

**WAKE FOREST UNIVERSITY/BAPTIST HOSPITAL
MEDICAL CENTER**

**ELECTROCONVULSIVE THERAPY (ECT)
INFORMATION FORM**

patient identification

Date: _____ **Physician Signature:** _____

This document provides detailed information on electroconvulsive therapy (ECT) including the risks and benefits. A separate form is used to provide consent for this procedure.

ECT involves a series of treatments that may be given on an inpatient or outpatient basis. To receive each treatment you will come to a specially equipped area in this facility. The treatments are usually given in the morning. Because the treatments involve general anesthesia, you will have had nothing to eat or drink after midnight the night before each treatment. Before the treatment, a small catheter will be placed in your vein so that you may receive medications. An anesthetic medication will be injected that will quickly put you to sleep. You will then be given another medication that will relax your muscles. Because you will be asleep, you will not experience pain or discomfort or remember the procedure. Other medications may also be given depending on your needs.

To prepare for the treatment, monitoring sensors will be placed on your head and body. Blood pressure cuffs will be placed on an arm and leg. This monitoring involves no pain or discomfort. After you are asleep, a carefully controlled amount of electricity will be passed between two electrodes that have been placed on your head.

You may receive bilateral ECT or unilateral ECT. In bilateral ECT, one electrode is placed on the left side of the head, the other on the right side. In unilateral ECT, both electrodes are placed on the same side of the head, usually the right side. Right unilateral ECT (electrodes on the right side) is likely to produce less memory difficulty than bilateral ECT. However, for some patients bilateral ECT may be a more effective treatment. Your physician will carefully consider the choice of unilateral or bilateral ECT.

The electrical current produces a seizure in the brain. The amount of electricity used to produce the seizure will be adjusted to your individual needs, based on the judgment of the ECT physician. The medication used to relax your muscles will greatly soften the contractions in your body that would ordinarily accompany the seizure. You will be given oxygen to breathe. The seizure will last for approximately 1 minute. During the procedure, your heart, blood pressure, and brain waves will be monitored. Within a few minutes, the anesthetic medications will wear off and you will awaken. You will then be observed until it is time to leave the ECT area.

The number of treatments that you receive cannot be known ahead of time. A typical course of ECT is 6 to 12 treatments, but some patients may need fewer and some may need more. Treatments are usually given three times a week, but the frequency of treatment may also vary depending on your needs.

ECT is expected to improve your illness. However, you may recover completely, partially, or not at all. After ECT, your symptoms may return. How long you will remain well cannot be known ahead of time. To make the return of symptoms less likely after ECT, you will need additional treatment with medication, psychotherapy, and/or ECT. The treatment you will receive to prevent the return of symptoms will be discussed with you.

Like other medical treatments, ECT has risks and side effects. To reduce the risk of complications, you will receive a medical evaluation before starting ECT. The medications you have been taking may be adjusted. However, in spite of precautions, it is possible that you will experience a medical complication. As with any procedure using general anesthesia, there is a remote possibility of death from ECT. The risk of death from ECT is very low, about 1 in 10,000 patients. This rate may be higher in patients with severe medical conditions.

ECT very rarely results in serious medical complications, such as heart attack, stroke, respiratory difficulty, or continuous seizure. More often, ECT results in irregularities in the heart rate and rhythm. These irregularities are usually mild and short lasting but in rare instances can be life threatening. With modern ECT technique, dental complications are infrequent and bone fractures or dislocations are very rare.

If serious side effects occur, medical care and treatment will be instituted immediately and that facilities to handle emergencies are available.

The minor side effects that are frequent include *headache, jaw pain, muscle soreness, and nausea*. These side effects usually respond to simple treatment.

When you awaken after each treatment, you may be confused. This *confusion* usually goes away within 1 hour. During the treatment course you may have new difficulties in *attention and concentration* and other aspects of thinking. These problems rapidly go away after completion of ECT.

Memory loss is a common side effect of ECT. The memory loss with ECT has a characteristic pattern, including problems remembering past events and new information. The degree of memory problems is often related to the number and type of treatments given. A smaller number of treatments are likely to produce less memory difficulty than a larger number. Shortly following a treatment, the problems with memory are greatest. As time from treatment increases, memory improves.

The majority of patients state that the benefits of ECT outweigh the problems with memory. Furthermore, most patients report that their memory is actually improved after ECT. Nonetheless, a minority of patients report problems in memory that remain for months or even years. The reasons for these reported long-lasting impairments are not fully understood. As with any medical treatment, people who receive ECT differ considerably in the extent to which they experience side effects.

Because of the possible problems with confusion and memory, you should not make any important personal or business decisions during or immediately after the ECT course. During and shortly after the ECT course, and until discussed with your physician, you should refrain from driving, transacting business, or other activities for which memory difficulties may be troublesome.

You are free to ask your physician or members of the ECT treatment team questions about ECT at this time or at any time during or following the ECT course. Your decision to agree to ECT is being made voluntarily, and you may withdraw your consent for further treatment at any time.