

# Knowledge, attitude, and practice of people toward epilepsy in a South Indian village

Epilepsy, a common central nervous system disorder, affects people of all ages worldwide. Epilepsy-related stigma and discrimination by the society make patients susceptible to psychopathology<sup>[1]</sup> and affect their quality of life. The social discrimination and disease-related stigma are often more difficult to overcome than the seizures themselves.<sup>[2]</sup> In addition to this, drug related complications of epilepsy also increase the disease burden. To improve the self-efficacy of the epileptic patients, they should be educated about their condition which consequently may improve their perceived stigma and anxiety related to epilepsy.<sup>[3]</sup> The association between knowledge of epilepsy and depressive is a well-known concept. In this regard, the finding of the present study is important to emphasize the demand for knowledge of epilepsy to manage disease-associated stigma. The outcome of this research may be useful to formulate tailor-made educational programs for the rural population. The lower level of knowledge in the rural population is alarming and indicating the need of awareness campaigns to change the perception of rural population about epilepsy. Health education projects oriented toward the management of epilepsy should be focused.

Considering the size of the population of this study, it may be prudent to conduct further research on the knowledge, attitude, and practice of the rural population on epilepsy management in a broader spectrum. Such an analysis would help identify the significance of the differences in knowledge of the population and helped to design a better educational program. It would also help identify what information can be best placed to maximize their knowledge.

The cross-sectional study design did not establish whether greater knowledge about epilepsy acts to improve depression in the study population. Although the purpose of the questionnaire permits quantitative evaluation, some open-ended questions

would have permitted the respondents to mention some free comment and the data might have led to some qualitative insight into the responses.<sup>[4]</sup> Special consideration should be taken in generalizing the study findings to the general population because the sample cohort was recruited nonrandomly and mostly from one particular place. The future works on this theme may include focusing group discussions to further explore the perceptions and attitudes of the study population. It may give the study population the opportunity to express themselves.

The public misunderstandings of epilepsy may be partially because it is unlikely to be an everyday topic of daily conversation or media coverage among nonmedical personnel, especially in the rural setup. Overall, this study sheds some light on the deficiency in knowledge, attitudes, and misconceptions of rural population about epilepsy which may deserve attention when planning health educational campaigns.

Mari Kannan Maharajan

*Department of Pharmacy Practice, School of Pharmacy,  
International Medical University, Bukit Jalil, 57000, Kuala Lumpur,  
Malaysia*

**Address for correspondence:**

Dr. Mari Kannan Maharajan,  
Department of Pharmacy Practice, School of Pharmacy,  
International Medical University, Bukit Jalil, 57000,  
Kuala Lumpur, Malaysia.  
E-mail: marikannan@imu.edu.my

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