

The Impact of Electroconvulsive Therapy (ECT) Wait Times Prior to and During the COVID-19 Pandemic on Patients with Mental Health Disorders: A Scoping Review

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Background

- Approximately 1 in 5 Canadians experience mental illness, most commonly mood disorders
- Several patient populations are not suitable for or are not responsive to pharmacotherapy
- 21% of patients with major depressive disorder suffer from severe treatment-resistant depression
- 10% of patients experiencing psychiatric illnesses are diagnosed with catatonia
- Both severe treatment-resistant depression and catatonia can be effectively treated with ECT
- Long wait times for ECT due to the following factors:
 - Stigma towards ECT
 - Misrepresentation of ECT in the media
 - Unknown mechanism of action
 - Resources in short supply
 - requires anesthetist, operating room, and psychiatrist
- During the COVID-19 pandemic ECT treatments were suddenly halted without notice.
- Currently, the clinical and economic impacts of delaying ECT, both pre- and intra-pandemic are unknown.

Objectives

- Assess the clinical and economic impacts of delaying ECT treatment using Ontario's rich population health databases ('ICES data')
- Conduct a scoping review to search existing literature to answer the following:
 - Sub-study 1: Pre-pandemic access to ECT
 - Sub-study 2: Interruption of Outpatient ECT (due to COVID-19 pandemic)



This image shows a demonstration of ECT.

Methodology Scoping Review

- Search Medline, Embase, PsychINFO, CINAHL, and Scopus for the following keywords:
 - "ECT" and "inpatient" for sub-study 1
 - "ECT", "outpatient" and "maintenance" for sub-study 2
- Includes qualitative and quantitative study designs, and both published and unpublished literature
- Search range: 1946- September 2021
- Screen appropriate articles with two independent reviewers
- Data from included articles will be extracted and charted
- Narrative summary will be written up to address the research questions

Research Process Steps

Reviewed literature and identified research questions through PICO

Met with research librarian to develop search strategy

Finalized keywords and conducted search

Conclusion

- Hypothesize that the results from this study will provide evidence for increasing accessibility to ECT in Ontario by showing the impact of long wait times on patients and the healthcare system.

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1. <https://london.ctvnews.ca/it-may-sound-scary-but-electroconvulsive-therapy-is-saving-lives-1.4787447>
2. National Institute for Health and Clinical Excellence (NICE) (2003). The clinical effectiveness and cost effectiveness of electroconvulsive Therapy (ECT) for depressive illness, schizophrenia, catatonia and mania
3. Knoll, A. D., & MacLennan, R. N. (2017). Prevalence and correlates of depression in Canada: Findings from the Canadian Community Health Survey. <https://doi.org/10.1037/ccp0000103>