ELECTROCONVULSIVE THERAPY

Report of the Task Force on Electroconvulsive Therapy of the American Psychiatric Association

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"Granting that the question is a gross over-simplification, which of the following best characterizes your attitude toward the use of ECT?"

1. Totally opposed to its use
2. Not opposed, but ECT is used only in a few selected instances
3. More opposed than favorable
4. Ambivalent; undecided
5. No really strong feeling, but tend to be more favorable than opposed
6. Generally favorable for appropriate patients
7. Decidedly favorable to its use

Obtained response

<table>
<thead>
<tr>
<th>1%</th>
<th>2%</th>
</tr>
</thead>
<tbody>
<tr>
<td>33%</td>
<td>67%</td>
</tr>
</tbody>
</table>

Thus, we see that 33% expressed some degree of opposition, 67% percent, ambivalence, and 67% some degree of favorable attitude.

Responses to more specific statements about ECT were distributed as follows (the difference to 100% reflecting response of no opinion/ambivalent/undecided):

<table>
<thead>
<tr>
<th>Statement</th>
<th>% Agree</th>
<th>% Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. There are many patients for whom ECT, either alone or in combination with other measures, is the safest, least expensive, and most effective form of treatment</td>
<td>72%</td>
<td>20%</td>
</tr>
<tr>
<td>2. Any psychiatric institution claiming to offer comprehensive care should be equipped to provide ECT</td>
<td>83%</td>
<td>12%</td>
</tr>
<tr>
<td>3. ECT should be used only when all else has failed</td>
<td>38%</td>
<td>57%</td>
</tr>
<tr>
<td>4. The introduction of antidepressants and phenothiazines has made the use of ECT obsolete</td>
<td>7%</td>
<td>87%</td>
</tr>
<tr>
<td>5. The use of ECT should be discontinued or at least be curtailed</td>
<td>16%</td>
<td>75%</td>
</tr>
</tbody>
</table>
6. It is likely that ECT produces slight or subtle brain damage
7. There is a need for more explicit guidelines (perhaps from APA) for the proper use of ECT
8. The issuance of guidelines from any source for the use of ECT is likely to interfere with good patient care
9. ECT should not be administered to children 16 or under

Large percentages of the respondents feel that ECT is a valuable treatment technique and a majority would welcome explicit guidelines for its use.

Appropriate diagnosis/problem

Respondents were asked to rate the degree of appropriateness of ECT (assuming no physical contraindications) for 11 diagnoses/problems. Collapsing the six-point scale into “appropriate,” “undecided” and “not appropriate,” the following results were obtained (the difference to 100% reflecting rounding error and those who indicated opposition to the use of ECT for all patients):

<table>
<thead>
<tr>
<th>Diagnosis/Problem</th>
<th>Appropriate</th>
<th>Undecided</th>
<th>Not Appropriate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Minor (non-psychotic) depression</td>
<td>6%</td>
<td>2%</td>
<td>88%</td>
</tr>
<tr>
<td>Major depression</td>
<td>86%</td>
<td>6%</td>
<td>7%</td>
</tr>
<tr>
<td>Schizophrenia (acute or chronic)</td>
<td>25%</td>
<td>15%</td>
<td>59%</td>
</tr>
<tr>
<td>Manic excitement</td>
<td>42%</td>
<td>13%</td>
<td>43%</td>
</tr>
<tr>
<td>Drug or alcohol abuse</td>
<td>1%</td>
<td>2%</td>
<td>94%</td>
</tr>
<tr>
<td>Personality disorders</td>
<td>2%</td>
<td>1%</td>
<td>95%</td>
</tr>
<tr>
<td>Sexual dysfunction</td>
<td>1%</td>
<td>1%</td>
<td>93%</td>
</tr>
<tr>
<td>Anorexia nervosa</td>
<td>11%</td>
<td>17%</td>
<td>70%</td>
</tr>
<tr>
<td>Intractable pain</td>
<td>8%</td>
<td>18%</td>
<td>72%</td>
</tr>
<tr>
<td>Unremitting hypochondriasis</td>
<td>11%</td>
<td>17%</td>
<td>70%</td>
</tr>
<tr>
<td>Toxic dementias</td>
<td>2%</td>
<td>3%</td>
<td>91%</td>
</tr>
</tbody>
</table>

In addition, 274 respondents view ECT as appropriate for a variety of conditions. For example, 69% of respondents went to the effort of specifying the conditions for which they considered ECT is indicated.

The preceding table provides an excellent illustration of the respondents' views on the appropriateness of ECT. On the other hand, it also demonstrates that the use of ECT is not universal, and that respondents view ECT as appropriate in only a small percentage of cases.

Percentage of Respondents

After excluding 9% of respondents who did not respond to the question about the appropriateness of ECT, the percentage of respondents who considered ECT as appropriate was calculated. The respondents were categorized as either users or non-users of ECT based on their responses to the question. The percentage of respondents who viewed ECT as appropriate was calculated for each group.

Characteristics Distinguishing Users from Non-Users

The following characteristics distinguished users from non-users:

1. Age: Users were generally older than non-users.
2. Gender: Most users were male, while most non-users were female.
3. Education: Users had higher levels of education than non-users.
4. Experience: Users had more experience in the field than non-users.
5. Practice setting: Users practiced in settings where there was greater access to ECT.

Of the eight "theoretical" categories, organic, biochemical, physiological, psychological, emotional, cognitive, and other, the respondents overwhelmingly agreed that ECT is most effective in organic and cognitive disorders.