

ATTITUDES OF MEDICAL STUDENTS TO ELECTROCONVULSIVE THERAPY

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INTRODUCTION

Electroconvulsive Therapy (ECT) is an effective, quick-acting and safe treatment for many treatment-resistant psychiatric disorders [1]. Despite this, its use has declined in recent years [1], possibly due, in part, to inadequate education of health professionals and inadequate training [2,3].

This study assesses how the current training curriculum affects the attitudes of medical students to ECT. We also investigate the association between students' attitudes and the possible influence asserted by the students' gender, age, academic standing, and possible plans for a future career in psychiatry. These factors have largely been disregarded by other studies which have concentrated mainly on introducing, and assessing the effectiveness of, educational interventions.

AIM

This study aims to determine:

1. correlates of baseline attitudes to ECT
2. whether specific forms of ECT teaching during students' placement improved their attitudes to ECT.

METHOD

This study was conducted in Queen's University Belfast and agreed with their ethics committee. Participants were fourth year medical students on psychiatry placement.

At the beginning of the placement, participants completed a questionnaire capturing background information and baseline attitudes to ECT.

In the second half of their placement, a second questionnaire recorded the educational and clinical experience gained on ECT during placement (for example lectures, tutorials, informal teaching, observing ECT and interacting with ECT patients), in addition to attitudes to ECT at this timepoint.

A positive attitude to ECT was defined as scoring agree/strongly agree on a 5-point Likert scale to the statement "I would recommend ECT for a patient if clinically indicated".

A positive shift in attitude was defined as an improvement in attitude of ≥ 1 point on the same Likert scale.

RESULTS

187 students were interviewed at both time points.

At the outset of the psychiatry placement:

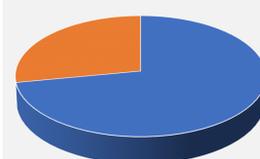
- 66% of students reported a positive attitude to ECT.
- Positive attitude was associated with age: 72% of students under 24 had a positive attitude to ECT vs 58% of students 24 and over ($\chi^2=3.5$; $P<0.05$).
- Positive attitude was associated with prior knowledge of ECT: of students who had previously attended a lecture on ECT ($n=117$) 83% had a positive attitude to ECT vs 42% of those who had not previously attended a lecture ($\chi^2=33.5$; $P<0.001$).

At time-point two:

- Attitudes to ECT significantly improved during the placement (66% vs 94% positive; $t=7.97$; $P<0.001$).
- Students who attended a lecture on ECT during the psychiatry placement were more likely to have a positive shift in attitude (67% vs 49%; $F=6.0$; $P=0.01$).
- No other specific teaching modality including observing ECT was associated with a positive shift in attitude.

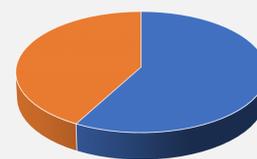
Factors associated with positive attitude to ECT

Aged Under 24



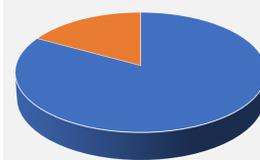
Positive Attitude
Non-Positive Attitude

Aged 24 and over



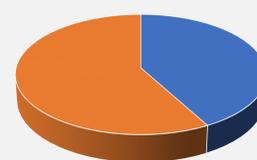
Positive Attitude
Non-Positive Attitude

Students who attended a lecture on ECT prior to placement



Positive Attitude
Non-Positive Attitude

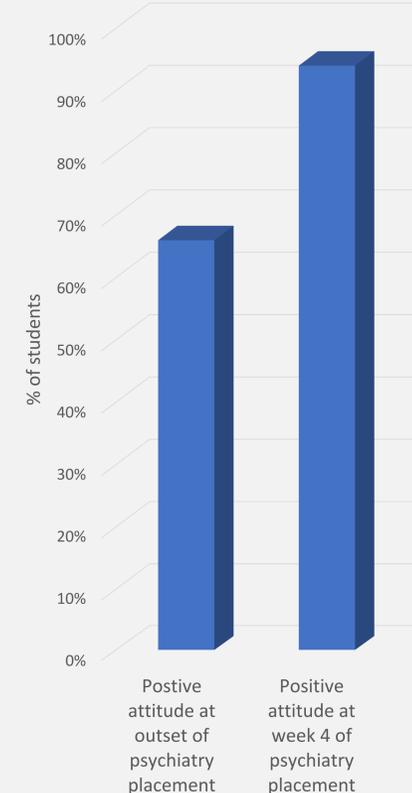
Students who had not attended a lecture on ECT prior to placement



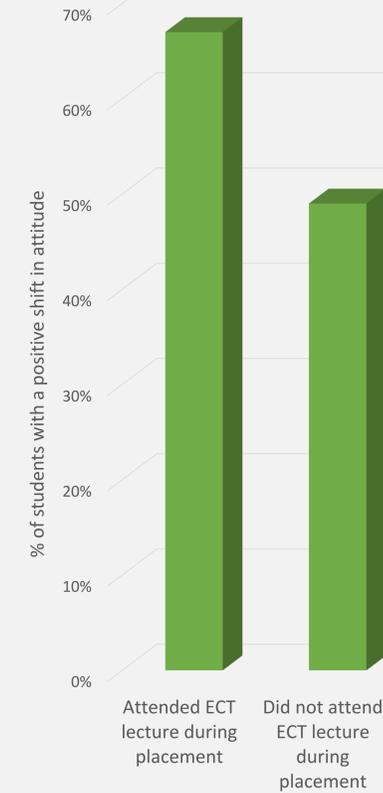
Positive Attitude
Non-Positive Attitude

Change in attitudes to ECT during placement

Attitude of students at outset and at week 4 of psychiatry placement



Positive shift in attitudes



CONCLUSIONS

We conclude that undertaking a psychiatry placement and particularly having a lecture on ECT significantly improves attitudes of medical students to ECT. It is therefore important that lectures on ECT are included in the medical undergraduate curriculum to allow students to be accurately informed about this essential treatment for a number of psychiatric disorders.

REFERENCES

1. Sackeim HA. Modern electroconvulsive therapy: vastly improved yet greatly underused. *JAMA Psychiatry*. 2017; 74(8):779-780.
2. Halliday G, Johnson G. Training to administer electroconvulsive therapy: a survey of attitudes and experiences. *Aust N Z J Psychiatry*. 1995; 29(1):133-8.
3. Duffett R, Lelliott P. Junior doctors' training in the theory and the practice of electroconvulsive therapy. *Psychiatric Bulletin*. 1997; 21(9):563-565.

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