leads on your scalp. This will cause a seizure in your brain.

- Your body remains still due to the effects of the muscle relaxer.
- The nurse will monitor you in the recovery area until you wake up.
- The ECT leads, IV, blood pressure cuff, oximeter clip, oxygen mask and EKG patches will be removed before you either return to your hospital room (inpatient) or leave for home (outpatient).

After ECT Treatment

- If you are an inpatient (staying in the hospital), you will return to your room.
- If you are an outpatient (returning home), you will need to have someone drive you home and stay with you for 24 hours.
For 24 hours:
 - Do not drive or use any machinery.
 - Do not make important decisions.
 - Do not drink alcohol.
- Follow all directions you receive from your psychiatrist or nurse.

Common Side Effects After ECT Treatment

Some common side effects after an ECT treatment include:

- headaches
- jaw tightness
- muscle soreness
- nausea (upset stomach)
- problems with distraction and concentration
- short-term memory loss.

Other less common side effects include:

- small risk of injury to the soft tissue in the mouth or to the teeth (such as a nick on the lip or tongue or a chipped or broken tooth)
- severe memory loss (rare). If this happens, the psychiatrist will talk with you about stopping treatment.

If you have any side effects (even those not listed above), please tell your psychiatrist or nurse. Most side effects can be avoided or improved.