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Dear Secretary of State,

CALL FOR AN INDEPENDENT REVIEW OF THE USE OF ELECTROCONVULSIVE THERAPY (ECT)

We are writing on behalf of the Association of Clinical Psychologists UK (ACP-UK) to support the call for a review into the use of electroconvulsive therapy.

The Association of Clinical Psychologists U.K. is the professional body for registered Clinical Psychologists. We promote, publicise, support and develop the contributions of clinical psychologists, a well-established and highly trained NHS profession, to improving the health and social care and well-being of the population of the United Kingdom.

Lack of evidence for the effectiveness of ECT

A recent review of ECT research by Read, Kirsch & McGrath (2019) <https://connect.springerpub.com/content/sqrehpp/21/2/64> concludes that there is very little evidence that ECT is better than placebo during the treatment period and no evidence at all beyond the end of treatment. This review has been discussed in Medscape <https://www.medscape.com/viewarticle/919533> and by Professor Richard Bentall <http://cepuk.org/2020/06/04/guest-blog-by-richard-bentall-ect-is-a-classic-failure-of-evidence-based-medicine/> Whilst some people's mental health is reported to be helped by ECT there is no evidence that ECT prevents suicide or ongoing severe depression.

Evidence that ECT can cause harm

The Royal College of Psychiatrists ECT Accreditation Service

<https://www.rcpsych.ac.uk/mental-health/treatments-and-wellbeing/ect> notes that side-effects usually described as cognitive impairment or memory loss can be severe and long-lasting. This is in fact brain damage. In addition, there is little evidence that all people given ECT have fully consented given their capacity at the time. Children and older adults are deemed to be more vulnerable groups and the administration of ECT to mostly women is also of concern. Further, there are significant geographical differences in who is more likely to be offered ECT that are not related to the incidence of severe or resistant depression. As part of a review we would like to see investigation of the populations to whom ECT is administered and the long-lasting outcomes, taking into account socio demographics, in particular race and ethnicity, location and economic status, age and gender.

Lack of evidence that ECT is a treatment of last resort

ECT is often cited as a 'treatment of last resort' to be used when everything else has failed. NICE Guidelines for Depression (2009) recommends in the treatment of severe and resistant depression, before ECT is considered, that:

'The full range of high-intensity psychological interventions should normally be offered in inpatient settings. However, consider increasing the intensity and duration of the interventions and ensure that they can be provided effectively and efficiently on discharge' .

and

'Consider ECT for severe, life-threatening depression and when a rapid response is required, or when other treatments have failed'.

However there seems to be no requirement for systematic evidence or review, or any independent monitoring of:

- the range of psychological or social interventions tried before ECT.
- Pre-ECT measures of functioning including cognitive functioning.
- robust assessment of outcomes beyond three months.

In practice, ECT is often administered without regard to the NICE guidelines and is not a treatment of last resort; this is simply unethical and unacceptable.

Why are we raising this now?

ECT has been controversial and its effectiveness questioned since it started to be used. The recent Cumberlege review into pelvic meshes

(https://www.immdsreview.org.uk/downloads/IMMDSReview_Web.pdf) recommends the appointment of a Patient Safety Commissioner to investigate safety concerns in healthcare. We understand that an All-Party Parliamentary Group 'First Do No

Harm' is being established in September. This new APPG offers an opportunity and a mechanism for the independent review of ECT.

Support for an independent review

By now you will have received the original call for a review <https://www.uel.ac.uk/-/media/staff/r/john-read/call-for-independent-review-of-ect-july-10.ashx> dated 10th July 2020 signed by Dr Sue Cunliffe and Dr Lucy Johnstone on behalf of 40 professionals and people who have received ECT. National MIND, the leading Mental Health charity in England & Wales, also backs this call for a review <https://www.mind.org.uk/news-campaigns/news/mind-is-backing-a-call-to-review-the-use-of-electroconvulsive-therapy-ect/> Other organisations backing this call are Headway, the National Counselling Society, Platform, the Council for Evidence-based Psychiatry, and Psychologists for Social Change Cymru.

Several of your parliamentary colleagues have also said that they have written to you and/or will table parliamentary questions including:

- Sir Iain Duncan-Smith, MP for Chingford and Woodford Green
- Thangam Debbonnaire, MP for Bristol West
- Catherine West, MP for Hornsey and Wood Green
- Andrew Rosindell, MP for Romford
- Helen Whately, MP for Faversham and Mid Kent
- Steve Brine, MP for Winchester and Chandler's Ford

In summary, ACP-UK, the professional body representing clinical psychologists, joins numerous other organisations in the concern there is insufficient evidence to support the routine use of ECT and calls for a major review.

We look forward to hearing from you at your earliest convenience.

Yours sincerely,



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