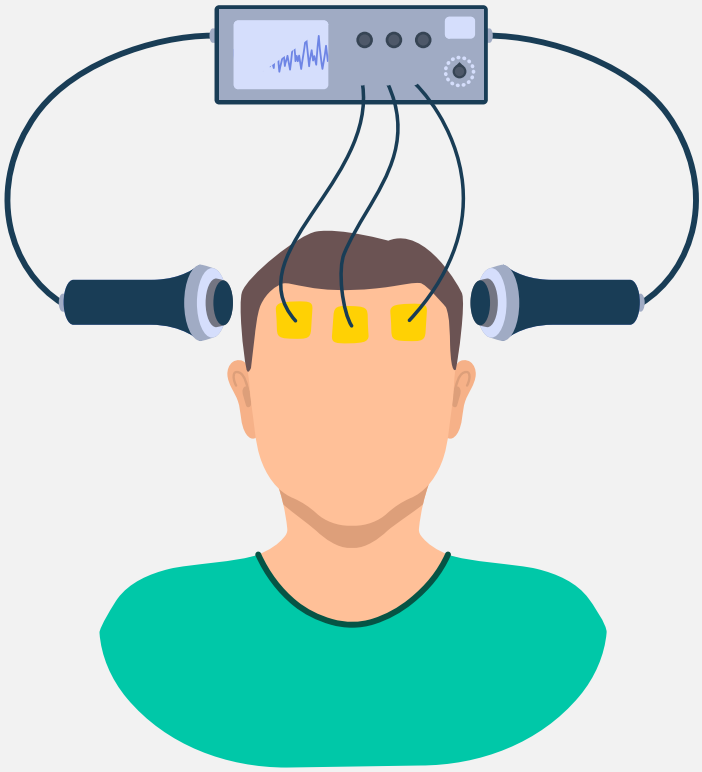
Electroconvulsive Therapy (ECT) for Catatonia

For Families and Caregivers

Treatment for catatonia usually includes medicine first. Many people get better, but some do not improve enough. When medicine is not enough, electroconvulsive therapy (ECT) may be the next treatment option. ECT is safe and works well. Deciding to try ECT can feel like a big step. It is okay to ask questions and take time to understand the plan. The goal is to help the person feel better, do more, and get back to the activities and relationships that matter most to them. This resource provides an overview of ECT and what to expect if it's recommended as a treatment option.



What is ECT?

During ECT, a doctor sends a small, carefully controlled electrical current to the brain while the person is asleep under anesthesia. This causes a brief seizure that can help reset the way the brain's chemicals and signals work.

The person does not feel the seizure and usually does not remember the treatment after.

- It is done in a hospital or medical setting. A team of doctors, nurses, and an anesthesia provider take care of the person before, during, and after.
- The person is asleep and does not feel pain. They get medicine to relax their muscles, so the body stays still.
- After treatment, the person is closely monitored. The person will be moved to a recovery area after treatment. They are monitored for 1 to 2 hours before going home.
- Side effects can happen. The most common are headache, muscle soreness, confusion, and short-term memory problems. These often get better with time.

How Often Is ECT Given?

ECT is given in a series of treatments. Most people have sessions two to three times a week for several weeks.

As the person improves, the treatment may be reduced to twice a week, then once a week. People with autism and catatonia may need more treatments than catatonia patients without autism. Some improve after 10 to 12 treatments. Others may need 30 or more before feeling better.

Who can consent to ECT?

- ECT requires informed consent. In Pennsylvania, that means adults who understand the treatment can give their own consent. Supports like plain language, visuals, and extra time can help them understand what they're agreeing to.
- If an adult has a court-appointed guardian, the guardian must get a judge's approval before agreeing to ECT.
- If someone has a mental health power of attorney, their agent can only agree to ECT if the document specifically allows it.
- Families should talk with the care team and a lawyer or legal aid office to understand the rules for their situation. This can take several weeks to finalize.

Preparing for ECT

There are important safety steps before ECT can begin. These steps help make sure ECT is needed and can be done as safely as possible.

- Schedule a visit with the person's primary care doctor within 90 days before receiving ECT. This visit is to make sure the patient can safely have anesthesia and receive ECT. Routine lab work and an EKG are also usually ordered as a baseline prior to ECT.
- Schedule a dental exam within 90 days before receiving ECT. During ECT, the jaw may tighten for a short time. This could cause damage if there are any preexisting issues with teeth. The dentist will check to make sure there are no concerns and correct any issues before the person receives ECT.
- All medical records from the psychiatric provider also usually need to be sent to the ECT provider prior to ECT.