

## What is your general experience treating patients with catatonia?

**Dr. Carroll:**

My general experience is that patients with catatonia tend to respond to lorazepam. If they can tolerate it, we can increase the doses — not exceptionally high — and get them better right away.

In my world of patients with catatonia, I have difficulty accessing ECT for them. And so I have used NMDA receptor antagonists, such as memantine and amantadine, and we are able to get some response when adding this on occasionally with monotherapy with these agents.