

Response to article by Kheng Seang Lim *et al.* in Neurology Asia 2013;18(4):361-368.

We would like to congratulate the authors as well as the Malaysian Society of Epilepsy Research Group on the substantial contributions they are making to our global understanding of epilepsy-related stigma particularly with regard to instrument development and cross cultural assessments. Their recent publication, “**Only Certain Aspects of Knowledge have Impacts on Attitudes Toward People with Epilepsy**” is another example of this fine work. We do, however, need to correct their assertion in this paper that, “*None of the...studies employed quantitative scales correlating the knowledge and attitudes toward epilepsy.*”

Our Zambia-based research group has been conducting research on epilepsy-associated stigma for over a decade. Prior to the development of the EKQ and PATE instruments, we developed Knowledge, Attitude, and Practice (KAP) surveys and within these surveys crafted scoring procedures which provided scores for knowledge and attitudes and indeed examined correlates between them. The KAP surveys were customized for the populations of interest and included Police Officers, Teachers, Clerics and Healthcare Workers. In each group, a different aspect of knowledge determined their attitudes towards people with epilepsy (being more or less tolerant). For Clerics, a more positive attitude was dependent upon understanding that epilepsy is a biomedical and not spiritual disorder; in teachers, the determinant was social proximity to a person with epilepsy; in police officers, attitudes were determined by whether they thought epilepsy was contagious or not with contagion fears associated with poorer tolerance. And in healthcare workers, a stronger knowledge of how to treat epilepsy was associated with better social attitudes towards the disorder. All of this is in the peer reviewed literature.¹⁻⁴

We certainly agree that only certain aspects of knowledge have an impact, but this aspect is not likely homogenous across a population. The differences across social entities may also direct us towards more effective intervention development.

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