

2 The use of electroconvulsive therapy for people with Intellectual Disability – Clinicians, patients and carers perspective. (A literature review)

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Introduction: Despite a higher risk of developing mental illness the evidence for electroconvulsive therapy in people with intellectual disabilities is sparse. Most of the evidence comes from case reports or series. Although these cases mostly conclude with positive outcomes, due to limitation of evidence there is a degree of caution against the generalizability of electroconvulsive therapy practice in this group. Conversely, the deferral and degree of disturbance before electroconvulsive therapy is administered to people with intellectual disability with mental impairment as compared to people without intellectual disability and mental impairment is also of clinical importance as this may unnecessarily delay or deny a treatment opportunity.

Method: The review followed the Preferred Reporting Items for Systematic Reviews and Meta-Analysis (PRISMA) checklist. To reduce reporting bias three databases PsychINFO, MEDLINE and EMBASE from 2000 – present were used for a comprehensive search strategy using Cheshire and Wirral NHS Foundation Trust Healthcare and Management Databases. The key words were '(ECT)' OR '(Electroconvulsive therapy)' AND '(Intellectual disabilit*)' OR '(Learning disabilit*)' OR '(mental retard*)'. Records were limited to those in English language, humans and ages 18 and over.

Results: The main themes that emerged from the literature can be expanded via data collection and can be categorised into; Clinical, legal and ethical considerations. These will be added in the form of statements.

Conclusion: It is envisaged that the comprehensive overview of the data will form a communication bridge among clinicians, their patients and the Trust. It will also be a mode of reflection for current practices, identification of gaps for improvement and provision of effective interventions for the benefit of our patient cohort. Furthermore, it will allow an opportunity to listen to our patients and their carers, empower them and promote awareness to take an active role in their treatment choices and recovery.