

Number of patients receiving ECT treatment drops over 10-year period

Open and well informed conversations on ECT can help reduce stigma, says Mental Health Commission

A new report by the Mental Health Commission has revealed that the number of patients in Irish in-patient mental health units who received electro-convulsive therapy (ECT) in 2018 has decreased compared to 10 years previously.

The comparative data is included in an ECT activity report for the years 2017 and 2018 that provides information on the administration of the treatment in national in-patient mental health services.

Although the report shows that the overall number of treatments of ECT has increased from 2,725 treatments in 2008 to 2,936 in 2018 – and that treatments have increased markedly in recent years, with an additional 763 treatments taking place in 2018 compared with 2015 – this data is contextualised by an overall decrease in the number of residents undergoing ECT treatment over the period in question, from 396 residents in 2008 down to 282 in 2018.

This is echoed by an overall decrease in the number of programmes of ECT over the same period, from 407 programmes in 2008 to 365 programmes in 2018. One programme of ECT refers to a maximum of 12 individual treatments.

Director of Standards and Quality Assurance at the Mental Health Commission, Rosemary Smyth, advised that there are limitations, on the basis of data protection, which restrict the amount of information that can legally be requested and which could, in theory, make a comparative analysis more useful. She also advised that context must be applied when analysing some of the data in the report.

“For example, the increase in the number of treatments of ECT, particularly from 2015 to 2018, does not necessarily mean that ECT is being administered more often by our mental health services,” she said. “It may indicate, for example, that more residents are undergoing the full complement of treatments per programme than in previous years.”

Other findings in the report show that the ratio of female to male residents undergoing ECT treatment over the 10-year period stayed at approximately two to one. The report states that the higher number of women being administered ECT may be related to the relatively higher rate of diagnosed depressive disorders in females than males in Ireland.

Referring to the fact that ‘significant improvement’ and ‘complete recovery’ have consistently been the two most common outcomes of a programme of ECT treatment since 2008, the Chief Executive of the Mental Health Commission, John Farrelly, said that this trend would indicate that ECT treatment generally has a positive effect on those being treated. In 2018, 81% of people receiving the treatment indicated improvement as a reason for concluding a programme of ECT.

“ECT is a procedure that has been stigmatised throughout history, partly because of the way it has been portrayed on screen, and partly because of a general disconnect that still exists between patient and public perspectives on ECT therapy.

“Studies have shown that the ‘Hollywood’ version of ECT, as shown in many films since the late 1940s, has left the impression that the treatment is negative, cruel and brutal, with no therapeutic benefit. In fact, the portrayal of ECT in films rarely depicts modern ECT practice and experience.

What is has done is served to distort public opinion of ECT, and further add to the stigma for those who undergo such treatments.

“We know that ECT will not work for everyone, and we accept that there have been many people for whom ECT has not been effective,” added Mr Farrelly. “However, while this report supports the view that ECT tends, for the vast majority of cases, to be a last resort treatment for people suffering from mental illness who have been unresponsive to medication, it is also important to recognise that the evidence in this report shows that ECT does work for the vast majority of people to whom it is administered, and it has helped many Irish people recover from mental illness.

“The report will enable open and well-informed conversations about ECT. We need to acknowledge the higher service delivery standards that exist today, and develop a more balanced, well-informed view of modern ECT. It is important that we do our best to avoid unintentionally further stigmatising people who have responded well to this treatment.”

Mr Farrelly added that it was encouraging that service providers are creating ECT ‘centres of excellence’, as this will lead to an enhanced patient experience and higher levels of compliance and therapeutic value.

The report also noted that a total of 516 individual treatments of ECT (18%) were administered without consent to 53 residents in 2018. Since the commencement of the Mental Health (Amendment) Act 2015, ECT can only be administered with the written consent of the patient or, if the patient is unable to consent, with the approval of the responsible consultant psychiatrist and a second consultant psychiatrist. ECT can only be administered in compliance with rules set by the Mental Health Commission.

2018 ECT statistics summary:

- **365** programmes of ECT administered
- **2,936** individual treatments of ECT administered
- **283** residents received ECT
- **15** approved centres provided ECT (from a total of 65)
- **19%** of ECT programmes involved one or more treatments without consent
- **18%** of individual ECT treatments were administered without consent
- **63%** of residents administered ECT were reported as suffering from depressive disorders
- **67%** of programmes cited resistance to medication as the indication for ECT
- **81%** of programmes reported improvement as the outcome of ECT programmes

Ends

Notes to the editor:

About the Mental Health Commission

The Mental Health Commission is an independent statutory body. The primary functions of the Mental Health Commission are to foster and promote high standards of care and good practice in the delivery of mental health services and to ensure that the interests of those involuntarily admitted are protected, pursuant to the Mental Health Act 2001. The Mental Health Commission also has statutory responsibility for the Decision Support Service under the Assisted Decision-Making (Capacity) Act 2015.

What is Electro-convulsive therapy (ECT)?

Electro-convulsive therapy (ECT) is an evidence-based treatment for specific types of major mental illnesses such as depression, mania and schizophrenia. It is a medical procedure during which an electric current is passed briefly through the brain via electrodes applied to the scalp to induce generalised seizure activity. The person receiving treatment is placed under general anaesthetic and muscle relaxants are given to prevent body spasms.

Treatments v Programmes of ECT

A programme of ECT refers to no more than 12 treatments of ECT prescribed by a consultant psychiatrist, with the total number of treatments administered in a programme of ECT varying from one to 12 treatments.

ECT in approved centres

The use of ECT in Ireland is regulated by the Mental Health Act 2001. In 2018, 53.1% of approved centres did not provide an ECT service; 23.4% of approved centres provided an ECT service; and 23.4% of services referred residents to other approved centres for ECT treatment.

Diagnosis

In 2018, roughly two-thirds (62.5%) of programmes of ECT were administered to residents with a diagnosis of depressive disorders, followed by 17.3% with a diagnosis of mania, and 13.2% with a diagnosis of schizophrenic, schizotypal, and delusional disorders.

This is in keeping with other jurisdictions, as depressive disorders are the most common indication for ECT internationally (ECT Accreditation Service, 2017; Scottish ECT Accreditation Network, 2017).