

ELECTROCONVULSIVE THERPAY (ECT)

INTRODUCTION AND HISTORY:

Electroconvulsive therapy (ECT), also known as electroshock therapy (EST), is a medical procedure used to treat various psychiatric disorders including depression, manic depressive illness and schizophrenia.

The reputation of ECT often precedes it, bringing to mind negative images of an antiquated and barbaric treatment. Much of the stigma attached to electroconvulsive therapy is based on early, brutal treatments in which high doses of electricity were administered without anesthesia, leading to memory loss and death.

Electroconvulsive therapy also has been touted as a "cure-all" for many psychiatric illnesses. The truth, as with many things, lies somewhere between the two extremes. ECT is one of the most effective treatments for depression, is usually well tolerated but does carry some potentially serious side effects.

The modern ECT suite such as the one at Prince William Hospital is equipped to provide general anesthesia during the treatment, and monitoring and post-ECT care that is comparable to any outpatient surgical clinic found in any state of the art hospital in the United States. Patients are monitored during the treatment by a team of medical providers which includes a psychiatrist, anesthesiologist, nurse anesthetist, nurse practitioner and postoperative nurses. Patients are asleep throughout the treatment and are monitored for their heart rate using a continuous electrocardiogram, blood pressure, oxygenation, and electroencephalogram (EEG) throughout the treatment. During the treatment, medications are administered to limit the amount of muscle movement and to control heart rate and changes in blood pressure.

These treatments are a far cry from the ones depicted in movies such as One Flew Over the Cuckoo's Nest!

INDICATIONS:

Electroconvulsive therapy may be the best treatment option for some people, since it can provide significant improvements in symptoms more quickly than psychotherapy or medications.

ECT is most commonly recommended for people with:

- **DEPRESSION:**

Severe depression, depression with psychosis, suicidal ideation or refusal to eat

- BIPOLAR ILLNESS:

Acute mania that hasn't improved with medications or bipolar depression

- SCHIZOPHRENIA:

Acute exacerbation of psychosis in Schizophrenia, when symptoms are severe or medications aren't sufficient

- CATATONIA:

A state in which one does not eat, drink or speak. It is a medical emergency and ECT is recommended emergently.

RISKS or ADVERSE EFFECTS:

1. Mild confusion:

On the day of treatment and is usually short lasting

2. Memory Issues:

A small subset of patients report memory problems during an ECT course and at times after the treatments are finished. These are minimized by the modern day ECT which includes the use of Right unilateral Brief and Ultra brief pulse wave ECT.

3. Medical complications:

The two most serious concerns regarding ECT are related to the heart and brain. Stroke, heart attack and even death are very rare but potential outcomes. However, the fact is that most modern medical facilities such as our own have worked intensely in minimizing the above complications because of the intense medical monitoring before, during and after the treatments.

MODERN DAY ECT:

- BRIEF AND ULTRA BRIEF Pulse wave ECT:

Decreased memory loss has been associated with brief and Ultra brief pulse ECT.

- TYPES OF ECT:

Recent data shows that *Right Unilateral* ECT has been more effective in preventing memory loss than *Bilateral* ECT.

PATIENT EDUCATION LINKS:

Please view these links prior to ECT consultation.

Emory University ECT links:

http://www.emoryhealthcare.org/departments/fuqua/patient_info/Electroconvulsive_Th.html (video)

<http://abcnews.go.com/Health/DepressionTreatment/story?id=4355359>

Mayo Clinic link:

<http://www.mayoclinic.com/health/electroconvulsivetherapy/MY00129/TAB=multimedia> (video)

MEDICATION TREATMENT HISTORY:

Please fill out this form prior to your consultation (separate form also found on website)

MEET THE PSYCHIATRIST:

ECT program at Prince William Hospital is headed by Dr. Imran Akram. He is a trained Adult and Geriatric Psychiatrist. Furthermore, he specializes in electroconvulsive therapy (ECT) which is recognized as the most effective treatment for acute and chronic treatment refractory psychiatric disorders. Dr. Akram completed his Psychiatric residency and Geriatric Psychiatry fellowship at University of Virginia Health System. He did his ECT fellowship at Emory University. After finishing his fellowship, he served at a highly reputed hospital in the suburbs of Chicago, Alexian Brothers Health system. He plans to provide comprehensive care for his patients at our hospital through collaboration with colleagues in the field of Medicine, Psychiatry and Psychology. Dr. Akram is a member

of American Psychiatric Association, Psychiatric Society of Virginia and Association for Convulsive Therapists.

CONTACT:

CONSULTATION:

Please view the ECT video from the patient education Links and fill out the ECT medication history form or have your psychiatrist help you fill it out prior to your visit.

ECT CONTACT:

703-369-8464 for inpatient services
703-369-8055 option 1 for outpatient services

Please leave a message to include your name, the best time to reach you and best number to reach you. Also include how you were referred to us (ie. A self referral or your psychiatrist asked you to have an ECT evaluation). Your call will be returned within one business day.

LOCATIONS:

MANASSAS

Prince William Hospital

Counseling Center

8680 Hospital Way

Manassas, VA 20110

Phone: (703) 369-8055

Fax: (703) 369-8565