

Article appeared in a newspaper  
in New Toronto - c. 1963.

Gunn

It was only three years ago Ontario officially admitted the "mentally ill are not inhabited by evil spirits". The medieval "Anatomy Act," which forbid using the unclaimed corpses of mental patients for medical research because the evil spirits would jump out and inhabit the body of a research staff member, was declared outmoded and changed.

This has been the story of mental illness since because the general public has been reluctant to accept the fact that mental illness like physical illness, can be treated successfully.

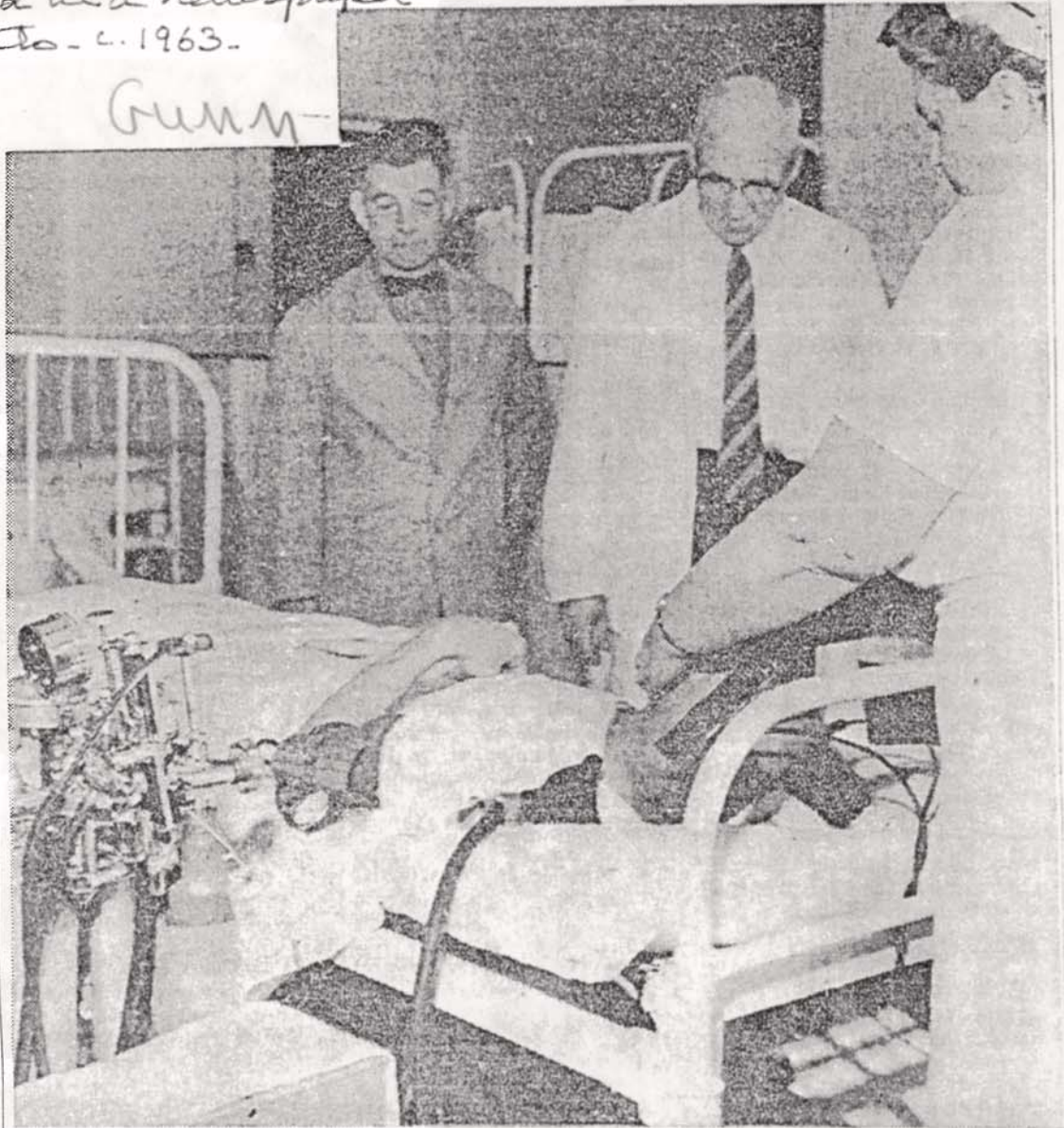
Dr. Donald R. Gunn, one of the country's top research psychiatrists, who is stationed at the Ontario Hospital in New Toronto, feels the more publicity given mental illness, the more the public will realize the progress which has been made in treating mental patients. As an example he cited "Electroshock" treatments, where a mild current is sent through the patient's brain. "The general conception of this treatment," he said, "is that the patients suffer untold agony — this is not so."

Electroshock treatment is given to depressed patients and patients who are inclined to be suicidal. It has a favorable effect on both, the depressed patient becomes cheerful and the excited patient calm. Treatment is usually administered twice a week until the patient no longer needs it and is ready for other therapy or discharge.

One morning last week, I visit-



Recently appointed Ontario Hospital Superintendent Dr. Herbert Moorhouse.



**PAINLESS ELECTROSHOCK TREATMENT**, administered at Ontario Hospital, New Toronto, belies popular belief, patients suffer intense agony during treatment. Treatment takes four or five minutes and patients suffer little discomfort. Dr. Donald Gunn, centre, credits muscle relax-

ing drug succinylcholine for making treatment a relatively simple matter for both patients and staff. Dr. Gunn, along with new Superintendent Dr. H. C. Moorhouse, believes the more publicity given mental illness and progress made in treatment, the sooner the stigma will disappear.

ed the hospital to observe, first hand, patients undergoing electroshock treatment. Prior to treatment, Dr. Gunn asked four patients if they objected to electroshock. All agreed the treatment caused them little discomfort and they were in better spirit when it was completed.

The method used at the New Toronto hospital to administer electroshock treatment causes the patient little discomfort and **NO BRAIN DAMAGE WHATSOEVER**. Where once nearly 25 per cent of all patients treated with electroshock suffered fractures caused by muscle contraction, new muscle relaxing drugs have

reduced this figure to zero. The reason for high incidence of fracture during the pioneering days of electroshock, Dr. Gunn said, was the lack of a reliable muscle relaxant. Succinylchlorine, the muscle relaxant used at the New Toronto hospital, is administered intravenously, immediately prior to the shock itself, and relaxes the patient to the extent there is no muscle contraction whatever. Other than a slight twitching of the toes the patient is completely still.

Muscle relaxants, which relax the muscles but do not affect mental activity, Dr. Gunn pointed out, are not to be confused

with tranquilizers, which act upon the brain to change the mood.

Although the patient is fully conscious when the relaxant takes effect, he has no control over his body and must be assisted in his breathing for two or

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