

Patient experience of electroconvulsive therapy (ECT): a systematic review

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Background and Aims

In the United Kingdom, electroconvulsive therapy (ECT) can be administered according to NICE guidelines for depression, catatonia or severe/prolonged mania (NICE, 2003; NICE, 2009).

ECT was first used in the United Kingdom in 1939 (Kalinowsky, 1939), and its application and practice has been developed and modernised since.

There is a considerable body of research into the efficacy of ECT, and the Royal College of Psychiatrists report that in 2018-2019, 68% of patients were much or very much improved following ECT (RCPsych, 2020).

It is known however that both public perception and media portrayal of ECT is generally negative (Griffiths and O'Neill-Kerr, 2019)

Understanding patient experience of ECT is therefore important to efforts to guide clinical practice, and improve overall patient satisfaction.

A review by Chakrabarti, Grover and Rajagopal (2010) examined 75 studies on the knowledge, experience and attitudes of patients towards ECT and concluded that improvements in the practice of ECT and patient satisfaction were required.

This systematic review analysed data from published literature, to determine patient experience of ECT. The aim was to appraise the research on patient experience of ECT which had been published since 2010.

We conducted a thematic analysis of the results in order to improve our understanding of patient experience and inform future research.

Method

EMBASE (which incorporates MEDLINE and PUBMED), PsychINFO, Cochrane, CINHL and SocIndex were searched to identify relevant studies since 2010.

Studies were included if they were related to patient experience of ECT, peer reviewed, and in English. No exclusion criteria were used to limit any specific methodology or design.

Findings were analysed using a relevant CASP research tool (dependent on study design) to categorise papers as *good*, *fair* or *poor*, providing a comparable rating to aid further discussion and analysis.

Common themes were then identified to provide a narrative description and analysis of the available evidence

Discussion

This review highlights patient experiences of ECT through the identification of seven themes. The findings suggest that patient experience of ECT includes themes of fear, consent, decision making and autonomy.

Patients were found to experience fear and anxiety in regards to the procedure, and studies described patients being poorly informed about ECT.

Issues around the consent process were highlighted including those in which patients did not feel they had a choice with regards to treatment. ECT was associated with memory loss and cognitive impairment which were captured in patient experience following treatment.

In many studies however, ECT was also found to be a tolerable and effective treatment with an improvement in symptoms and patient satisfaction reported. The experience of ECT was affected by knowledge and information provision; and high standards of service provision, including supportive nursing care, were identified as improving overall patient experience.

Limitations

Our study relies on secondary analysis and therefore is largely reliant on the methodology and conduct of other primary and secondary studies.

While a small number (n=29) of articles were identified for inclusion in the final data analysis, this represents the limited quantity of literature available on the topic.

Summary

ECT is a recognised treatment for life-threatening mental health conditions such as depression, catatonia and mania, and by understanding and becoming aware of patient experience and perspective, this can guide new ways of approaching clinical practice of ECT that are patient-centred and promote recovery.

In particular, issues identified regarding information provision and consent, and loss of control and autonomy are key areas that warrant further research, in order to improve both clinical practice and patient experience.

Results

2,424 papers were identified, from which 29 were included in the final analysis.

Following group analysis, seven main themes appeared throughout the studies, which are shown in Figure 1.

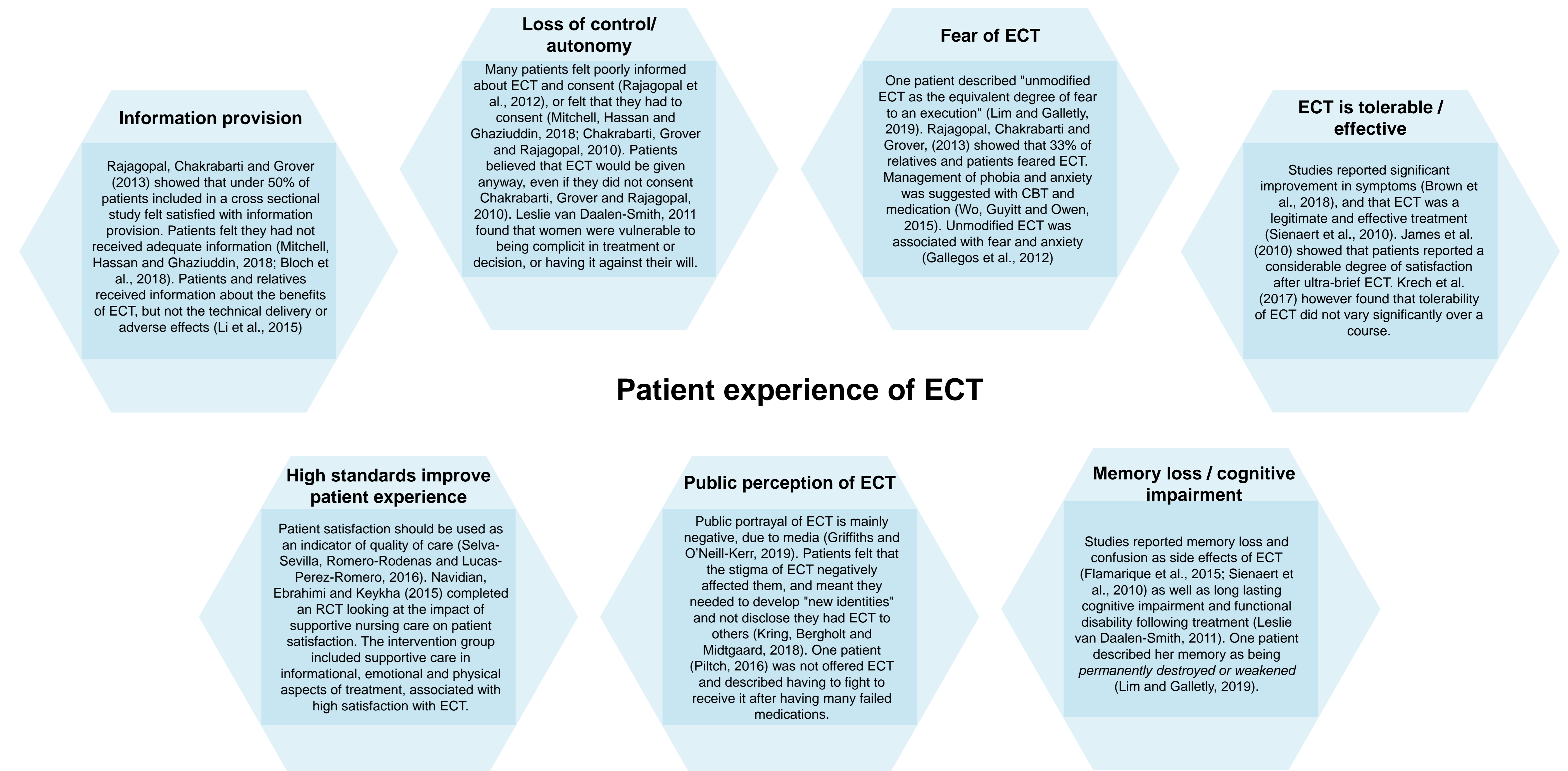


Figure 1: Themes identified within the patient experience of ECT

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