

In 2007, Harold A. Sackeim and his colleagues published (in the journal 'Neuropsychopharmacology') the results of a study which followed 250 ECT patients in New York City hospitals. The study found that the most commonly used type of ECT, bilateral, does cause permanent memory loss, as patients have long complained, and results in mental impairment, especially in women and elderly patients. Dr. Sackeim is co-author of more than 200 publications relating to electroconvulsive therapy (ECT) and has researched it extensively for well over three decades.

## **Electroconvulsive Therapy Causes Permanent Amnesia and Cognitive Deficits, Prominent Researcher Admits**

<http://www.virtualpsychcentre.com/news.asp?artid=9017>

### **Abstract**

In a stunning reversal, an article in the journal *Neuropsychopharmacology* in January 2007 by prominent researcher Harold Sackeim of Columbia University reveals that electroconvulsive therapy (ECT) causes permanent amnesia and permanent deficits in cognitive abilities, which affect individuals' ability to function.

"This study provides the first evidence in a large, prospective sample that adverse cognitive effects can persist for an extended period, and that they characterize routine treatment with ECT in community settings," the study notes.

### **Complete Article**

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For the past 25 years, ECT patients were told by Sackeim, the nation's top ECT researcher, that the controversial treatment doesn't cause permanent amnesia and, in fact, improves memory and increases intelligence. Psychologist Sackeim also taught a generation of ECT practitioners that permanent amnesia from ECT is so rare that it could not be studied. He asserted that most people who said the treatment erased years of memory were mentally ill and thus not credible.

The National Institute of Mental Health (NIMH) estimates that more than 3 million people have received ECT over the past generation. "Those patients who reported permanent adverse effects on cognition have now had their experiences validated," said Linda Andre, head of the Committee for Truth in Psychiatry, a national organization of ECT recipients.

Since the mid-1980s, Sackeim worked as a consultant to the ECT device manufacturer Mecta Corp. He never revealed his financial interest in ECT to NIMH, as required by federal law, and, until 2002, did not reveal it to New York officials as required by state law. *Neuropsychopharmacology* has endured negative publicity over its failure to disclose financial conflicts of journal authors, resulting in the editor's resignation and a promise to disclose such conflicts in the future; yet there is no disclosure of Sackeim's long-term relationship with Mecta, nor did Sackeim disclose his financial conflict when his NIMH grant was renewed to 2009 at approximately \$500,000 per year.

The six-month study followed about 250 patients in New York City hospitals, an unusually large number; most ECT studies are based on 20 to 30 patients. Sackeim's previously published studies were short term, making it impossible to assess long-term effects. "However, in other contexts over the years -- court depositions, communications with mental health officials, and grant protocols -- Sackeim has claimed to follow up patients for as long as five years. This raises serious questions as to how long he has actually known of the existence and prevalence of permanent amnesia and why it wasn't revealed until now," Andre said.

Besides finding that ECT routinely causes substantial and permanent amnesia, the study contradicts Sackeim's oft-published statements that ECT increases intelligence and that patients who report permanent adverse effects are mentally ill.

"The study is a stunning self-repudiation of a 25-year career," Andre said.

(Source: Neuropsychopharmacology : Columbia University : January 2007.)

<http://www.virtualmedicalcentre.com/news/electroconvulsive-therapy-causes-permanent-amnesia-and-cognitive-deficits,-prominent-researcher-admits/9017>

] ['The Cognitive Effects of Electroconvulsive Therapy in Community Settings'](#), Sackeim, et al, 'Neuropsychopharmacology', 2007