What is ECT?

Electroconvulsive Therapy (ECT) is a l**ong established, safe, effective, and evidence-based treatment for Major Depression, Bipolar (depression and mania), Schizophrenia, and Catatonia. It also beneficial for agitation and aggressive behavior related to dementia.**

ECT is used when a rapid response is needed (e.g., **risk of suicide, inability to eat or drink)** and a patient has previously responded well to ECT.

ECT is performed by a trained medical team in a hospital or specialized treatment setting.

How does ECT work?

After a patient has received brief general anesthesia, ECT induces a short, controlled seizure that may cause biochemical changes which:

- Help reduce or relieve symptoms
- Provide a faster response than medications
- Improve mood, sleep, and energy levels
- Affect brain chemistry and neurotransmitters
- Improve communication between different brain regions
- Reset patterns of brain activity with severe mood disorders
- Increase brain "plasticity" (cell growth & connections)

Addressing common misconceptions

Q: "Is ECT painful?"

A: No. Patients are given general anesthesia so they are always asleep during treatments.

Q: "Is it like what I've seen in movies?""

A: No. Modern ECT is highly controlled, safe, and humane.

Q: "Is it a last resort?"

A: No - It should be considered first when rapid improvement is needed in urgent clinical situations. Many patients and family members say they wish they were treated with ECT earlier in their illness.

What should patients and caregivers consider?

- Discuss risks and benefits with your care team.
- Ask about alternative treatments.
- Involve family or caregivers in decision-making.
- Understand the expected course and follow-up care.

Where can I learn more?

Visit: www.isen-ect.org

Scan the QR code to visit our website.

*Talk to your healthcare provider for personalized guidance.

ISEN
International Society for ECT and Neurostimulation

Understanding Electroconvulsive Therapy (ECT)

A Guide for Patients and Caregivers

www.isen-ect.org

What happens during an ECT treatment?

Preparation

Psychiatric and medical evaluations and fasting before treatment.

Anesthesia

Under general anesthesia, a brief, controlled electrical stimulation is provided to the brain. This produces a short, monitored seizure. A muscle relaxant is given to reduce physical movement from the seizure.

Treatment

You will always be asleep for your treatment. The brief seizure lasts only about 30–60 seconds.

Recovery

Patients wake within minutes in the recovery room (PACU) and are monitored until vital signs are stable and discharge criteria are met.

How many treatments are needed?

A full index or acute course of ECT typically is **8-15 treatments, typically 3 times a week.**

- The number of treatments is specifically determined by the response of your symptoms.
- Patients may see improvement in symptoms after 4-6 treatments.
- Other people may see improvement before you feel it.

*Some patients may continue maintenance ECT, with treatments spaced farther apart to help prevent relapse.

Is ECT Safe?

Yes. ECT is considered one of the **safest procedures performed under general anesthesia.**

Modern ECT is very different from historic and media portrayals:

- ECT is always performed under general anesthesia and a muscle relaxer.
- Your treatment, including vital signs and oxygen saturation, are carefully monitored.
- Current technology is used along with individualized care.

What are the benefits of ECT?

- High response rates (higher than medications alone)
- Improved mood
- Increased pleasure
- More restful sleep
- Better appetite
- More positive attitude
- Less agitation
- More hope

Rapid improvement in symptoms
ECT can be a life-saving treatment

What are the possible side effects?

Common (usually temporary):

- Confusion immediately after treatment
- Headache or muscle soreness
- Nausea
- Memory difficulties (especially around the time of treatment)

Memory effects:

- Many people experience temporary difficulty with short-term memory.
- Some may have longer-lasting memory gaps, especially for events near the treatment period.
- Ongoing research continues to improve techniques to minimize this.

Are there any restrictions after ECT?

- You may not drive after ECT or the rest of the day.
- Avoid making any major life decisions during your ECT course.
- Do not operate any heavy exercise equipment or machinery during ECT.
- Have someone stay with you the day of treatment.