International survey on electroconvulsive therapy (ECT) finds that most patients and relatives report that it either makes no difference or makes things worse.

Call for ECT to be suspended.

A team of researchers, including three recipients of electroconvulsive therapy (ECT) and three clinical psychologists, have conducted the first ever international survey of people who have had ECT. 1,144 patients and family members, from 44 countries, responded.

The first two papers from the survey are being published this week.

The first¹ was published today. http://dx.doi.org/10.1111/inm.70109

Efficacy was measured in five ways. On all five measures, most recipients, and most relatives, reported that ECT either made no difference or made things worse.

The paper's Abstract reports:

'The majority of ECT recipients (55% to 71%) received either no benefit or a negative outcome on the five measures.

The percentages reporting some benefit were: helped the problem for which ECT was given - 45%; improved mood - 41%; 'helpful' overall - 41%; improved 'quality of life' - 29%; reduced suicidality - 33%. The findings were consistent with responses from family and friends.

It is striking that nearly half (49.1%) reported that their quality of life was made 'much worse' (21.6%) or 'very much worse' (27.5%) by ECT. A partial explanation of this alarming outcome is that quality of life encompasses the adverse effects of ECT alongside any benefits.

In conjunction with the absence of evidence that ECT is more effective than placebo, and the known long-term adverse effects on memory, these survey findings lead us to recommend an immediate suspension of ECT in clinical settings pending independent large-scale placebo-controlled studies to determine whether ECT has any effectiveness relative to placebo, against which the many serious adverse effects can be weighed.'

First author Dr John Read, Professor of Clinical Psychology at the University of East London, comments.

'There have been no placebo-controlled studies of ECT for depression since 1985. No studies show that ECT has any benefits at all beyond the end of treatment. Our findings, from the largest survey ever conducted suggests that claims that ECT is effective are, at best, unproven and, at worst, misleading.'

Co-author Lisa Morrison:

'Patients should be told it only works for a minority of people and even then only temporarily. We should also be told that they don't actually know how it works. As an

ECT recipient I have permanently lost precious memories of my children's birthdays and many other milestones in their lives. It's devastating. The worst part is nobody ever told me this could happen. We deserve the same rights as every other person'.

Co-author Sarah Hancock, another ECT recipient:

'Patients are rarely told that there is little or no evidence that ECT is more effective than placebo for depression. I wish this, and ECT's risks of injury and absence of medical or rehabilitation interventions (in the event of injury) post treatment, had been made known to my parents when I was catatonic.'

The second paper², on what patients were told before having ECT, will be published on Thursday, in the Journal of Medical Ethics

Contact: Dr Read: john@uel.ac.uk; +44 (0)7944 853 783 Lisa Morrison: lisa@lisamorrison.co.uk +44 (0)7759 578080

Sarah Hancock: sarah.price.hancock@gmail.com +01 (0) 858 751 4502 Dr Chris Harrop: harropchris@hotmail.com +44 (0)7715337865

1 Read J, Johnstone L, Hancock S, Harrop C, Morrison L, Cunliffe S. (2025). A Survey of 1144 ECT recipients, family members and friends: Does ECT work? International Journal of Mental Health. Nursing; http://dx.doi.org/10.1111/inm.70109

2 Read J, Harrop C, Morrison L, Hancock S, Johnstone L, Cunliffe S. (2025). A large exploratory survey of electroconvulsive therapy recipients, family members and friends: What information do they recall being given?. Journal. of. Medical. Ethics. doi: 10.1136/jme-2024-110629

- - - END - - -