

	Sex	Age	Dx (es)	Specific Symptoms	Age of onset	Psychiatric comorbidities	Medical comorbidities and past med history	Psychiatric medication trials	ECT (# sessions, electrode placement)	Outcome (1 month)	Description	Long term outcome
1	F	50	CD	Gait disturbance and extremities tremor	42	MDD	Nil	<u>Current:</u> CIT, NOR, VENX, QUE, OLZ <u>Past:</u> CZM, TOP, DEX	12, RUL/BF	Improved	Improvement in tremor Subjective improvement in depression	Improvements sustained for one year after ECT.
2	F	36	CD	Quadriplegia, bowel and bladder incontinence, pseudoseizures	23	MDD, PTSD, DA	HTN	<u>Current:</u> BAC, CZM, GAB, QUE, VENX <u>Past:</u> CIT, DZM, RISP	22, RUL/BF	Improved	Improvement in quadriplegia and in depression (-6 on GDS)	Lost to follow-up
3	M	44	CD	Episodic confusion and cognitive dysfunction pseudoseizures, dyskinesia	25	Nil	Nil	<u>Current:</u> BUPR, FLUX, LITH, LRZ, LEVM, QUE <u>Past:</u> CZM, LIO, RISP, VENX, VIT B12	12, RUL/BF	Improved	Improvement in depression (-12 on GDS), dyskinesia and episodic confusion	Improvement sustained at least 5 months post ECT.
4	F	44	CD	Cognitive dysfunction, mutism, pseudoseizures, gait disturbance, pain,	41	MDD	History of TBI	<u>Current:</u> FLUX, DEX, OXYC, PHYN, RISP <u>Past:</u> CZM, DLX, ECIT, GAB, LRZ, MTP, QUE	17, RUL/BF	Improved	Improvement in depression and gait disturbance	Lost to follow-up
5	M	49	CD	Cognitive dysfunction, extremities weakness, IBS	41	MDD, GAD, OCD	History of viral encephalitis	<u>Current:</u> Nil <u>Past:</u> FLUX, SERT	10, BF	Improved	Improvement in depression(subjectively, +2 on GDS) and in mobility	Symptoms relapsed 1 month after ECT, requiring re-admission.
6	M	62	CD, PD	Extremities weakness, hypoesthesia in lower extremity, chronic headache, pain in neck, back, shoulder	49	MDD, PTSD, SP, PDNOS	History of MI, disc herniation	<u>Current:</u> CIT, RISP, TRZ <u>Past:</u> BUPR, NOR, OLZ, SERT	4, BF	Improved	Improvement in depression and in weakness	Improvement sustained for 2 months, then relapsed, requiring readmission and second regiment of ECT.
7	F	64	CD, SMD, PD	Pan-corporeal pain x7 years, severe nocturnal spasms	57	MDD, ADNOS	History of TBI	<u>Current:</u> TRZ, DZM, COD <u>Past:</u> Nil	15RUL/BF	Improved	Improvement in depression and in nocturnal spasm	Improvement maintained for 6 weeks post-ECT. Outpatient maintenance ECT required to maintain improvement
8	F	38	CD	Decreased balance, hemiparesis, decreased coordination	35	MDD, OCPD, ADNOS	Nil	<u>Current:</u> DESP, ZOPL <u>Past:</u> APZ, CIT, DEX, ECIT, NOR, PRX, TMZ, TZL, VEN	13, RUL	No change, ECT was discontinued	Improvement in depression (-14 on BDI), no change in somatic symptoms	Lost to follow-up
9	F	35	CD, PD	Extremities pain, vertigo, decreased vision	32	MDD, PTSD,	History of malaria	<u>Current:</u> BUPR, CZM, OXA, SERT <u>Past:</u> AMTP, CIT, MIR, QUE, VEN	13, RUL/BF	Improved	Improvement in vision, in vertigo, in movement and in depression	Symptoms improvement sustained for two months, then relapsed requiring re-admission and more ECTs.
10	F	65	CD, PD	Paresthesia in right fingers, stress incontinence, right parieto-occipital pain	56	MDD, alcohol use disorder, ADNOS	Hyperthyroidism, GERD, history of pelvic fracture, history of abdominal hernia, hysterectomy	<u>Current:</u> ESTR, FLUX, LEVT, MIR, RISP <u>Past:</u> APZ, CZM, NITZ, OXYB, OXC, PIM, SERT, TRZ, VEN, ZOPL	21, RUL/BF	Improved	Improvement on all conversion symptoms and in depression	Readmitted one year after for adjustment disorder, no ECT
11	F	39	CD	Paresthesia, aphasia, decreased balance, clumsiness, pseudoseizures, lower extremity muscles spasm, hemiparesis, urinary incontinency	34	MDD	History of herpes simplex infection, asthma, history of PID, IBS, history of uterine cancer	<u>Current:</u> DEX, ESZP, FLUX, LRZ, RISP, TEGA, VAPR <u>Past:</u> AMTP, BUPR, CIT, DESP, DOX, MIR, NOR, OLZ, TOP, TRZ	9, RUL	Improved	Improvement in depression, in pseudoseizures	From 2006 -2011, 2 other admissions for major depression, pseudoseizures waxes and wanes over the years, no other course of ECT
12	F	56	CD	Decreased vision, vertigo	49	MDD, PaD, PTSD, DA, PDNOS	DM2, DLP, history of TBI, history of seizure disorder, asthma	<u>Current:</u> CIT, CMZ, CZM, MIR, OLZ, PHYN <u>Past:</u> LIO, TOP, VEN	11, RUL/BF	Improved	Improvement in depression and in vision	Lost to follow-up

13	M	60	CD, PD	Involuntary movement of leg and trunk, severe low back pain	50	MDD	Sleep apnea, hyperthyroidism, history of bodily trauma, history of coccyx fracture, abdominal hernia	<u>Current:</u> LIO, PRX, QUE, ZOPL <u>Past:</u> GAB, MORP, NOR, SERT, TRZ	14, RUL/BF	Improved	Improvement in involuntary movement.	Significant deterioration 2 months following discontinuation of ECT, requiring re-admission
14	F	53	CD, PD	Involuntary movements, muscle weakness and spasms, paresthesia, abnormal gait, chronic pain	50	MDD, PTSD	Hyperthyroidism, ovarian cysts, history of cholecystectomy	<u>Current:</u> PREG, MTPZ, LIO <u>Past:</u> AMTP, BUPR, CYCP, PRX, VEN	13, BF	Improved	Improvement in all conversion symptoms and depression, symptoms relapsed 2 weeks following discontinuation of ECT	Over the years, patient required multiple course of ECT for severe depression +/- psychosis.
15	M	56	CD, PD	Episodic leg weakness, urinary incontinence, chronic pain in extremities	53	MDD	Sleep apnea, HTN, DLP, obesity, DM2, peripheral neuropathy, history of uvuloplasty, meningeal encephalitis	<u>Current:</u> APZ, FLUX, MORP, PHYN, RISP <u>Past:</u> BUPR, CIT, DEX, FLUV, LRZ, MTP, PRX, SERT, TRZ, VEN, ZOPL	11, BF	Improved	Improvement in pain and in function (i.e. ambulation) and in depression	Lost to follow-up
16	M	41	CD	Pseudoseizures	39	MDD, PDNOS, ADNOS	Migraine, HTN, DLP, GERD, asthma, history of eye injury, strabismus, quadrantanopsia	<u>Current:</u> IMIP, LITH, LOX, LRZ <u>Past:</u> BUPR, CLOZ, DEX, HAL, LIO, MIR, OLZ, PRX, VAPR, VEN	14, BF	No change	No change in pseudoseizures and other psychiatric symptoms	Lost to follow-up
17	F	19	CD	Pseudoseizures	18	MDD, DD, PTSD, ADNOS, BPD	Ovarian cysts, history of TBI	<u>Current:</u> OLZ, OXA, MIR, VEN <u>Past:</u> CIT, CZM, GAB, PHYN	7, RUL	Improved	Decrease frequency of pseudoseizures, improvement in depression	Improvement sustained for less than 6 months following discontinuation of ECT
18	F	43	CD, PD	Involuntary movements, tremors, whole body pain after MVA	32	MDD, PTSD	Fibromyalgia, psoriasis, asthma, thoracic outlet syndrome, history of TBI	<u>Current:</u> BAC, CIT, OXYB, PREG, RISP, SERT, TRZ <u>Past:</u> BUPR, FLUX, GAB, NOR, OXYC, PRX	13, RUL	Improved	Improvement in pain, in involuntary movement and in depression (-20 on BDI). Pain returned 10 days post-ECT	Chronic course of illness, lost to follow-up
19	F	35	PD	Pan-corporeal pain	33	MDD, PDNOS	Fibromyalgia, history of seizure disorder, lung lobectomy	<u>Current:</u> CZM, ECIT, GAB, ZIPR <u>Past:</u> DLX, OLZ, PIM, RISP	6, RUL	Worsened	Pain worsened	Readmission 1 year after for PD
20	M	50	SDNOS	IBS	22	MDD, SP	DM2, peripheral neuropathy, DLP, asthma, history of TBI	<u>Current:</u> BUPR, MTP, TRZ, MTP <u>Past:</u> CLOM, DEX, NOR, PRX, SERT, VAPR, VEN	10, RUL	No change	No significant change, stable mood symptoms (-5 on BDI)	Second course of ECT with no significant clinical benefits
21	F	38	CD, PD	Pain, right arm weakness	16	MDD, PDNOS	RSD, migraine, endometriosis (hysterectomy)	<u>Current:</u> AMOX, LOX, NITZ, NOR, TRZ, VAPR <u>Past:</u> DEX, DOX, GAB, PIM, PREG, QUE, TMZ, TOP	10, RUL/BF	Worsened	Pain symptoms worsened, Improvement in depressive and psychotic symptoms	Two months post-ECT, patient requested second course of ECT for mood
22	F	43	CD	Aphasia, right hemiparesis	41	MDD, PTSD	Arthritis, DM2, HTN, peripheral neuropathy, history of pneumonitis, cholecystectomy, hysterectomy	<u>Current:</u> CIT, CZM, GAB, OXYC, QUE, ZOPL <u>Past:</u> OXA, TRZ, VEN	11, BT	Improved	Significant improvement in somatoform symptoms, and in depression, no longer require assistance for ADLs	Pt required ongoing maintenance ECTs.
23	M	56	PD	Severe jaw/facial, right body pain	51	MDD, PDNOS, SP	HTN, DLP	<u>Current:</u> BAC, FLUX, GAB, MIR, NOR <u>Past:</u> N/A (missing data)	12, RUL/BF	Worsened	Pain symptoms worsened, some improvement in depressive symptoms	Lost to follow-up
24	M	45	CD, PD	Aphasia, weakness, gait abnormalities, paresthesia, stool incontinence, pan-corporeal pain	43	MDD, ADNOS	Arthritis, history of nose surgery, cholecystectomy, abdominal hernia, appendicitis	<u>Current:</u> QUE, CZM, NOR, QUE, SERT <u>Past:</u> BUPR	8, RUL	Improved	Improvement in somatoform and mood symptoms	Lost to follow-up

25	M	52	PD	Chronic pain	45	MDD, PTSD, ADHD, ADNOS	Sleep apnea, HTN, DLP, obesity, tinnitus, GERD, history of hip replacement, TBI	<u>Current:</u> AMTP, BUS, FLUX, PREG <u>Past:</u> APZ, BUPR, DEX, GAB, MORP, MTP, QUE, RISP, ZOPL	20, RUL, BF	Improved	Improvement in pain and in depression	Symptoms relapsed at 6 months follow-up, requiring further ECTs
26	M	74	CD	Gait abnormalities, head nodding, body tremor	53	MDD	Peripheral neuropathy, HTN, GERD, COPD, history of knee surgery, TBI	<u>Current:</u> CZM, PRX, SERT <u>Past:</u> CHLD, NOR, OLZ, PRIM, QUE	3, BF	Improved	Improvement in somatic symptoms and depression	Improvement sustained for a year, more ECT required
27	M	61	CD, PD, SDNOS	Paresthesia, cognitive dysfunction, fatigue, decreased balance, shortness of breath, urinary incontinence, pain in face and limbs	52	MDD, PDNOS, ADNOS	Pulmonary sarcoidosis	<u>Current:</u> DEX, MIR, ZIPR <u>Past:</u> AMTP, BUPR, DZM, GAB, LRZ, NOR, PREG, RISP, TOP, VEN, ZOPL	11, RUL/BF	Improved	Improvement in somatic symptoms and depression	Required maintenance ECT to maintain clinical improvement
28	F	36	CD	Pseudoseizures	34	MDD, PTSD, PDNOS, alcohol and cannabis use disorders	IBS, History of TBI	<u>Current:</u> CZM, FLUX, MORP, OLZ <u>Past:</u> CMZ, LAM, NOR, PRX, QUE, RISP, SERT, TRZ, VAPR, VEN	6, RUL/BF	Improved	Improvement in pseudoseizures	At 2 months post-ECT, symptoms returned to pre-ECT level, requiring second course of ECT