

PSYCHO-SOCIAL ISSUES

A community study on the factors associated with quality of life of people with epilepsy in Hong Kong

¹Anchor TF Hung, ²Richard Fielding, ³Patrick Kwan, ³Evelyn Yu, ⁴Doris Yu, ⁵Ann Jacoby, ⁶Gus Baker, ⁷Gardian CY Fong

¹The Hong Kong Society for Rehabilitation Community Rehabilitation Network, ²Department of Community Medicine, Li Ka Shing Medical School, The University of Hong Kong, ³Division of Neurology, Department of Medicine & Therapeutics, The Chinese University of Hong Kong, ⁴Department of Nursing, The Chinese University of Hong Kong, ⁵Division of Public Health, University of Liverpool, UK, ⁶University Department of Neurosciences, Walton Centre for Neurology and Neurosurgery, Liverpool, UK, ⁷Department of Medicine, The University of Hong Kong

Background and Objectives: Epilepsy is a common neurological disorder. People with epilepsy (PWE) are not only confronted with a medical condition, but also many psychosocial repercussions which may affect their quality of life (QOL). It is also a public health issue addressed by the WHO.¹ Previous research has established that seizure-related factors exert influence on the QOL of people with epilepsy like duration of seizure, seizure types and number of medications. However, some recent local and overseas studies pinpointed that psychosocial factors significantly determine QOL of PWE. In Hong Kong, the a few local studies on the psychosocial areas and QOL of PWE have limitations including small sample size and a lack of comprehensive examination of the psychosocial factors of PWE. The objective of this study is to determine the factors associated with the QOL of PWE in Hong Kong.

Methods: In this cross-sectional study, 500 self-administered questionnaires were mailed to adult service users of two epilepsy service organizations in Hong Kong, namely the Hong Kong Epilepsy Association (HKEA) and the Hong Kong Society for Rehabilitation Community Rehabilitation Network (HKSR) in September 2007.

Four instruments were used, including the Quality of Life in Epilepsy 31 (QOLIE-31 PWH Version 1 in Chinese), Epilepsy Stigma Scale (PWH version 1 in Chinese), Hospital and Anxiety Depression Scale (Chinese Version) and the Medical Outcome Study Social Support Survey (Chinese Version). Demographic and clinical data from both public health and epilepsy-related literature were also included. Three types of independent variables were included in the study: seizure-related variables, demographic variables and psychosocial variables. The dependent variable was the QOLIE-31 score. Pearson correlation coefficients, t-test and Analysis of variance (ANOVA) were performed by SPSS Version 16. Multivariate analysis using General Linear Modelling (Univariate) with backward elimination were applied to identify factors associated with QOLIE-31 of PWE.

Results: The response rate was 51%. The mean of the overall QOL in epilepsy is 54.39 (SD=16.65). The prevalence rate of anxiety and depressive symptoms were 29.9% and 19.6% respectively. Sixty-six percent of the subjects felt stigmatized due to epilepsy while more than 30% felt highly stigmatized. A number of seizure-related and psycho-social variables including seizure frequency, number of side effects reported, anxiety, depression, stigma and social support ($p < 0.05$) were found associated with and explained 73% of the variance of QOL of PWE. Social support was found to be a protective factor.

Discussion and Conclusion: The findings of this study were largely consistent with both local and overseas reports. The prevalence of anxiety and depressive symptoms were high. If borderline cases were included, the prevalence reaches 55.8% and 44.2% respectively. The level of anxiety tended to be higher than depressive symptoms, as in many other studies. Feelings of being stigmatized were relatively more common than reported in studies from the West and Near East. This may be related to the Chinese culture.

This study is the first large scale community-based attempt to explore the factors associated with QOL of PWE joining the community support groups in Hong Kong. A number of clinical and psychosocial factors were found associated with the QOL of PWE. More medical and psycho-social support to the PWE as well as community education on epilepsy were essential to improve the QOL of PWE. Further comparisons among different studies in Hong Kong, China, Taiwan and other Chinese and Western culture will be considered. Limitations include potential sampling bias which might account for the higher observed prevalence.

Reference

1. WHO. Epilepsy: the public health aspects. 2005 [updated 2005; cited]; Available from: http://www.who.int/mental_health/neurology/Epilepsy_ph_aspects1_rev1.pdf.