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Anaesthesia for electro-convulsive therapy

Information for service users

The information in the leaflet was valid at the date of production Aug 2021 and is due for review in Aug 2023.

Leaflet code: A-ECT-21-007



Helping people to be
the best they can be

Introduction

This leaflet explains a little about what will happen to you when you come into hospital for electro convulsive therapy (ECT). This leaflet should be read in conjunction with the ECT leaflet, which staff will give to you.

You are encouraged to ask your clinician to explain more about ECT, why they think you should have it, and the potential risks and side effects. ECT is only ever provided with an anaesthetic.

Preparation for ECT

Here is a list of things we ask you to do in preparation for your treatment:

- Do not have anything to eat or drink from midnight the night before your treatment except for clear water which you can have up to 6am
- Wear loose, comfortable clothes
- Do not wear earrings, metal hairgrips, jewellery or contact lenses
- Remove heavy make-up and nail varnish from fingernails.
- Avoid smoking or drinking before the treatment

Some prescribed medicines can be taken with a sip of water but please seek advice from your care team.

Who will perform the ECT?

The treatment will be given by an ECT clinician and the anaesthetist will keep you well during it. You will normally meet the anaesthetist immediately before the treatment. They will have been informed about your general health.

If they have any concerns about your general health, they may clarify them with you before your treatment.

What does the anaesthetist do?

Anaesthetists are doctors with specialist training in anaesthetics. There are various types of anaesthesia, but for ECT, a general anaesthetic is always used. This will keep you asleep, and pain free during the treatment.

The anaesthetist will discuss your needs with the ECT team. The anaesthetist will ask questions about your general health, particularly long-standing problems, for example breathing difficulties or heart trouble, and temporary problems like colds. Sometimes you might need extra treatment to make you as fit as possible, even if this may delay your treatment.

The anaesthetist and Operating Department Practitioner will be your anaesthetic team. Before the anaesthetic starts you will be connected to some monitoring equipment. Several stickers will be placed on your head to help to monitor brain activity.

An anaesthetic will then be given via an injection into your hand. You may be asked to breathe some oxygen through a mask as you quickly drift off to sleep. While you are asleep, you will have the treatment. The anaesthetic team will look after you during this time.

The anaesthetist will stay with you during your treatment making sure you are safe to return to the recovery area or ward afterwards.

What sort of questions will the anaesthetist ask me?

The anaesthetist needs to know about your health, to plan a safe anaesthetic. You may be asked about previous operations, and whether you or anyone in your family has had any problems with an anaesthetic, or whether you suffer from any allergies such as skin rashes or breathing problems after taking medicines. The anaesthetist will need to know how much alcohol you drink, and whether you smoke, as this can affect your breathing during the anaesthetic. You will also be asked whether you have any caps, crowns or loose teeth, so that the ECT team can take particular care to protect these while you are asleep. Finally, please bring with you a list of your regular tablets and medicines, including contraceptive pills and medicines you buy yourself at the chemist or supermarket.

How will I feel after my treatment?

Within five to ten minutes you will wake from the anaesthetic. Different people react in different ways, but most are quite sleepy for some time after their treatment. Today, with modern anaesthetics, patients often remember little about going to sleep or the room where they wake up. You may be very sleepy, but you will be cared for by nurses specially trained to look after service users who have just had an anaesthetic.

Risks of anaesthesia

Unexpected problems are very rare, but risk can never be completely removed. If you have other medical problems, the anaesthetist and psychiatrist will discuss these with you. Together you can decide whether to go ahead or not with the treatment.