

PATTERN OF ADMINISTRATION OF ELECTROCONVULSIVE THERAPY AT A GOVERNMENT MENTAL HOSPITAL IN PAKISTAN

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ABSTRACT

The objective of this study was to analyze the pattern of administration of electroconvulsive therapy in a government mental hospital of Lahore. A retrospective analysis of a total of 202 patients who had received ECT at Government Mental Hospital Lahore from January 2013 to January 2015 was conducted. Patients' information on socio-demographics and treatment status was noted. Most of the patients suffered from Schizophrenia 112 (55.4%) and bipolar affective disorder 53 (26.2%). Almost all of the patients received modified ECT 201 (99.5%) and only one of the patients (0.5%) received unmodified ECT. In contrast to the previous studies conducted in Pakistani government hospitals, almost all the patients here were administered modified ECT which is an encouraging prospect.

INTRODUCTION

With the inception of psychiatric treatments, ECT has been administered to patients suffering from several conditions such as medication resistant schizophrenia, severe depression, catatonia and mania.¹ Based on outdated myths, the practice of electroconvulsive therapy is highly stigmatized and made controversial in media² and the general public and therefore, leads to stigmatization of patients who receive it.³

Administration of unmodified ECT has been very active in Pakistan. According to Minhas et al's analysis on trends of ECT practice in Rawalpindi (2000-2008), 89.9% of the patients were administered unmodified ECT.⁴ This is due to several reasons such as low allocation of funds to the field of psychiatry and mental health and the lack of experienced anesthesiologists and technicians in psychiatry hospitals. However, it is considered an unethical and criminal act, which is against the rights of the patients if carried out without proper consent.^{5,6}

Practice of unmodified ECT is associated with several complications. Past records show that the patients who had received unmodified ECT experienced myalgias, fractures and generalized body aches.⁸ A meta-analysis in the UK in 2003 found that a number of patients also reported significant memory loss.⁷ Although, practice of modified ECT might be humane but it is also associated with several adverse effects therefore, it is need of the hour to appoint professional anesthesiologists and trained physicians to prevent any complications related to anesthesia during electroconvulsive therapy.⁸

According to World Health Organization, neuropsychiatric disorders account for 11.9% of the overall burden of diseases in Pakistan.⁹ These individuals often do not even seek basic treatment due to their poor knowledge regarding psychiatric treatments, fear of side effects and stigmatization by the general community.¹⁰

Despite these alarming statistics, there is a dearth of mental health professionals, low allocation of funds and lack of anesthesiologists in psychiatry hospitals of Pakistan.

The objective of this study was to analyze the pattern of administration of electroconvulsive therapy in a government mental hospital of Lahore.

METHODS

A retrospective analysis of a total of 202 patients who had received ECT at Government Mental Hospital Lahore from January 2013 to January 2015 was conducted. Patients' records containing basic information pertaining to patients' socio-demographic details, history, physical and mental status examination, diagnosis, and status of ECT was reviewed. The ECT records contained information on number and outcome of ECT sessions administered.

Minor adverse effects are only occasionally noted, but a note is usually made for any major event. The ECT had been administered in the presence of a physician, an anesthesiologist and a hospital nurse all under general anesthesia with the exception of one.

RESULTS

There were 150 males (74.3%) and 52 (25.7%) females. Mean age of the patients was 31.5 (8.11) years. Most of the patients suffered from Schizophrenia 112 (55.4%), Bipolar affective disorder 53 (26.2%), Depressive episode and recurrent depressive disorder 14 (6.9%), Dissociative (conversion) disorder 4 (2%) and Acute and transient psychotic disorder 8 (4%) while 11 (5.44%) patient records missed information on diagnoses. Mean number of ECT sessions received by the psychiatric patients was 5.01 (2.36).

Almost all of the patients received modified ECT 201 (99.5%) and only one of the patients (0.5%) received unmodified ECT. Only 16 (6.9%) of the patients left the treatment unadvised while 186 (92.1%) of them completed the prescribed sessions of ECT. All of the patients who completed their course of ECT 186/186 (100%) reported an improvement in their symptoms. Post ECT adverse effects such as seizures and vomiting were reported only by a few patients.

CONCLUSION

This study shows the efficacy of ECT in psychiatric patients. In contrast to the previous studies conducted in Pakistani government hospitals, almost all the patients here were administered modified ECT which is an encouraging prospect. In consonance with other Asian studies, most of the patients receiving ECT were schizophrenics.¹¹

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