



Ketamine Frequently Asked Questions

Ketamine is fast-acting medication created in the 1960's with several applications. It is currently being used as treatment option for those suffering from treatment resistant depression, suicidal ideation, PTSD, Bipolar Disorder, and Generalized Anxiety Disorder. Those who suffer from depression have a lower amount of BDNF factor, a protein related to depression, in their brain. Ketamine increases the synthesis of this protein, producing higher levels and more consistent levels in the brain. Ketamine also improves the functioning of one's neuronal network, making it more effective and efficient. This correlates to improved mood, energy, motivation, concentration, along with lower anxiety.

1. Who is a good candidate for Ketamine treatments?
 - Those who have suffered from treatment resistant depression are excellent candidates for Ketamine treatment.
 - Individuals with thoughts of suicide.
 - A considerable amount of research is being done with Ketamine for those with Generalized Anxiety Disorder, PTSD, and Bipolar Depression.
2. Is this an outpatient treatment?
 - Yes. Ketamine is administered intranasally and patients will be monitored for one hour following treatment. Patients will be unable to drive themselves for the rest of the day following treatment. They will be able to resume normal activities the subsequent day.
3. Are there any side effects to Ketamine?
 - Side effects can include increased blood pressure, increased heart rate, disorientation, numbness, and hallucinations.
4. What is the recommended treatment regimen?
 - Patients are recommended to complete two treatments a week for up to eight weeks. This protocol is comparable to a treatment study completed at Mayo Clinic.
5. Will I need to make any changes to my medications?
 - No. Ketamine does not interfere with other medications.
6. Does insurance cover Ketamine?
 - At this time, Ketamine is not covered by insurance, as it is not FDA approved.

