

Electroconvulsive therapy (ECT)

Electroconvulsive therapy (ECT) is a medical treatment for severe depression, mania and schizophrenia.

ECT is not a surgical procedure. It involves a small electrical current being carefully passed through the brain.

ECT is safe, painless and very effective in treating depression.

Around 7500 Australians and 300 New Zealanders have ECT treatment each year.

Why is ECT used?

Psychiatrists use ECT because:

- It works. ECT can improve or clear depression in nearly 70% of patients, and has been proven to help with other conditions such as mania and schizophrenia.
- It works quickly. ECT can be a life-saving treatment for people who are at risk of suicide, or who are not eating or drinking because of their depression.
- It's safe and there are few side effects.
- It provides another treatment option if medication is not working or if a patient has bad reactions to their medication.

“Many people who have depression will respond to a talking therapy. Many will respond to medication.

ECT can be recommended when other treatments don't provide adequate benefit.”

Dr Bradley Ng, psychiatrist

Where do you get ECT?

ECT is given in a hospital. You may be an inpatient (staying overnight) or an outpatient (coming into hospital for the day).

What happens during ECT?

You will be put to sleep with a general anaesthetic and be given a medicine which relaxes your muscles.

Your psychiatrist will place two electrodes on your head and deliver a short electrical pulse. The treatment takes about 20 seconds. You will be asleep and unaware during the treatment.

You will then be moved to the recovery ward to wake up from the anaesthetic. The whole procedure takes around 10–20 minutes. If you're an outpatient at the hospital you will be able to go home the same day.

On average around 8–12 sessions of ECT are given in a treatment course, with a few days between sessions. You may need more or fewer sessions depending on your condition.

Who can give ECT?

Only approved psychiatrists with special training should give ECT.

All psychiatrists in Australia and New Zealand follow strict regulations to ensure that ECT is performed safely. These regulations are contained in state Mental Health Acts and guidelines issued by chief psychiatrists and health departments.

How does ECT work?

The small electrical current increases the level of electrical activity in the brain. Current scientific evidence suggests that ECT may rebalance the chemicals in the brain that cause depression and other mental illnesses.

Is ECT safe?

ECT is a very safe treatment.

The risks are similar to any minor medical procedure given under general anaesthetic.

Will ECT cure depression?

Around 60–70% of people who have ECT for depression say their symptoms clear completely. Up to 80% say they get some benefit.

However, there is a high chance that depression will come back in the weeks or months after a course of ECT.

Follow-up medication, **psychological treatment** (talking therapy) and help for dealing with stress are essential in staying well.

“I had 12 sessions of ECT.

My husband says that he noticed a difference in me after about the fifth one. The difference is I feel normal again. I can get out and do my volunteer work.

Before I went and had it I was so sick. I couldn't talk, I was really bad. I know that I wouldn't be where I am now if I hadn't had the ECT.”

Carolyn, ECT patient, QLD

What are the side effects of ECT?

The main side effect of ECT is memory loss.

Loss of short-term memories

A small number of people who have ECT can't remember what happened on the morning of treatment or the day before, or have patchy memories of the time. Some have trouble remembering or concentrating for the day after the treatment. However, depression alone can cause the same symptoms.

These kinds of memory problems will go away after the course of ECT is finished.

Loss of long-term memories

In much rarer cases, patients report that they have no memory of certain events in their past.

Research into ECT is trying to find ways to reduce these side effects even further.

“The depression can come back but knowing that there is something I can do to treat it makes the next episode less stressful.”

Vivienne, ECT patient, Melbourne VIC

Myths and fears about ECT

If you are worried about getting ECT, it's important to talk about how you are feeling with your psychiatrist.

Below are some common questions psychiatrists get asked about ECT.

Will I get brain damage?

No. Scientific studies have shown that ECT does not damage the brain.

Does ECT hurt?

ECT does not hurt. You are completely asleep during the procedure. You may have a headache, body aches or nausea from the anaesthetic when you wake up.

Psychiatrists who perform ECT take care to make it as comfortable as possible.

I'm scared about getting ECT.

Some people are worried about ECT because of how it has been shown in films and books. In the past ECT was given without anaesthetic and for illnesses it would never be used for today.

Modern ECT is safe, painless and effective, and is administered by highly trained specialists.

Can someone be given ECT if they don't want it?

Before any ECT treatment is given, your psychiatrist must confirm that you consent to having ECT.

They will:

- tell you their reasons for recommending ECT
- tell you what ECT involves, including the risks and side effects
- give you time to make a decision.

If your condition is life-threatening and you are unable to consent because you are too ill, your psychiatrist can obtain legal permission to perform ECT.

“Before I had treatment I was terrified. I thought I would be awake and jumping around on the bed you know, like in the movies. But after the first one I wasn't scared anymore. I was just placed on the bed, I went to sleep and then woke up in the recovery area. It was like nothing had happened.”

Carolyn, ECT patient, Gold Coast QLD

Remember

- ✓ ECT is safe and it works.
- ✓ Some people get side effects from ECT, including short-term memory loss.
- ✓ If you are worried about treatment, make a list of your concerns. Your psychiatrist will be happy to answer any questions you may have.

This fact sheet is also available online at yourhealthinmind.org

Published April 2017 © RANZCP | C1014V1

About us

Psychiatrists are doctors who specialise in mental health.

The Royal Australian and New Zealand College of Psychiatrists:

- trains and supports psychiatrists
- advocates for better mental health for our communities
- sets standards in psychiatry.



The Royal
Australian &
New Zealand
College of
Psychiatrists



This is a general guide only, and does not replace individual medical advice. Please speak to your doctor for advice about your situation. The RANZCP is not liable for any consequences arising from relying on this information. Subject matter experts, people with lived experience of mental illness and carers all contributed to this fact sheet.