

Nordic Association for Convulsive Therapy

The Nurse's Role in Electroconvulsive Therapy (ECT)

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International Society of ECT and Neurostimulation (ISEN) Nursing Subcommittee Members

- Carol Kivler, Board of Directors, NAMI-Mercer County, Consumer Advisory Panel, American Psychiatric Nurses Association
- Australian College of Mental Health Nurses
- International Society for Psychiatric Nurses
- National Association for Lead Nurses in ECT
- Scottish ECT Accreditation Network
- US Nurses (CA, IL, NH, NY, MASS, MI, MO, MN, PA, NC, SC)
- International Nurses (Australia, Canada, Great Britain, Ireland, Wales, Scotland)

Psychiatric Mental Health Nursing

- Specialized area of nursing practice that encompasses the practice of ECT
- Basic and advanced practice nursing roles in nursing practice are described and credentialed within the specialty practice of Psychiatric-mental health nursing

Psychiatric Nurses

- Two-thirds of the total 90,000 PNs were employed in hospitals
- Average age was 51
- 4% were 30 years or younger
- 70% Associate or Diploma

Hanrahan, N. P. (2009). Analysis of the psychiatric mental health registered nurse workforce in the United States. *Journal of Psychosocial Nursing and Mental Health Services Research* 47(5), 1-9.

Hanrahan, N. P., & Gerolamo, A. M. (2004). Profiling the hospital-based psychiatric registered nurse workforce. *Journal of the American Psychiatric Nurses Association*, 20(5), 43-46.

Hanrahan, N. P., Stuart, G. W., Brown, P., Johnson, M., Drucker, C. B., & Delaney, K. R. (2003). The psychiatric nursing workforce: Large numbers, little data. *Journal of the American Psychiatric Nurses Association*, 9, 104-106.

How do Expert ECT Nurses Across the US and Internationally, Describe their Practice?

- APNF funded study
- Descriptive phenomenological study using Husserl's phenomenology and Giorgi's method
- In depth 1-1.5 hour interviews, transcribed and coded by 2 researchers using Atlas ti 6.1 software
- Themes and clinical, demographics analyzed for 20 participants to achieve saturation

Evidence-based treatment advances changing the role of ECT Nurse

- Electrode placement
- Stimulus dosing
- Seizure threshold titration
- Changes in wave form and pulse width
- Use of physiological monitoring
- Choice of anesthetic agents
- Use of “time outs”

Non-procedural factors changing role of ECT nurse

- Expanded roles for nursing (i.e., nurse anesthetist and nurse practitioner)
- Movement from inpatient to outpatient treatment (continuation and maintenance)
- More complex and ill patients requiring increased monitoring and more clinically sophisticated practice (i.e. In ICU)
- Greater regulation
- Advent of novel neuromodulation methods
- Greater attention to treatment-resistance

Review of the Literature

- PubMed, EMBASE, and CINAHL searched between 1938 and 2010 using keywords: *electroconvulsive therapy, electroshock and nursing*
- Bibliographies reviewed for seminal works
- 2 health science librarians consulted for comprehensive search
- Total of 445 nursing-focused manuscripts selected and reviewed

Themes of Expert ECT Nursing Practice

- Knowing the Patient
- Running the Service from Top to Bottom
- A Winning Team
- Need for ongoing education, development of best practices, and research
- Fighting stigma, misrepresentation, and efforts to banish ECT

The Expert ECT Nurse

Pre-treatment

- Outreaches and consults to patients/families about the value of ECT
- Personalizes the preparation/teaching of patients and family relative to their concerns, cost/benefit (i.e, anesthesia, memory loss, incontinence, exposed while wearing gown)
- Orients patients to ECT suite
- Schedules treatments taking into account individualized needs of patients
- Assures that pre-treatment labs, consents, orders are current (One review found 37 different forms needed for compliance!)
- Conducts standardized clinical ratings
- Advocates for patient with post-ictal headache or agitation

Knowing the Patient

- “We had some serious snowstorms this year, so knowing that A.S. lives in a rural area, I made sure to coordinate so she had at least 2 treatments a week”
- The patient said: ‘I smiled when I saw you in the room. I did not recognize anyone else but knew you would make sure that I did not have a terrible headache or complications’

The Expert ECT Nurse-Treatment

Admitting

Treatment

Recovery

Inpatient

Registration
Arrive via escort
More extensive
Review of med/
psych symptoms

Outpatient

Conducts Nursing Eval
Assures Psych Eval
and Anest Eval
Pt gowned

Patient placed on stretcher
Timeout
Check for jewelry and dentures
Intravenous line placed
Blood pressure cuff, oximetry monitor placed
EKG Monitors placed
EEG Monitors placed
Monitor vitals signs
Prepare scalp area
Assess patient while anesthetic agent is delivered
Apply "Cuff technique"
Assess patient while muscle relaxant delivered
Insert bite block
Monitor patient while stimulus delivered
Observe for cessation of fasciculations and document duration/relevant observations concerning seizure
Target time 30mins
Oxygenation resumed
Seizure response evaluated
If inadequate repeat stimulus
Patient transferred to recovery
when breathing on own and stable

Inpatient
45 min

Outpatient
90 min

ECT Treatment Nurse

- Standard 2.2 of ECTAS stipulates: “There is at least one trained nurse in the treatment room.” (Royal College of Psychiatrists)
- Importance of nurses in de-stigmatizing ECT, educating the public, and referring patients for ECT directly related to nursing knowledge and familiarity with the treatment
- Provides nursing and medical education and hands-on experience, promotes positive attitudes and education in nursing schools, implements continuous quality improvement programs, manages ambulatory ECT programs, and provides political advocacy to reshape health policy

Running the Service from Top to Bottom

- “The doctors are busy...every question about ECT (appropriateness, labs, potential complications) goes through me”
- “I check the equipment, assure we are ready for JCAHO, teach the nursing students and medical residents, review P & P, teach in the fellowship program- it is ‘soup to nuts’”

The Expert ECT Recovery Nurse

- Primary patient advocate following treatment when patients still under effects of anesthesia and provides constant care
- Patient monitoring (VS, pulse oximetry, mental status, breathing properly, suctioning, administering O₂, react rapidly to signs of negative changes)
- Assess, re-orient, provide supportive care for post-ictal disorientation, assess safety to ambulate

The Expert ECT Nurse- Post treatment

- Conducting inpatient group psychotherapy to decrease isolation and reduce stigma
- Addressing patient and family concerns about treatment/ side effects and providing education
- Assuring holistic care and coordination of health care providers for vulnerable patients who often have multiple health conditions
- Coordinating future treatment schedules and managing CQI
- Educating Nursing and Medical personnel about ECT
- Increasingly, blending new expertise in brain stimulation methods with expertise in ECT

A Winning Team

- “I have been an ECT nurse for 35 years and I have overseen more than 30,000 treatments. I have had the gratifying experience over and over to see our patients get better”
- “It is so rewarding to see a patient who is in the ICU or similarly debilitated get so much better that he walks out the door waving. ECT does that”
- “Being on the ECT team is like being a starting pitcher for the Yankees- we get used to winning and we like it!”

Fairly Wide Variations

- In practice (i.e., anesthetic, electrode placement, pre-medication with caffeine, use of clinical scales)
- In employment of advanced practice roles (i.e., NP roles in Canada, Australia and New Zealand emerging but primary care-focused)
- In ECT education and training (i.e., apprentice model to completion and creation of fellowships and ISEN courses)

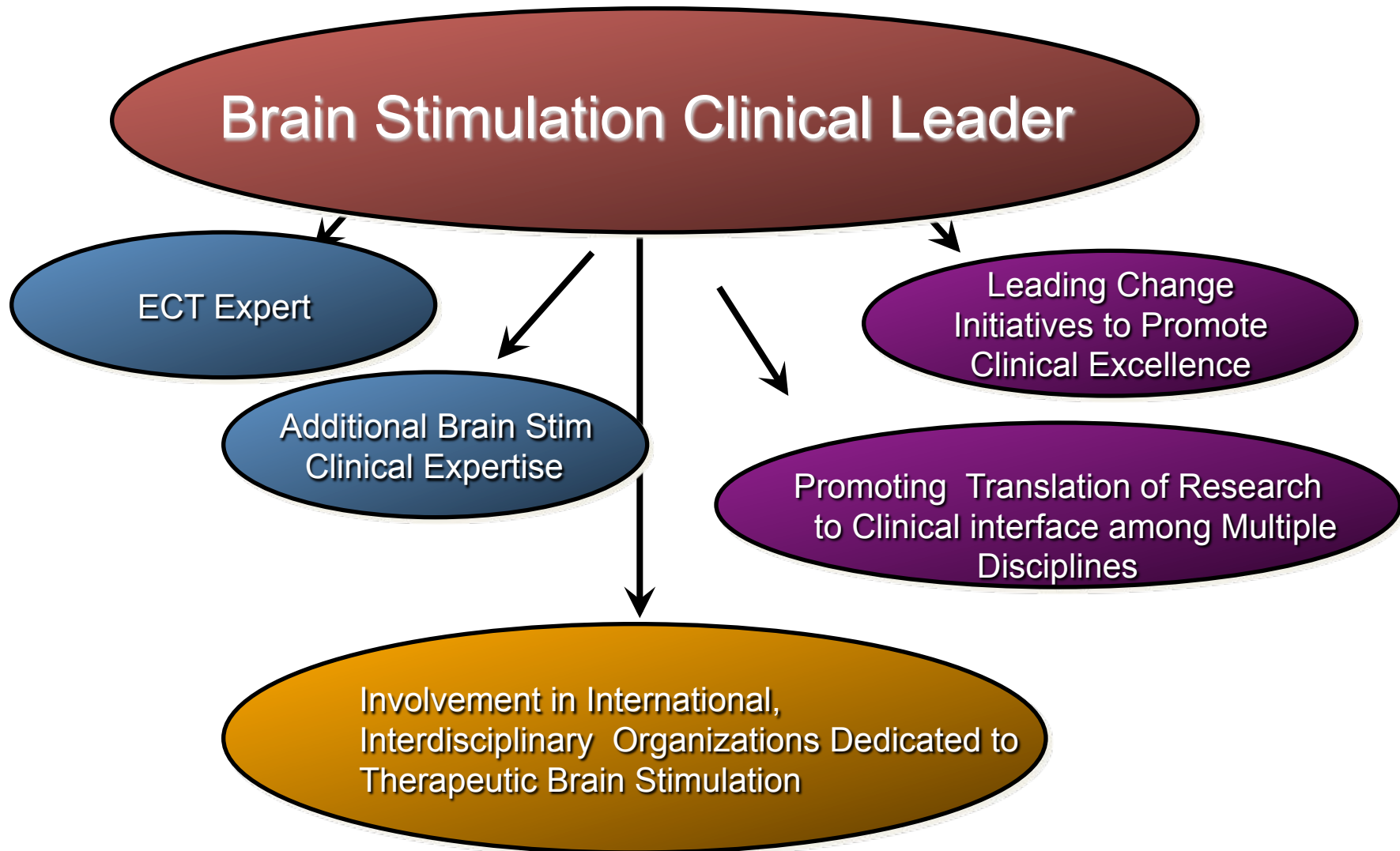
Need for Ongoing Education, Development of Best Practices and Research

- Consumer Interaction and Dialogue on Conference Calls and in Schools of Nursing
- ISEN ECT Certificate Courses
- ISEN Monthly Conference Calls
- University specific fellowships
- NALNECT certification
- SEAN certification
- APNA Workshops in ECT and brain stimulation
- Australian College of Mental Health Nurses
- JAPNA and Journal of ECT

Evidence-based Nursing Practice

- Evidence-Based Nursing Practice does not vary from location to location but instead, involves integrating solid research findings, clinical expertise, and patient preference, and implementing them in nursing practice, in order to increase the quality of patient care
- Goal is to provide the highest quality and most cost-efficient nursing care possible

Evolving Role of ECT Nurse



Fighting stigma, Misrepresentation, and Efforts to Banish or Defund ECT

- Bill 67, Ending Public Funding of Electroconvulsive Therapy Act, 2010, Ontario, Canada
- Growing international networking and sharing of evidence-based nursing practice via ISEN
- Increased scholarship, research, EBP dissemination, advocacy
- Collaboration with APA regarding ECT treatment guidelines
- Collaboration with NAMI and APNA Consumer Advisory Panel about Consumer Concerns



Embedding Consumer and Caretaker's Input Into Guideline Development

- Incorporating the perspective of consumers, caretakers, families, and treating clinicians
- Themes of patient/family inquiries include:
 - How to tell or not tell people about ECT treatment
 - Safety on inpatient psychiatric unit
 - Will ECT help me sleep?
 - How can I access transportation, in-home support for my family member having ECT?

Patient and Stakeholder Engagement



Patient and Stakeholder Engagement

- FDA hearings had many more “anti-ECT” patients
- Why do we not do a better job of reaching out to our patients who benefit from ECT, TMS and other forms of neuromodulation?
- The Patient Centered Outcomes Research Institute (PCORI) and increasingly, NIH, CDC, private foundations, industry and pharmaceutical funders seek patient-centered research

Special Section on Electroconvulsive Therapy, *Journal of the American Psychiatric Nurses Association*, 17(3), 2011.



ISEN Patient Advisory Committee

**Courageous
Recovery
Wellness Model -
Treatment for
Depression**

**"Shocking the Shrink:
A Psychiatrist Undergoes I**

