

Choosing the Right Ketamine Treatment:



IM VS. SPRAVATO

Understanding the Differences, Effects, and What to Expect

Ketamine is a fast-acting treatment option for people with depression, anxiety, PTSD, and other conditions. Two common forms—Intramuscular (IM) ketamine and Spravato (nasal esketamine)— offer different experiences and benefits.

This guide explains how they compare, what to expect, and how to make an informed choice with your care team.





INTRAMUSCULAR ((IM)
KETAMINE	

Injection into a large muscle (usually arm or thigh)

Off-label for mental health use

Onset

3-10 minutes

Duration

40-75 minutes

Environment

How It's Given

FDA Approval

Quiet, private room with supervision

Insurance Coverage Usually not covered; self-pay model

model

Regulations

Administered in clinics under provider discretion

SPRAVATO (NASAL ESKETAMINE)

Injection into a large muscle (usually arm or thigh)

FDA-approved for treatment-resistant depression

15–40 minutes

About 1-2 hours

Clinical setting with monitoring for at least 2 hours

Often covered with prior authorization

Must be done in a REMS-certified facility







- You're seeking deep psychological insight or somatic experiences
- You're doing ketamine-assisted psychotherapy (KAP)
- You want a more immersive, inward experience with fewer external stimuli
- · You respond well to structured but flexible care models



3. When Spravato Might Be Preferred

- You need insurance-covered treatment
- You're looking for a more moderate or less intense experience
- You prefer a routine medication protocol with regular clinic visits
- · You're comfortable in a clinical setting with staff supervision



4. Key Differences to Consider

INTENSITY OF EXPERIENCE

- IM typically produces a stronger dissociative effect and inward journey.
- Spravato may feel more gradual, sometimes subtler, though still significant.

IM often produces a dreamlike or altered state where speech may feel unnecessary or difficult. Spravato tends to be milder, and many patients remain conversational and more alert.

TREATMENT FLEXIBILITY

- IM allows for individualized doses and integration-focused models.
- Spravato follows a standardized dosing protocol regulated by the REMS program, which may limit provider flexibility.

SESSION STRUCTURE

- IM is often combined with psychotherapy before, during, or after.
- Spravato requires monitoring but often no talk therapy during the session.

TREATMENT FREQUENCY

- Spravato is usually administered twice per week for the first month, then weekly or biweekly for maintenance.
- IM ketamine schedules vary based on the individual's response and therapeutic goals, often weekly or every 10–14 days.

RECOVERY TIME

You should not drive or operate machinery for at least **24 hours** after either treatment. Many people feel foggy, emotionally open, or physically tired afterward. Plan ahead for rest and safe transportation.

5. Safety and Screening

Both forms require a medical screening to ensure they're safe for you. This may include:

- Blood pressure checks
- · Medication review
- Mental health history (including psychosis risk)
- Substance use history



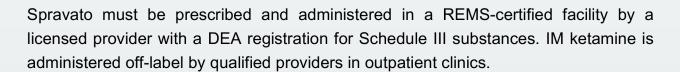
Your provider will also explain:

- Common physical effects (nausea, dizziness, disorientation)
- What support will be available during and after the session
- How to plan for recovery, transportation, and follow-up appointments

6. Not Sure Which to Choose?

Talk with your provider about:

- Your goals for treatment (relief, insight, processing trauma, etc.)
- · How comfortable you are with dissociation or altered states
- Insurance and financial concerns
- Your past experiences with medication or therapy



If you're interested in psychotherapy or deeper emotional work, ask whether your clinic offers **integration support** or ketamine-assisted psychotherapy.

HEED MORE GUIDANCE?

Paperflower Psychiatry offers both IM ketamine and Spravato. Our team is here to help you explore your options and feel supported every step of the way.

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