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A SURVEY OF THE PRACTICE OF ELECTROCONVULSIVE THERAPY IN ASIA

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Background: To describe a comprehensive survey of the practice of electroconvulsive therapy (ECT) in Asia. **Method:** Between 2001 and 2003, a 29-item questionnaire was sent to 977 psychiatric facilities in 45 Asian countries.

Results: Completed questionnaires were returned by 334 (34.2%) institutions in 29 (64.4%) countries. ECT was available in 257 institutions in 23 countries. During the year before the survey, 39,875 patients (62% male) received a mean of 7.1 ECT treatments. Most patients (73.1%) were 18-44 years old; few were < 18 (6.0%) or >64 (4.4%) years old. Indications for ECT were schizophrenia (41.8%), major depression (32.4%), mania (14.0%), catatonia (6.9%), drug abuse (1.8%), dysthymia (1.6%), and others. Brief-pulse ECT devices were used in only 103 (40.1%) institutions. Routine EEG monitoring was conducted in only 59 (23.0%) institutions. Bilateral electrode placement was invariable in 202 (78.6%) institutions. Unmodified ECT was administered to 22,194 (55.7%) patients at 141 (54.9%) institutions in 14 countries. Continuation ECT was available in only 115 (44.7%) institutions in 17 countries. No institution had a formal ECT training program.

Conclusions: The practice of ECT in Asia may appear suboptimal: schizophrenia, not depression, is the commonest indication; most institutions offer sine-wave ECT; unmodified ECT is commonly administered; bilateral electrode placement is invariable in most institutions; EEG monitoring is uncommon; continuation ECT is infrequent; and no formal training in ECT is available. We speculate that the suboptimal practices reflect felt needs, and ground realities in standards of medical care in developing countries, rather than a misuse of ECT.