

Knowledge and attitude towards electroconvulsive therapy among person with mental illness and caregiversvisiting a tertiary care hospital in Marathwada region of Maharashtra.

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ABSTRACT:-Electroconvulsive therapy (ECT) is one of the common treatments in psychiatry, which has higher stigmatization among not only patients undergoing ECT but also common people due to negative attitudes toward this treatment (1). Despite the multiple benefits of this therapeutic approach, it causes anxiety for patients and their family. Hence it is necessary to assess the knowledge and attitude of person with mental illness and caregivers towards ECT, so that we can increase the awareness and bust the myths..

KEYWORDS:ECT, knowledge, attitude, patient, caregiver.

I. INTRODUCTION:

ECT is used in the treatment of many major psychiatric disorders like major depressive disorder, mania, schizophrenia with acute exacerbation or catatonic subtype, schizoaffective disorder and many other psychiatric conditions. Though it is safe and effective, worldwide, the general public has a negative perception of ECT, with regard to its safety and ethics (2-4). One reason for the public's negative views and misunderstanding of ECT may relate to the inaccurate depiction of ECT in movies and TV programs (5). Today ECT has evolved into a modern procedure with a benign side effect profile, which is performed under anaesthesia and the administration of muscle relaxant (6). Despite, the developments and changes that have taken place in the past decades, images drawn from those early years of ECT like unmodified and regressive treatment techniques and their consequent unwanted effects persist in the public's mind.Major goal for all clinicians who work with patients receiving ECT should be to educate the public and those they train about the treatment and to close the gap between reality and distortion (7). Hence it is necessary to assess the knowledge and attitude of person with

mental illness and caregivers towards ECT so that measures can be taken to increase the awareness among them and reduce the stigma associated with it.

AIM:To assess knowledge and attitude towards ECT among person with mental illness and caregivers visiting a tertiary care hospital in Marathwada region of Maharashtra.

II. MATERIAL AND METHODS:

Study design: Cross sectional observational study. **Study setting:** Outpatient Department of Psychiatry at Dept of Psychiatry GMCH Aurangabad.

Study population:The study population included all patients and caregivers visiting Psychiatric OPD of in Government Medical College, Aurangabad.

Inclusion criteria:

Patients and caregivers visiting Psychiatric OPD of in Government Medical College, Aurangabad**Exclusion criteria:**

Not willing to participate in study. Incomplete Questioners.

Sampling technique:Convenient sampling technique used for data collection

Sample Size: n=209 (patients- 107, caregivers- 102)

Approval for the study:

Written approval from Institutional Ethics committee was obtained beforehand. Written approval of Psychiatry department was obtained. After obtaining informed consent from parents of patient, such subjects were included in the study

Methods of Data Collection and Questionnaire:

Predesigned and semi structured questionnaire was used.

Questionnaires included- number of questions under the headings:

A) Sociodemographic details- age, sex, address, education, occupation and marital status.



B) Knowledge about ECT.

C) Attitude towards ECT.

Data entry and analysis:

The data were entered in Microsoft Excel and data analysis was done by using SPSS demo

version no 21 for windows. The analysis was performed by using percentages in frequency tables, Correlation of with various variable p<0.05 was considered as level of significance using the Chisquare test. For every correct answer score 2, wrong answer score 1 and for don't know score 0.

III. RESULTS AND OBSERVATIONS:				
Demographic	Data	Patients	Caregiver	
	Adult	98 (91.59)	78 (76.47)	
Age Group	Senior Adult	9 (8.41)	24 (23.53)	
	Female	30 (28.04)	43 (42.16)	
Gender	Male	77 (71.96)	59 (57.84)	
	Urban	70 (65.42)	61 (59.80)	
Address	Rural	37 (34.58)	41 (40.20)	
	Illiterate	21 (19.63)	25 (24.51)	
	Primary	9 (8.41)	24 (23.53)	
	Secondary	31 (28.97)	17 (16.67)	
	Higher			
	Secondary	30 (28.04)	15 (14.71)	
	Graduate	15 (14.02)	11 (10.78)	
Education	Post- Graduate	1 (0.93)	10 (9.80)	
	Un-employed	37 (34.58)	20 (19.61)	
	Un-Skilled	15 (14.02)	11 (10.78)	
	Semi-skilled	14 (13.08)	30 (29.41)	
	Skilled	36 (33.64)	25 (24.51)	
Occupation	Professional	5 (4.67)	16 (15.69)	
	Un-Married	26 (24.30)	17 (16.67)	
	Married	63 (58.88)	69 (67.65)	
	Separated	8 (7.48)	2 (1.96)	
Marital	Divorcee	6 (5.61)	4 (3.92)	
status	Widow	4 (3.74)	10 (9.80)	

S AND OBSERVATIONS.

(Values in parenthesis is percentages)

 Table 2 : Knowledge Regarding ECT among Patients

	Don't		
Responses of Patients	Know	Yes	No
Do you know that informed			
consent is necessary before	104		2
giving ECT	(97.19)	1 (0.93)	(1.86)
Are there any side effects of	103		2
ECT	(96.26)	2 (1.86)	(1.86)
Do you know that anaesthesia	105		1
is given before giving ECT	(98.13)	1 (0.93)	(0.93)
Do you think that ECT	104		0
damages brain	(97.19)	3 (2.80)	(0.00)
Do you think ECT Damages	105		0
any other body part	(98.13)	2 (1.86)	(0.00)

(Values in parenthesis is percentages)



	Don't		
Responses of Caregiver	Know	Yes	No
Do you know that informed			
consent is necessary before giving	70	28	4
ECT	(68.62)	(27.45)	(3.92)
	78	9	15
Are there any side effects of ECT	(76.47)	(8.82)	(14.70)
Do you k1w that anaesthesia is	69	27	5
given before giving ECT	(67.64)	(26.47)	(4.90)
Do you think that ECT damages	92	6	4
brain	(90.19)	(5.88)	(3.92)
Do you think ECT Damages any	95	0	7
other body part	(93.13)	(0.00)	(6.86)

Table 3	: Knowledge	Regarding ECT	among Caregivers

(Values in parenthesis is percentages)

Fig 1 : Adequate Knowledge and correct attitude towards ECT among patients and caregivers.

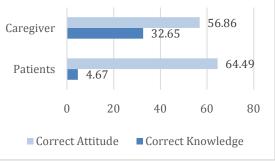


Fig 1 shows correct attitude and correct knowledge among patients and caregivers

Mean score for knowledge among patients & caregivers is 2.

Score above 2 shows correct knowledge about ECT & vice versa.

Mean score for attitude is 8 in patients and 10 in caregivers. Score above 8 in patients and above 10 in caregivers shows correct attitude towards ECT.

Table 4 : Association of patients and caregivers with knowledge about ECT

	KNOWLEDGE		
	Correct	In-correct	p Value
		102	
Patients	5 (4.67)	(95.32)	0.0 0
Caregiver	33 (32.35)	69 (67.64)	

Table 4 shows statistically highly significant incorrect knowledge about ECT is in patients.

Table 5 : Association of	patients and caregivers	with attitude towards ECT
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	ATTITUDE		
	Correct	In-correct	p Value
Patients	69 (64.48)	38 (35.51)	0.10
Caregiver	58 (56.86)	44 (43.13)	

(Values in parenthesis is percentages)

Table 5 shows there is no significant association with attitude towards ECT.



		KNOWLEDGE			
Patients		Correct	In-correct	p Value	
	Adult	4 (83.33)	94 (92.15)		
	Senior			0.453	
AgeGroup	Adult	1 (16.66)	8 (7.84)		
	Female	2 (40.00)	28 (27.45)	0.54	
Gender	Male	3 (60.00)	74 (72.54)		
	Urban	4 (80.00)	66 (64.72)	0.48	
Address	Rural	1 (20.00)	36 (35.29)	0.10	
	Illiterate	1 (20.00)	20 (19.60)		
Education	Primary	1 (20.00)	8 (7.84)		
Education	Secondary	1 (20.00)	30 (29.41)	0.80	
	College	2 (40.00)	44 (43.13)	0.00	
	Un-				
	Married	1 (20.00)	25 (24.50)		
	Married	1 (20.00)	62 (60.78)	0.086	
	Separated	1 (20.00)	7 (6.86)		
Marital	Divorcee	1 (20.00)	5 (4.90)		
status	Widow	1 (20.00)	3 (2.94)		

Table 6 · Factors associated with correct knowledge about ECT among natients

(Values in parenthesis is percentages)

Table 6 shows no any significant association with knowledge about ECT among Patients.

		ATTITUDE		
Patients	1	Correct	In- correct	p Value
	Adult	61 (88.40)	37 (97.36)	0.10
Age Group	Senior Adult	8 (11.59)	1 (2.63)	0.10
	Female	16 (23.18)	14 (36.84) 24	0.132
Gender	Male	53 (76.81)	(63.15)	
	Urban	47 (68.11)	23 (60.52)	
Address	Rural	22 (31.88)	15 (39.47)	0.42
	Illiterate	5 (7.24)	16 (42.10)	
Education	Primary	4 (5.79)	5 (13.15)	
Education	Secondary	17 (24.63)	14 (36.84)	
	College	43 (62.31)	3 (7.89)	0.0000
	Un-employed	7 (10.14)	30 (78.94)	0.000
	Un-Skilled	13 (18.84)	2 (5.26)	-
Occupation	Semi-skilled	12 (17.39)	2 (5.26)	

Table 7 : Factors associated with correct attitude towards ECT among patients



	Skilled	34 (49.27)	2 (5.26)	
	Professional	3 (4.34)	2 (5.26)	
	Un-Married	11 (15.94)	15 (39.47)	
	Married	43 (62.31)	20 (52.63)	0.06
	Separated	7 (10.14)	1 (2.63)	
Marital	Divorcee	5 (7.24)	1 (2.63)	
status	Widow	3 (4.31)	1 (2.63)	

(Values in parenthesis is percentages)

Table 7 shows statistically highly significant association of attitude towards ECT with education and occupation of patient.

		KNOWL		
			In-	р
Caregiver		Correct	correct	Value
		28		
	Adult	(84.84)	50 (72.46)	
	Senior	5		
Age Group	Adult	(15.15)	19 (27.53)	0.16
	Famala	13	20 (42 47)	
	Female	(39.39)	30 (43.47)	
Gender	Male	20 (60.60)	39 (56.52)	0.69
		28		
	Urban	(84.84)	33 (47.82)	
		5		
Address	Rural	(15.15)	36 (52.17)	0.00036
	Illiterate	1 (3.03)	24 (34.78)	
		6		
	Primary	(18.18)	18 (26.08)	
	Secondary	3 (9.09)	14 (20.28)	
		23		
Education	College	(69.69)	13 (18.84)	0.000
	Un-			
	employed	2 (6.06)	18 (26.08)	
		4		
	Un-Skilled	(12.12)	7 (10.14)	
	Semi-	6		
	skilled	(18.18)	24 (34.48)	
	Skilled	9 (27.27)	16 (23.18)	
	Skilled	12	10 (23.10)	
Occupation	Professional	(36.36)	4 (5.79)	0.0000

Table 8 : Factors associated	with correct	knowledge a	bout FCT	among caregivers
Table 6. Factors associated	i with confect	knowledge a	DOUL ECT	among categivers

(Values in parenthesis is percentages)

Table 8 shows Statistically highly significant association of knowledge about ECT with area they are living, education and occupation among caregivers.



		ATTITUDE		
				p Value
Caregiver		Correct	In-correct	•
		45		
	Adult	(77.58)	33 (75.00)	
	Senior	13		0.76
Age Group	Adult	(22.41)	11 (25.00)	
		21		
	Female	(36.20)	22 (50.00)	
		37		0.162
Gender	Male	(63.79)	22 (50.00)	
		40		
	Urban	(68.96)	21 (47.72)	
	_	18		0.03
Address	Rural	(31.03)	23 (52.27)	
Education	Illiterate	9 (15.51)	16 (36.36)	
		11		
	Primary	(18.96)	13 (29.54)	
	Secondary	8 (13.79)	9 (20.45)	
	G 11	30	5 (10, 50)	0.0000.64
	College	(18.96)	6 (13.63)	0.000864
	Un-	10	10 (22 72)	
	employed	(17.24)	10 (22.72)	
	Un-Skilled	6 (10.34)	5 (11.36)	
	Semi-	12	18 (40.00)	0.011
	skilled	(20.68)	18 (40.90)	0.011
	Skilled		10 (22 72)	
	Skilled	(25.86)	10 (22.72)	
Occupation	Professional	(25.86)	1 (2 27)	
Occupation	Un-Married	9 (15.51)	1 (2.27) 8 (18.18)	
		42	0 (10.10)	0.39
	Married	(72.41)	27 (6.13)	0.39
	Separated	1 (1.72)	1 (2.27)	
Marital	Divorcee	3 (5.17)	1 (2.27)	
status	Widow	3 (5.17)	7 (15.90)	
status	wituow	5 (5.17)	7 (15.90)	

Table 9 : Factors associated with correct attitude towards ECT among caregivers

(Values in parenthesis is percentages)

Table 9 shows Statistically significant association of attitude towards ECT with area they are living and occupation among caregivers. Also showing highly significant association with education of caregivers.

IV. DISCUSSION-

- Knowledge is poor in both patients and caregivers but comparatively caregivers have more knowledge.
- Attitude is also negative towards ECT. Those living in urban areas have more positive attitude as compared to those living in rural areas.
- Poor knowledge and negative attitude toward ECT is also found in different studies in past (8-10). It has been found that ECT knowledge

score significantly predicts the ECT attitude score (11).

- Certain studies have found a positive attitude in patients and relatives despite little knowledge of this treatment modality (12-13).
- There is a need to increase knowledge and attitude toward ECT in general public which is by providing more basic information and its effectiveness.

V. CONCLUSION-

- Study found that knowledge is poor among both caregivers and patient.
- Attitude of patients and caregivers who have done schooling till secondary school or higher and those who are skilled workers and



professionals is positive towards ECT. This can be due to increase awareness among them. We can use different forms of media and platforms to increase awareness about ECT in all sections of society, so that the attitude of people changes towards ECT.

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