

WHAT IS ELECTROCONVULSIVE THERAPY (ECT) ?

- It is a brief medical procedure
- It is the administering of short electric bursts to the brain, by use of external electrode pads to the brain.
- The procedure is done under short-acting, general anaesthesia lasting a few minutes.
- These bursts of electrical stimuli create a seizure, which assists in the opening of neuron pathways.
- It is a safe and pain-free procedure.

TREATMENT PLAN AND INDICATIONS

- ECT's can be done as an in- or out-patient procedure.
- ECT treatments are usually grouped in 6 to 12 sessions, subject to your Psychiatrist's evaluation.
- These treatments are typically given three times a week for 2 to 4 weeks.
- ECT is indicated for (but not limited to):
 - Major depression with or without psychosis
 - Treatment-resistant depression
 - Bipolar disorder
 - Maintenance ECT
 - Schizophrenia
 - Catatonic states

IMPORTANT THINGS TO KNOW ABOUT THE PROCEDURE

- You will be monitored closely by an Anaesthesiologist, the Psychiatrist and trained professional nursing staff.
- Pre-assessment of your vitals considered high risk can lead to a cancellation of the procedure. The decision will be made for your own safety.
- The idea of this procedure is for the brain resetting itself due to the seizure, clearing the neuropathways and lifting the common symptoms of depression.
- The ECT will show a print-out of the seizure starting and levelling off, indicating the seizure's completion.
- You are unconscious during the procedure.
- You will not feel a thing during this process.

BEFORE THE PROCEDURE

When an ECT is indicated for a patient, the following must take place:

- The Psychiatrist must explain the procedure, discuss all possible side-effects and acquire your written consent.
- You must be screened by the Anaesthesiologist to ensure that medically, it will be a safe procedure for you.
- Nursing staff will complete a questionnaire with you to acquire all the information.
- Nursing staff will check your vitals before the procedure to ensure your current medical stability.
- You can wear comfortable, loose clothes, to facilitate easier attachment of the equipment.

- You will be asked to lock away all valuable objects, remove all jewellery and take out dentures if applicable.
- You must be positively identified.
- You will proceed to the waiting area, from which nursing staff will call you for the procedure.

DURING THE PROCEDURE

- When you are comfortable on the bed in the procedure room, the nursing staff will find a vein in your hand or forearm to insert a cannula (tube).
- They will administer the following:
 - Short-acting general anaesthesia, you will be unconscious during the procedure.
 - A muscle relaxant to prevent the body from convulsing during the procedure.
 - Any other medications required for pain or nausea.
- To monitor all actions of the ECT, electrodes will be applied to your:
 - Head (to monitor the induced seizure)
 - Chest (to monitor your heart)
 - Foot (to monitor body movement)
- To block the muscle relaxant, a tourniquet will be placed around the leg of the foot that is connected to the electrodes (to monitor the real movement of the body.)
- Electrodes can be placed unilaterally, to affect one side of the brain, or bilaterally to affect both sides.

DURING THE PROCEDURE

(continued)

- A mouth guard will be placed in your mouth to prevent you from accidentally biting your tongue.
- The electric impulses are administered by an ECT machine regulated by the Psychiatrist as required.
- The whole procedure will generally not last more than 10 minutes.

AFTER THE PROCEDURE

- A few minutes later, the anaesthesia and muscle relaxant effects will begin to wear off. Nursing staff will take you to the recovery room for further management.
- Observations: To ensure a successful recovery, your blood pressure, pulse and oxygen levels in the blood will be monitored.
- To prevent any infections, the cannula used for vein access is removed. Leaving the cannula in for the next treatment can cause infection.
- You will be requested to perform specific actions to ensure that you are awake and alert (i.e., coughing or opening your eyes.)
- When there is evidence that you have recovered well from the anaesthesia (usually 15minutes), you will be escorted by wheelchair back to your bed or family.

POSSIBLE SIDE-EFFECTS

As with medication, ECT's do have some side-effects:

- Impairment in memory functioning, or memory loss. It usually affects short-term memory, but mostly this memory is recovered.
- You might experience muscle pain due to tense muscles.
- Nausea can be felt by some patients due to the anaesthesia.
- Headaches are prevalent after an ECT but are usually managed by mild analgesics like Panado.
- The procedure is very safe and the side-effects are mostly reversible or manageable.

RECOMMENDED HOME CARE

When arriving home with your loved one that has received ECT treatment:

- Provide them with something to eat as they have been fasting since the previous evening.
- Give mild analgesics, like *Panado* for any pain.
- Treat any nausea as usual (light meal or no food) until nausea settles.
- Memory loss is expected. Reassure your loved one and do not be alarmed (memory mostly returns several weeks after the last procedure.)
- Let your loved one guide their own recovery for the day, and rest as much as needed .
- If you have any queries regarding post-ECT care, please contact Claro Clinic and speak to a Registered Nurse.



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WHAT YOU NEED TO KNOW



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