DANBURY HOSPITAL
A Higher Level of Care

Danbury Hospital Patient Education Sheet

What is Electroconvulsive Therapy (ECT)?

What is Electroconvulsive Therapy or ECT?

ECT is considered to be a safe, effective and efficient treatment in older as well as younger patients for depression, mania, schizophrenia, catatonia and/or life threatening acute illness. ECT may be preferred when patients have intolerance to medications or have failed several courses of psychiatric medications. More recently, there has been an increase in its use in the outpatient setting.

How does ECT work?

Psychiatric illnesses are brain disease often caused by abnormal chemical levels in the brain. ECT changes the chemicals in the brain much like medications, causing improvement in thinking, function and quality of life. ECT is usually done in the operating room under anesthesia along with the use of skeletal muscle relaxants.

During treatment, electrodes are placed on the front part of the head. A modern ECT device will deliver a stimulus which induces a seizure. This modern technology decreases memory side effects. The seizure is hardly noticeable and is generally 25 seconds in duration.

How will I make my decision for ECT?

Just like any medical procedure with anesthesia, education and information will be made available to you prior to you making a decision. This is an essential part of the pre-ECT evaluation conducted by the psychiatrist who performs the procedure. Your psychiatrist will discuss ECT, alternative treatments, as well as the pertinent risks and benefits of ECT compared to the other treatment options.

What is the frequency of treatments?

A treatment course consists of 6 to 12 treatments, though there is some variability in individual response. Generally, the treatments occur three times a week on Mondays, Wednesdays, and Fridays. They may be reduced to twice a week until relief and maximum effect are obtained.

Maintenance therapy, if prescribed, may be given once a week for a month or so, and/or monthly for six to twelve months.

Are there any side effects from the ECT?

The most common reported side effect from ECT is short-term memory loss. Memory usually returns to normal within a few weeks.

In rare circumstances, some patients may experience memory loss for a longer duration. This varies depending on age and frequency of treatments.

Other side effects may include slight headache and/or muscle discomfort, and nausea.

Is there any special preparation prior to ECT?

- Prior to the day of the ECT, your medical physician will perform a physical exam.
- Blood work and an electrocardiogram (ECG/EKG) will also be done within 30 days of the ECT series.
- You will be asked to have nothing to eat or drink the night prior to and the morning of the procedure.
- The physician will inform you of which medications, if any, to take the morning

- of the ECT. These medications should only be taken with small sips of water.
- All other daily medications may be taken after the procedure.

What should I expect the day of ECT?

- You will be directed at an assigned time to the Pain Center, which is located on 4 West in Danbury Hospital. This is near the Green Parking Lot.
- The ECT registered nurse (RN) will greet you there in the morning and escort you to the ECT procedure area.
- The ECT RN will ask you to empty your bladder and change into a hospital gown.
- If you have not met with the anesthesiologist before the day of ECT, you will meet for an exam when you arrive.
- The RN will also ask you some questions to complete the pre-ECT paperwork.
- You will then be escorted on a stretcher to the operating room/ECT procedure room.
- In the procedure room, the anesthesiologist will insert an intravenous line (IV) and apply ECG leads to monitor your heart. ECT is conducted under anesthesia.
- Also, the psychiatrist will be able to monitor brain activity by use of an electrocephalogram device (EEG), which further contributes to the safety of current practice.
- After the procedure, you will be escorted by stretcher back to the Pain Center and monitored by a RN.
- Once you are alert, you will be given a simple meal.
- For outpatients, you will be discharged once you have tolerated the light meal, your IV has been taken out, and your vital signs have stabilized.

Are there any special discharge instructions?

If you are an outpatient:

You are not allowed to drive yourself home after the ECT. You must have a ride home. Once home, do not drive or operate any heavy machinery until the following morning. You may resume your normal diet. Rest and take it easy until the following day.

If you are an inpatient:

You will be escorted back to the in-patient unit to resume your usual morning activities when you and your nurse feel you are ready.

ECT is a voluntary treatment and can be withdrawn at any time in the treatment process.

Additional Information:

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Sources:

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Zisselman, Marc & Kelly. (2000). Journal of the American Geriatric Society, 48, 560-566.

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For more information, or to learn about the specialized services and programs available at Danbury Hospital, please visit www.DanburyHospital.org