

Oregon State Hospital
Guidelines and Standards Regarding Appropriate Medical Uses of
Electroconvulsive Therapy (ECT)

APPROPRIATENESS OF ECT

ECT shall be administered only for the benefit of the individual patient receiving the treatment. Institutional factors such as staff convenience shall play no role in the decision to administer ECT. ECT shall be used to manage or control the behavior of unruly or disruptive patients only if there is an appropriate psychiatric diagnosis.

The consideration of ECT is most appropriate in those conditions for which efficacy has been established. These include:

1. Severe depression with high suicide risk; or where the patient is not taking adequate food or fluids and/or when associated with delusions or vegetative signs; and/or the use of drug or other therapy entails high risk, will take an unacceptably long period to work, or have failed to respond to an adequate course of therapy with antidepressant drugs.
2. Acute mania.
3. Schizophrenia, schizophreniform psychosis or catatonia, when severe and characterized by behavior which is a threat to the safety and wellbeing of the patient and/or others; when not responding to drugs or other therapies; where drugs or other treatments may result in unacceptable risks, such as severe reactions or as a result of complicating associated medical problems.

It is therefore essential that the patient's illness be correctly diagnosed. Whether or not to use ECT should be based on a thorough review of the severity of the patient's illness, medical indications and contraindications, and nonresponsiveness to other treatments. ECT should be considered when alternative pharmacological and/or psychotherapeutic treatments have been given an adequate trial without efficacious response. When a patient is suffering from therapy resistant psychotic or depressive illness, factors such as severity of the illness, its natural course, and the risk of other treatments worsening the course need to be taken into account. Results are likely to be better in patients at the acute onset of illness, short duration of decompensation, and greatest severity of disturbances.

Severity

The immediate risk of suicide (when not manageable by other means in a timely manner) is a clear indication for the consideration of ECT. Acute manic episodes—especially when characterized by clouded sensorium, dehydration, extreme psychomotor agitation, high risk for serious medical complications, or death through exhaustion—are also clear indications for ECT. The severe and unremitting nature of the patient's emotional suffering or extreme incapacitation are also important considerations. For example, in schizophrenia, ECT may be useful either in acutely and extremely disturbed patients whose behavior has become unmanageable and/or dangerous and is nonresponsive to other treatments. How-