

Monitoring the formal implementation of a cognitive assessment protocol, and analysis of cognitive outcomes of Electro-Convulsive Therapy (ECT) in a regional psychiatric hospital setting

AIMS

Electroconvulsive therapy (ECT) is one of the oldest psychiatric treatments still in use. Cognitive side effects are well recognised and have been a major source of concern. This study monitors the formal implementation of a cognitive assessment protocol for patients undergoing ECT in a regional psychiatric hospital.

METHOD

Clinical audit of adult in-patients undergoing ECT between November 2017 and December 2018 at the Bloomfield Hospital, Orange abstracted patient demographics, diagnosis and ECT parameters. Cognition (pre and post ECT course) was measured using the Addenbrooke's Cognitive Evaluation-R (ACE-R), and orientation (pre and post ECT sessions) using a standardised 10-item scale.

RESULTS

Thirty-one patients completed a median of 10 ECT sessions (range 5-22; total 324). Implementation of the cognitive assessment protocol was poor, with orientation assessments both pre and post the first ECT session completed for 52% (n=16/31), and ACE-R completed both pre and post-ECT course for 61% (19/31). Of these 19 patients, 12 demonstrated an average 21% increase in ACE-R score (improved cognition), six an average 5% decrease, and one no change.

CONCLUSION

Given the potential cognitive side-effects of ECT, there is a need for proper monitoring. Implementation of the NSW Minimum Standards for cognitive assessment in Bloomfield Hospital indicated scope for improvement, particularly for pre- and post-session orientation assessments. This may reflect possible workforce shortages in a rural setting. A substantial proportion of patients experienced improved cognition which may reflect illness improvement post-treatment. The study results may provide reassurance to patients undergoing ECT in a rural setting.

KEYWORDS

electroconvulsive therapy, side effects, cognitive impairment, orientation



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