IBE Epilepsy and Cognitive Function Survey

Summary of results

Demographics	
Total respondents	425 (200 male; 223 female)
Countries surveyed	Belgium (58, 14%); Malta (52, 12%); Ireland (94, 22%); Scotland (149, 35%); Denmark (72, 17%)
Time on medication	Mean = 18.3 (SD = 14.21)

Topline results:

Treatment characteristics:

- 95% of all respondents are currently taking medication for their epilepsy
- 59% of all respondents are taking multiple medications and 40% on monotherapy

Cognitive function:

- 44% of respondents indicated 'very much' or 'moderately' when asked if they experienced difficulties learning something new
- 45% of respondents indicated 'very much' or 'moderately' when asked if they experienced slowness of thought
- 59% of respondents indicated 'very much' or 'moderately' when asked if they experienced sleepiness/tiredness
- 48% of respondents indicated 'very much' or 'moderately' when asked if they experienced letharqy/sluggishness

Relationship between cognitive function and AEDs:

 A total of 56% of patients associated their cognitive impairment with their epilepsy medication – 14% of respondents stated that their cognitive problems were related to medication alone and a further 42% stated that effects were due to a combination of their condition and the medication they were taking

Impact on QoL:

- When asked if the effects experienced have had a noticeable impact on work, 50% of respondents stated 'very much' or 'moderately'
- When asked if the effects experienced have had a noticeable impact on education, 45% of respondents stated 'very much' or 'moderately'
- When asked if the effects experienced have had a noticeable impact on family and relationships, 50% of respondents stated 'very much' or 'moderately'
- When asked if the effects experienced have had a noticeable impact on leisure pursuits, 46% of respondents stated 'very much' or 'moderately'
- 63% of respondents stated that effects experienced had prevented them
 doing a particular activity or achieving a goal (examples reported included
 following their chosen career, staying on in education and obtaining a
 driving licence)

- 61% of respondents stated that they had asked a healthcare professional if cognitive side effects can be reduced or improved
- Length of time on treatment did not relate to whether respondents sought healthcare professional advice on cognitive side effects

Ideal treatment (open question)

- When asked what side effects respondents would most want to avoid if they could design their own treatment, the most frequent responses were (>5%):
 - Sleepiness / tiredness (38%)
 - Memory problems (16%)
 - Lethargy / sluggishness (13%)
 - Weight gain / appetite (8%)
 - Difficulty paying attention (7%)
 - Slowness of thought (6%)
 - Dizziness / balance problems (6%)