

We do appreciate our Reviewers' efforts to improve our manuscript with their constructive comments. We have revised the manuscript according to the recommendations as detailed below. All changes are clearly indicated in the revised manuscript for easy inspection.

Reviewer #1: The author describes the history and current situation around electroconvulsive therapy. Topics are well summarized and the content is easy to read. This manuscript will be helpful especially for young readers to learn this controversial topic.

Authors' reply: Thank you for this supportive comment.

Reviewer #2: Dear authors, I have a few comments on your manuscript: - Do you think that Abstract is necessary in an Editorial? - Mechanism of action: Is there any knowledge on epigenetic mechanisms of ECT? - ECT in affective disorders, schizophrenia: You could mention maintenance ECT in depression as well as schizophrenia. Best regards The reviewer

Authors' reply: Abstract was among the obligatory parts of the Editorial in the Authors' guideline of WJP. Epigenetic mechanisms of electric shock have been studied only in animal studies but we have added a sentence about it to the Mechanism of action section. We have inserted a sentence about maintenance ECT into '*ECT in the treatment of affective disorders*' as well as '*ECT in psychosis and schizophrenia*' sections.

Reviewer #3: The historical part of this manuscript is excellent and a nice tribute to Meduna. More current aspects of ECT treatment, however, are glossed over. The authors need to add the changes of procedure over time with ECT administration, the memory difficulties, the attempts to overcome memory problems, the number of ECTs necessary for effective treatment, the recurrence rate, the co-administration of drugs, the use of ECT when drugs cannot be used, comparison studies of ECT vs drugs for specific conditions, the cost of equipment and the training of personnel (which may explain why it is not used in some regions of the world)

Authors' reply: We accept the Reviewer's notion that more current aspects of ECT were glossed over, but it was not without our intent. We aimed to write a short editorial commemorating the 80ies anniversary of the first ECT use and not a detailed review of all aspects of ECT. We think that those issues raised by the Reviewer deserve a separate review paper.

Reviewer #4: This is a short but succinct editorial on the history of ECT and its place in modern psychiatric practice. To my mind it is the second section that needs to be emphasized and possibly enlarged a bit. ECT has always had a bad press and public attitudes are quite negative. On the other hand attitudes among patients, caregivers and professionals are relatively favourable. Perhaps, there should be a line mentioning this.

Authors' reply: We do accept the validity of this recommendation and added the following sentence to the text: 'In contrast to its negative image in the media and the public

misperception, attitudes towards ECT in patients, relatives and the mental health professionals are mainly positive.'

One the reasons for adverse attitudes towards ECT are concerns about cognitive deficits, particularly long lasting memory impairment. I think it would be useful if the authors could comment on this aspect.

Authors' reply: We accept the Reviewer's comment and we have added a new section to the text about the side-effects of ECT.

Some mention could also be made about the fact that though other brain stimulation treatments such as rTMS are rapidly gaining acceptance, ECT still remains the best option for treatment of severe, psychotic and treatment-resistant depression as its efficacy is better than rTMS for this condition.

Authors' reply: In response to this recommendation we have added a new section to the text entitled 'Comparison of ECT with recently developed new brain stimulation methods'.

Finally, advances in technique, in administration of ECT including good practices that need to be followed and newer indications for ECT (e.g. clozapine resistant schizophrenia) could also be briefly mentioned.

Authors' reply: In line with this suggestion, we have mentioned those technical modifications that aimed to decrease cognitive side-effects and also mentioned clozapine resistance as an indication for ECT in the relevant section.