

## In summary

If your psychiatrist recommends that you have electroconvulsive therapy (ECT) you:

- will be provided with information about ECT and can ask questions about it
- have a right to refuse ECT, if you are capable of giving informed consent to ECT
- have a right to obtain medical and legal advice
- have a right to obtain a second opinion from a psychiatrist about the ECT
- have a right to have a friend, family member or lawyer represent you
- can complain about your treatment
- have rights under the *Charter of Human Rights and Responsibilities*.

You can ask a member of the treating team, a friend, a family member, a lawyer, an advocate or a community visitor to help you do these things, or contact one of the organisations described at the end of this booklet.

## Electroconvulsive therapy

### About your rights

This booklet has been given to you because your doctor or psychiatrist has recommended that you would benefit from a course of ECT. It provides information about the treatment and your legal rights and entitlements under the *Mental Health Act 1986*.

Your psychiatrist or a member of the treating team will talk to you about this information and your rights and entitlements and answer your questions.

This information must be explained in a language or manner you can understand. This booklet is also translated into a number of languages. You can ask a member of your treating team if it is available in your preferred language.

## Contents

ECT: your rights and entitlements	2
ECT: treatment information	3
Complaints	5
Important contacts	6

## Telephone information line

You can listen to recorded information about electroconvulsive therapy in a number of languages by calling the telephone information line.

Telephone numbers are listed on the back of this booklet.

The lines are open 24 hours a day, seven days a week.

Copies of the Mental Health Act are available at the mental health service.

If at any time you have questions about this information or your rights, ask someone to explain. You can ask a member of the treating team, a friend, a family member, a lawyer, an advocate or a community visitor.

### **Charter of Human Rights and Responsibilities**

The *Victorian Charter of Human Rights and Responsibilities Act 2006* seeks to promote and protect certain human rights. The charter defines the protected rights and requires public mental health services to act compatibly with these rights.

The charter also specifies when and how rights can be limited by law. For example, under the Mental Health Act you may be detained in a mental health service if it is necessary to protect your health or safety or the safety of others. However, any restrictions on your liberty and any interference with your rights, privacy, dignity and self-respect must be kept to the minimum necessary in the circumstances.

If you have any questions about the charter or how it might affect your treatment, contact one of the organisations described at the end of this booklet.

## **ECT: your rights and entitlements**

Your psychiatrist will talk to you about ECT and explain how it works and how it can help treat your illness.

The psychiatrist will discuss possible side effects and alternative treatments, ask your views and answer any questions you may have.

When you are discussing ECT with your psychiatrist, you can have someone with you for support. It is your right to have a friend, a family member, a lawyer or an advocate represent you before you consent to ECT.

### **Advice and second opinions**

It is your right to get legal and medical advice. It is also your right to get a second opinion about whether you need ECT. Your case manager or psychiatrist can arrange a second opinion from within the mental

health service or they can help you choose your own psychiatrist. If you choose a private psychiatrist you may have to pay a fee.

### **Consenting to ECT**

If you are able to give informed consent, you can only be given ECT if you agree. This means if you are able to give informed consent, you have the right to refuse ECT.

### **Informed consent**

Informed consent is when you agree to have ECT after you have been told:

- what ECT involves
- the benefits, discomforts and risks of ECT
- any beneficial alternative treatments
- the answers to any questions you have about ECT and you have understood the answers
- whether the person recommending ECT or the doctor who will perform the ECT has any financial relationship with the service, hospital or clinic where the ECT will be given
- your legal rights and other entitlements.

Before you decide whether you want to have ECT, it is important that you are well informed. If you have any questions, you should ask your psychiatrist or seek advice from a friend, family member, lawyer or an advocate, or one of the organisations described at the end of this booklet.

If you agree to have ECT, you will be asked to sign a form stating that you have given informed consent.

Your psychiatrist will discuss with you how many treatments are recommended. You can consent to have up to six treatments. If your doctor believes you need more than the initial six treatments, you will be asked to consent to each further course of up to six treatments.

### **Withdrawing consent to ECT**

If you agree to have ECT, but then change your mind, it is your right to withdraw your consent at any time. The treatments will be stopped unless your

psychiatrist believes you are not able to give informed consent. If you want to withdraw your consent, you should talk to your psychiatrist. Remember that you can have a friend, a family member, a lawyer or an advocate with you for support or to represent you.

### **ECT if you are not able to give informed consent**

If you are not able to give informed consent to ECT, your psychiatrist can consent for you if the psychiatrist is satisfied:

- the ECT is necessary; and
- your physical or mental condition is likely to get worse unless you have ECT; and
- the benefits and risks of ECT and any other beneficial treatments have been considered.

Your psychiatrist will talk to you about the ECT before you receive the treatment. Reasonable efforts will be made to notify your primary carer (a family member or friend who is primarily responsible for providing support or care to you) or your guardian (if you have one) about the proposed ECT.

### **Urgent ECT**

If you urgently need ECT because of the nature of your mental illness, it can be given to you without your consent. If this happens, your psychiatrist will explain to you why the treatment is urgent.

## **ECT: treatment information**

This section of the booklet has information about ECT.

ECT has been used as an effective treatment for some severe mental illnesses for many years. Research has demonstrated the effectiveness of ECT. The method has been improved in recent years to get better results with fewer side effects. Your psychiatrist will discuss with you why ECT has been recommended for you and what other beneficial treatments are available. It is important that you are well informed about ECT. Ask your psychiatrist or another member of the treating team if you have any questions or concerns about ECT.

### **What is ECT?**

ECT is a medical procedure performed by doctors. The person is given general anaesthetic and a muscle relaxant. When these have taken full effect, the person's brain is stimulated with a brief, controlled series of electrical pulses using electrodes placed at precise locations on the person's head. This stimulus causes a seizure within the brain that lasts for up to two minutes. Because of the muscle relaxants and anaesthetic, the person's body does not convulse and the person feels no pain. The person awakens after five to ten minutes, much as they would from minor surgery.

ECT usually consists of six to 12 treatments given three times a week over about a month. Your psychiatrist will discuss with you how many treatments you might need.

### **When is ECT used?**

ECT is good for major depression, mania, some forms of schizophrenia, and a small number of other mental and neurological disorders. It may be used when medications have not worked. It may also be used for people who have serious side effects from medications or whose medical condition means they can't take medications safely. ECT is also used in life-threatening situations when medications will not work quickly enough. It is particularly good for those people who are very depressed and those who may be suicidal.

The decision to administer ECT is based on a thorough physical and psychiatric evaluation of the person, taking into account the type of illness, the degree of suffering, the expected result and the prognosis for the person if the treatment is not given. When the risk of suicide is high or when a seriously ill person is unable to eat or drink, ECT can be life-saving.

### **What about pregnancy?**

You must tell the doctor if there is any chance you might be pregnant. The decision whether or not to treat pregnant women with ECT needs to take into account the risks associated with alternative treatments, the risks to the mother and foetus

of withholding ECT and any complications of the pregnancy which may increase the risks of ECT or of the anaesthetic.

### **Can ECT cause brain damage?**

No, there is no evidence that ECT causes brain damage or any harmful changes in personality.

### **What do I need to do before ECT?**

You must not eat or drink any fluid or water for at least six hours before the ECT treatment to make sure your stomach is empty. This is called 'fasting'. If you eat or drink anything within the fasting period, you must tell the nursing or medical staff before the treatment.

### **Can I still take my medication?**

Your doctor may have to change your medication because some medication can affect how well the ECT works. On the morning of the treatment day, some medication may be given, but only with a tiny sip of water.

### **How is ECT done?**

Before your first ECT treatment, you will be examined to make sure you are fit to have a short general anaesthetic and ECT. You will then be asked to wait in a waiting room before being brought into the treatment area where you will lie down on a trolley. The staff will attach the following to you:

- a blood pressure cuff on your arm or leg or both
- a small device over one of your fingers to check pulse and oxygen levels in your blood
- small stick-on electrodes on your forehead and behind your ears to record the brain's electrical activity during the treatment
- a face mask over your nose and mouth to give you oxygen. This is to prepare your body and brain for the extra activity that will happen briefly with the treatment.

Extra equipment may be used if there are extra risk factors which are known from your medical history, examination or tests.

You will have a short general anaesthetic so that you will be asleep and not feel or remember the treatment.

The anaesthetic medication will be injected into a vein to make it work quickly and well. A special anaesthetic doctor (an anaesthetist) will be present and give the anaesthetic. You will also be given a muscle relaxant.

A doctor who has specialised training in ECT will administer the treatment. The doctor puts small electrodes on your scalp and passes a measured amount of electricity to a part of the brain to cause a seizure (fit). The seizure will last up to two minutes. During the treatment, the anaesthetist will continue to give you oxygen via the face mask and monitor your heart rate and oxygen level. The anaesthetist and doctor will treat any reactions to the treatment.

You will not feel or remember any of the actual treatment because you will be asleep due to the anaesthetic medication. Within a few minutes after the treatment, the anaesthetic will have worn off and you will wake up. During this time, you will be moved to the recovery room where you will be looked after until you are awake enough to return to your ward. If you are having day procedure ECT, you may need to wait in the recovery room or a ward for up to several hours to make sure you are ready to go home.

After you wake up, the anaesthetic medication and the seizure will make you groggy for a while. You will usually be ready for a meal about 15–20 minutes after the treatment.

### **What are the risks and benefits of ECT?**

Your psychiatrist will discuss with you the expected benefits of ECT. These will vary depending on the nature and seriousness of your illness, but ECT will generally improve your ability to think and return your emotions to a healthier state.

All treatments have risks and side effects—even no treatment has risks. The risks and side effects of ECT include:

- You might have some side effects from the anaesthetic, such as headache, nausea, vomiting. You should tell the staff looking after you and they will be able to give you some medication to help.
- You might get muscle soreness as a result of either the muscle relaxants or the muscle activity caused by the seizure.

- The anaesthetic will affect your judgment for the first 24 hours. During this time **you must not:**
  - **drive any type of vehicle**
  - **operate machinery, including cooking implements**
  - **make important decisions or sign a legal document**
  - **drink alcohol, take other mind-altering substances or smoke because they may react with the anaesthetic medication.**
- Your short-term memory might be affected:
  - Immediately after ECT most people have a short period of confusion and do not remember the actual treatment.
  - Over the course of ECT, it might be more difficult to remember newly learned information, although this difficulty disappears over the days and weeks following completion of the course of ECT. Some people also report a partial loss of memory of events that occurred during the days, weeks and months before the ECT. While most of these memories usually return over a period of days or months following ECT, some people have reported longer lasting problems with recalling these memories. Memories of events from your past are much less likely to be affected by ECT.
  - Although specific memories from around the time you had ECT might not return, your overall memory will work better in the weeks and months after treatment.
  - Your doctors are aware of possible memory problems and will prescribe treatment methods that give you the best treatment which will avoid affecting your memory as much as possible.
- Some other side effects are less common and some are extremely rare:
  - There is a less common risk of medical complications, such as irregular heart rate and rhythm. There might be a temporary rise in blood pressure and heart rate followed by a slowing of the heart rate.

- As with any general anaesthetic, there is a very small risk of death, but with modern ECT and a short anaesthetic, this risk is now extremely rare. Heart attack, stroke or injury related to muscle spasms are also extremely rare. Resuscitation equipment and emergency procedures are immediately available if anything should go wrong.

### Will I need further treatment?

While your illness may be treated with a course of ECT, the illness might come back once the course is finished. To help prevent this, your doctor will discuss with you any further treatment you may need after the course of ECT ends, such as:

- medication
- maintenance ECT
- psychotherapy.

### Complaints

You should be treated with dignity and respect and be protected from abuse when you receive ECT. If you are unhappy about any part of your treatment or care, you can complain. A good place to start is with your case manager, primary nurse or another member of the treating team, the complaints liaison officer or consumer consultant in the hospital, or the Director of Psychiatry at the mental health service.

You can also complain directly to the Health Services Commissioner on telephone 8601 5200 or the Chief Psychiatrist on 1300 767 299.

If you need help with your complaint, you can ask someone you trust to assist you. This might be a member of the treating team, a friend, a family member, a lawyer or a community visitor.

## Important contacts

The organisations you can contact for assistance and more information are listed below.

- **Community visitors** are people who visit mental health services at least once a month to inquire into the adequacy of services and facilities for the treatment and care of patients, investigate complaints and report on their inquiries and investigations.  
Level 5, 436 Lonsdale Street, Melbourne 3000  
Telephone: 1300 309 337 (cost of local call)  
[www.publicadvocate.vic.gov.au](http://www.publicadvocate.vic.gov.au)
- The **Mental Health Legal Centre** is an independent legal service that specialises in mental health legal issues. It may be able to arrange representation for you at Mental Health Review Board hearings or give advice about other legal matters.  
Level 9, 10-16 Queen Street, Melbourne 3000  
Telephone: 9629 4422  
Telephone: 1800 555 887 (free call-rural areas only)  
[www.communitylaw.org.au/mentalhealth](http://www.communitylaw.org.au/mentalhealth)
- **Victoria Legal Aid** provides free legal advice about a range of issues. It may also provide legal assistance if you cannot afford a private solicitor and may be able to assist with legal representation at Mental Health Review Board hearings.  
350 Queen Street, Melbourne 3000  
Telephone: 9269 0120  
Telephone: 1800 677 402 (free call-rural areas only)  
[www.legalaid.vic.gov.au](http://www.legalaid.vic.gov.au)
- The **Public Advocate** assists, advises and advocates for people with serious complaints about mental health and disability services and treatment.  
Level 5, 436 Lonsdale Street, Melbourne 3000  
Telephone: 1300 309 337 (cost of local call)  
[www.publicadvocate.vic.gov.au](http://www.publicadvocate.vic.gov.au)
- The **Victorian Equal Opportunity and Human Rights Commission** helps people to resolve complaints about discrimination, has specific functions in relation to the *Charter of Human Rights and Responsibilities* and can give advice about the charter.  
Services include an enquiry line and a confidential, free and impartial complaint resolution service.  
Level 3, 380 Lonsdale Street, Melbourne 3000  
Telephone: 9281 7100  
Telephone: 1800 134 142 (free call-rural areas only)  
[www.humanrightscommission.vic.gov.au](http://www.humanrightscommission.vic.gov.au)
- The **Chief Psychiatrist** is a senior Department of Human Services official appointed under the Mental Health Act, with special responsibilities in relation to people receiving mental health services. These include the power to investigate complaints and other matters and to take necessary action, and monitoring the use of ECT in Victoria.  
50 Lonsdale Street, Melbourne 3000  
Telephone: 9096 7571  
Telephone: 1300 767 299 (cost of local call)  
[www.health.vic.gov.au/chiefpsychiatrist](http://www.health.vic.gov.au/chiefpsychiatrist)
- The **Health Services Commissioner** is an independent commissioner who investigates and helps to resolve complaints by health care consumers about health services, including mental health services. The Commissioner can help patients access their health information.  
Level 30, 570 Bourke Street, Melbourne 3000  
Telephone: 8601 5200  
Telephone: 1800 136 066 (free call)  
[www.health.vic.gov.au/hsc](http://www.health.vic.gov.au/hsc)
- The **Ombudsman** investigates complaints about government departments.  
Level 9, 459 Collins Street, Melbourne 3000  
Telephone: 9613 6222  
Telephone: 1800 806 314 (free call-rural areas only)  
[www.ombudsman.vic.gov.au](http://www.ombudsman.vic.gov.au)
- The **Mental Health Review Board** is an independent tribunal that hears appeals from involuntary patients, patients on restricted involuntary treatment orders and security patients who want to be discharged from their involuntary treatment status. It also automatically reviews these patients.  
Level 30, 570 Bourke Street, Melbourne 3000  
Telephone: 8601 5270  
Telephone: 1800 242 703 (free call)  
[www.mhrb.vic.gov.au](http://www.mhrb.vic.gov.au)

You can also ask your case manager or any member of the treating team about other local organisations and support groups that may be able to help you.

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## Printed booklets in the 'About your rights' series:

- Involuntary patients
- Restricted involuntary treatment orders
- Security patients
- Forensic patients
- Electroconvulsive therapy
- Major non-psychiatric treatment
- Non-custodial supervision orders

## Other booklets in the 'About your rights' series:

- Forensic (remand and interim disposition order) patients
- Continuing treatment (section 12A-12D) involuntary patients
- Assessment orders and diagnosis, assessment and treatment orders
- Psychosurgery

These and other booklets are available online at [www.health.vic.gov.au/mentalhealth](http://www.health.vic.gov.au/mentalhealth) in large print. Selected booklets are also available in other languages.

## Telephone information line

You can listen to recorded information about electroconvulsive therapy in a number of languages by calling the telephone information line.

The lines are open 24 hours a day, seven days a week.

English	9679 9838
Arabic	9679 9825
Cambodian	9679 9826
Cantonese	9679 9827
Croatian	9679 9828
Greek	9679 9829
Italian	9679 9830
Macedonian	9679 9831
Mandarin	9679 9837
Serbian	9679 9834
Somali	9679 9832
Spanish	9679 9833
Turkish	9679 9835
Vietnamese	9679 9836

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## Do you require this booklet in another format?

If you require this booklet in another format please speak to your case manager or any member of your treating team and request that they contact us.