



FULL TEXT LINKS



Int J Geriatr Psychiatry. 2015 Mar;30(3):265-73. doi: 10.1002/gps.4137. Epub 2014 May 16.

Safety and utility of acute electroconvulsive therapy for agitation and aggression in dementia

Deepa Acharya ¹, David G Harper, Eric D Achtyes, Stephen J Seiner, Jack A Mahdasian, Louis J Nykamp, Lesley Adkison, Lori Van der Schuur White, Shawn M McClintock, Manjola Ujkaj, Donald A Davidoff, Brent P Forester

Affiliations

PMID: 24838521 PMCID: PMC4524287 DOI: 10.1002/gps.4137

[Free PMC article](#)

Abstract

Objective: Agitation and aggression are among the most frequent and disruptive behavioral complications of dementia that contribute to increased cost of care, hospitalization, caregiver burden, and risk of premature institutionalization. This current study examined the safety and efficacy of electroconvulsive therapy (ECT) as a treatment for behavioral disturbances in dementia. We hypothesized that ECT would result in reduced agitated and aggressive behaviors between baseline and discharge.

Methods: Twenty-three participants admitted to McLean Hospital (Belmont, MA, USA) and Pine Rest Christian Mental Health Services (Grand Rapids, MI, USA), with a diagnosis of dementia who were referred for ECT to treat agitation and/or aggression, were enrolled in the study. We administered the Cohen-Mansfield Agitation Inventory-Short Form, Neuropsychiatric Inventory-Nursing Home Version, Cornell Scale for Depression in Dementia, and the Clinical Global Impression Scale at baseline, during, and after the ECT course.

Results: Regression analyses revealed a significant decrease from baseline to discharge on the Cohen-Mansfield Agitation Inventory ($F(4,8) = 13.3$; $p = 0.006$) and Neuropsychiatric Inventory ($F(4,31) = 14.6$; $p < 0.001$). There was no statistically significant change in scores on the Cornell Scale for Depression in Dementia. The Clinical Global Impression scores on average changed from a rating of "markedly agitated/aggressive" at baseline to "borderline agitated/aggressive" at discharge. Treatment with ECT was well tolerated by most participants; discontinuation of ECT occurred for two participants because of recurrence of agitation and for three participants because of adverse events.

Conclusions: Electroconvulsive therapy may be a safe treatment option to reduce symptoms of agitation and aggression in patients with dementia whose behaviors are refractory to medication management.

Keywords: ECT; aggression; agitation; dementia; electroconvulsive therapy.

Copyright © 2014 John Wiley & Sons, Ltd.

Figures

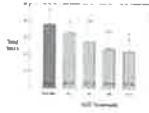


Figure 1 Cohen-Mansfield Agitation Inventory *=p

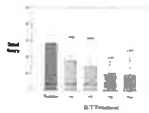


Figure 2 Neuropsychiatric Inventory ***=p <.001>

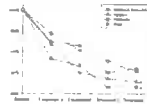


Figure 3 Percent of Symptoms Remaining in...

Related information

[MedGen](#)

LinkOut - more resources

Full Text Sources

[Europe PubMed Central](#)

[Ovid Technologies, Inc.](#)

[PubMed Central](#)

[Wiley](#)

Other Literature Sources

[scite Smart Citations](#)

Medical

[MedlinePlus Health Information](#)