TRANSCRANIAL MAGNETIC STIMULATION

Treatment for Depression

PioneerHealth TMS

POWERED BY Neuralia TMS

WHAT IS TRANSCRANIAL MAGNETIC STIMULATION (TMS)?

TMS is a safe, effective, and non-invasive therapy for depression and other psychiatric or neurological conditions. It has been widely used for over 30 years in North America, Europe, and Australia.

TMS works by modulating brain activity. Magnetic impulses target the brain's surface (cortex) to stimulate or suppress specific circuits, restoring healthy brain function. For depression, the treatment focuses on the left dorsolateral prefrontal cortex (DLPFC), stimulating deeper brain regions associated with mood regulation.

TMS is not the same as electroconvulsive therapy (ECT). Unlike ECT, TMS is non-invasive, does not impair memory, and allows patients to stay awake and interact during sessions. It is also compatible with ongoing medication use.

HOW EFFECTIVE IS TMS FOR DEPRESSION?

TMS is as effective as antidepressant medication and can be more beneficial for those who haven't responded to medications. Over 50% of TMS patients experience significant symptom improvement, and about 30% achieve remission (complete symptom relief). However, the duration of remission varies, and some may need maintenance or additional TMS sessions after relapse.

Like other depression treatments, TMS does not guarantee a response or remission, with outcomes differing between individuals.

WHAT ARE THE ADVERSE EFFECTS OF TMS?

TMS is a safe and well tolerated therapy.

Common adverse effects of TMS are as follows:

- Headache (these tend to settle after the first few sessions)
- Scalp discomfort
- Tingling, facial muscle twitching
- Noise related discomfort (patients wear ear plugs during TMS therapy)

Rare adverse effects of TMS are as follows:

- Seizure. The chance of seizure is one in 30 thousand, which is lower than the seizure rate for patients treated with anti-depressants. Please note that in the unlikely event that you do experience a seizure during treatment, this will affect your fitness to drive.
- Syncope (fainting)
- Mood elevation (elevated mood tends to settle on cessation of TMS)

Unlike electroconvulsive therapy (ECT) TMS causes NO adverse cognitive effects.

WHO SHOULD NOT HAVE TMS?

Patients with a pre-existing vulnerability to seizures should not undergo TMS. This includes patients with a past history of:

- Epilepsy
- Acute brain disease (such as recent strokes, head injury or growing brain tumours)
- Alcohol or drug withdrawal states

Patients with metallic materials in their head and upper body region may also not be safe for TMS. Pregnancy, childhood and certain occupations (metalworkers, welders, truck drivers) are relative contra-indications to TMS which your doctor will discuss with you.

WHAT IS THE COST OF TMS?

Bulk-billing for eligible patients with treatment resistant depression.

Patients with treatment-resistant depression are eligible for Medicare rebates for TMS therapy sessions. In this case, TMS therapy is fully covered by Medicare (including the therapy sessions and the sessions with our TMS psychiatrist).

HOW DO I GET REFERRED FOR TMS?

Patients may be referred by their GP, psychiatrist, or another healthcare professional. Additionally, individuals may self-refer by contacting Pioneer Health TMS on 9842 2822 and requesting to speak with our TMS Coordinator, who will facilitate the scheduling of an appointment at our clinic.

WHAT WILL TMS INVOLVE FOR ME?

Induction	Our TMS Psychiatrist will determine appropriateness of TMS therapy and gain consent for treatment.
Mapping	Your clinician will measure the optimal treatment spot for impulse administration.
Treatment	You will receive TMS up to 5 times per week for 6 weeks (30 sessions). This is followed by 2 weeks of weaning (5 sessions). We will regularly check to see if you're responding well to treatment. TMS is not appropriate therapy for patients who are unable to attend for regular treatment sessions.

PioneerHealth TMS

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