

Research Article





Is ketamine infusion a safe, effective treatment alternative to combat depression?



Volume 4 Issue 3 - 2015

Scott W Stern

Department of Psychotherapy, Empowering Psychotherapy and Corporate Services, New York, USA

Correspondence: Scott W Stern, Department of Psychotherapy, Empowering Psychotherapy and Corporate Services, New York, USA, Email swspsychotherapy@gmail.com

Received: November 17, 2015 | Published: November 23, 2015

At low, sustained dosage, Ketamine Infusion is said to be more effective for those who have been unsuccessful with more conventional anti-depressant medications. http://www.ketamineinfusioncenters.com/treating-depression

"In New York City, Dr. Glen Brooks has been working with Ketamine Infusion Depression Treatment for many years and founded NY Ketamine Infusions. According to Brooks, "Ketamine has a well established history as a general anesthetic agent. Recent advances have proven Ketamine to have additional benefits as a treatment for chronic pain and depression. Sub anesthetic doses are often effective when other treatments have been less successful."

Located in downtown Manhattan, NY Ketamine Infusions, LLC is a private outpatient practice. We serve patients by appointment only. Please call anytime during office hours at 917-261-7370 to schedule an appointment, or for more information.

Hours: 8 AM to 8 PM Monday through Friday

8 AM to 6 PM on Saturday and Sunday

Glen Z Brooks, MD. Is a has dedicated himself to the treatment of depression and neuropathic pain syndromes with Ketamine Infusion Therapy. A Board Certified Anesthesiologist, he completed his residency and pain fellowship training at Harvard's Peter Bent Brigham Hospital, Boston Hospital for Women and Boston Children's Hospital. He has been a faculty member at Yale University School of Medicine, Chairman of Anesthesia at Cabrini Medical Center in Manhattan and is a member of The American Society of Anesthesiologists, The New York State Society of Anesthesiologists and The American Academy of Pain Medicine. If you or a loved one is suffering from disabling chronic pain or depression that has not been well controlled by other treatment, Dr. Brooks may be able to help." http://nyketamine.com/pain/about-us/

At the Ketamine Treatment Centers of Princeton Dr. Steven Levine's training is as a psychiatrist who is a therapist first, medicine prescriber second. However, he has expertise in pharmacology, particularly in the treatment of "tough-to-treat" mood disorders.

Dissatisfied with the options available that take a long time to work and cause unacceptable side effects, he was looking for a better option. As the research on Ketamine for depression progressed, but was not available outside the research setting, he began to ask, "why aren't we using this yet?"

According to Levine, major depression, the depressed phase of bipolar disorder (bipolar depression), anxiety, post-traumatic stress disorder (PTSD), obsessive compulsive disorder (OCD), pain syndromes such as complex regional pain syndrome (CRPS, also known as reflex sympathetic dystrophy (RSD), and addiction.

Unsafe conditions to use Ketamine Infusion are uncontrolled blood pressure, unstable heart disease, untreated thyroid disease, active substance abuse, current manic phase of bipolar disorder, or active psychotic (hallucinations or delusions) symptoms.

Some may have heard that Ketamine is used as a "party drug" and worry about addiction potential. Studies and clinical experience have found that in the very low doses used, medical setting, lack of access at home, and infrequent dosing, there is virtually no potential for addiction or abuse.

He reports the dose used for the treatment of mood and anxiety disorders is very low and safe. For a few minutes during the infusion itself, blood pressure and heart rate may increase. This is monitored to ensure safety.

Says Levine, "you will fill out depression and anxiety scales prior to the first treatment and approximately 24 hours later. This will help determine response. It is possible to notice effects as soon as 40 min after the infusion, most typically starting 2-4 hours later, but sometimes taking up to 24 hours. You should not expect to wake up feeling "perfect and overjoyed", but rather there should be a noticeable difference in feeling more hopeful, less sad, decreased thoughts of

2

suicide, increased calmness, 'weight' of depression lifted, or more inclined to engage with people. Further improvements are often seen over the course of treatment."



Acknowledgments

None.

Conflicts of interest

Author declares there are no conflicts of interest.

Funding

None.