



شبكة المعلومات الجامعية

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جامعة عين شمس

شبكة المعلومات الجامعية

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شبكة المعلومات الجامعية

# جامعة عين شمس

التوثيق الالكتروني والميكرو فيلم

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# شبكة المعلومات الجامعية التوثيق الالكتروني والميكروفيلم

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# بالرسالة صفحات لم ترد بالاصل

# **Some Aspects of Health Status in Epileptic Children and Adolescents**

**(with special reference to quality of life)**

**Thesis**

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the M.D. degree in Public Health

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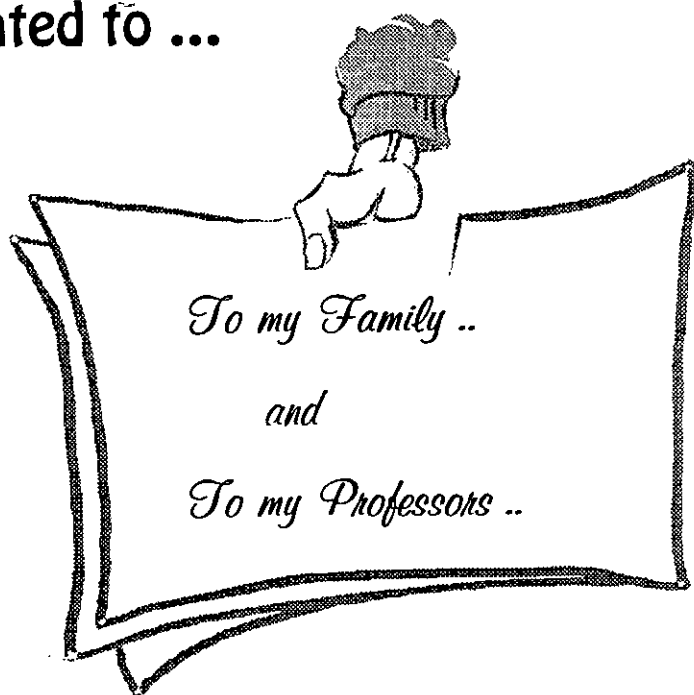
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**Dedicated to ...**



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## Abstract

Epilepsy and its treatment have a direct bearing on major aspects of life style. Demographic, social and economic factors affect health status among epileptic children and adolescents. **The aim of this study** was to evaluate some aspects of health status among epileptic children and adolescents mainly through quality of life scoring. **Subjects & methods:** 150 epileptic patients with idiopathic epilepsy and 100 controls age and sex matched collected from kasr El-Aini out-patient clinic were included. Social level scoring, IQ, identification of HRQoL score, clinical examination and laboratory tests for drug intoxication level and measuring the serum level of AEDs were done. **Results:** The mean scores of all domains of QoL were significantly lower in patients compared to controls ( $p < 0.01$ ). Female patients had lower mean QoL scores as compared to males ( $p < 0.05$ ). The educated group had better QoL scores except in stigma and anxiety. Patients lived in rural areas had lower QoL scores except in social support. Patients with very low social level had significantly lower scores most QoL domains ( $p < 0.05$ ), while those with high social level had significantly lower score in a health perception ( $p < 0.05$ ). Patients with focal fits had the best score in all QoL domains ( $p < 0.01$ ). Patients with 1ry generalized fits have the worst scores in almost all QoL domains. Patients with generalized fits only during sleep had much better scores in all QoL domains ( $p < 0.01$ ). Patients with more frequent fits had lower scores in nearly all QoL domains. A better QoL scores were found in patients on monotherapy compared to patients on polytherapy. Patients on polytherapy had higher toxicity score relative to monotherapy group ( $p < 0.05$ ). Positive correlation was found between QoL domains and IQ score except in stigma which showed a negative correlation. There was negative significant correlation between age and systemic toxicity. A high significant negative correlation was found between toxicity scores and most QoL domains ( $p < 0.01$ ). **Conclusions:** Epileptic patients had lower mean scores of all domains of quality of life specially those with frequent fits, those on polytherapy and in patients with generalized fits.

## **List of Abbreviations**

|                    |   |                                                                            |
|--------------------|---|----------------------------------------------------------------------------|
| <b>AED(s)</b>      | : | Anti-Epileptic Drug(s)                                                     |
| <b>BRFSS</b>       | : | Behavioral Risk Factor Surveillance System                                 |
| <b>CATIS</b>       | : | Child Attitude Towards Illness Scale                                       |
| <b>CDC</b>         | : | Centers for Disease Control and Prevention                                 |
| <b>CHSIs</b>       | : | Community Health Status Indicators                                         |
| <b>CT</b>          | : | Computarized Tomography                                                    |
| <b>DALYs</b>       | : | Disability Adjusted Life Years                                             |
| <b>EEG</b>         | : | Electro-encephalogram                                                      |
| <b>GTC (S)</b>     | : | Generalized Tonic-Clonic Seizure(s)                                        |
| <b>HALYs</b>       | : | Health Adjusted Life Years                                                 |
| <b>HRQoL</b>       | : | Health – Related Quality of Life                                           |
| <b>ILAE</b>        | : | International League Against Epilepsy                                      |
| <b>IQ</b>          | : | Intelligent Quotient                                                       |
| <b>LQOL</b>        | : | Liverpool Quality of Life                                                  |
| <b>LSSS</b>        | : | Liverpool Seizure Severity Scale                                           |
| <b>MMWR</b>        | : | Mortality and Morbidity Weekly Report                                      |
| <b>MRI</b>         | : | Magnetic Resonance Imaging                                                 |
| <b>PYLL</b>        | : | Potential Years of Life Lost                                               |
| <b>QALYs</b>       | : | Quality Adjusted Life Years                                                |
| <b>QLI</b>         | : | Quality of Life instrument Index                                           |
| <b>QoL</b>         | : | Quality of Life                                                            |
| <b>QoLIE</b>       | : | Quality of Life Inventory for Epilepsy                                     |
| <b>QOLIE-AD-48</b> | : | Quality of Life Inventory for Epilepsy for adolescents with 48 questions   |
| <b>QWB</b>         | : | Quality of Well Being                                                      |
| <b>QWB-SA</b>      | : | Quality of Well Being – Self Administered                                  |
| <b>SEALS</b>       | : | Side Effects and Life Satisfaction                                         |
| <b>CSD-HOAP</b>    | : | The University of California San Diego; Health Outcomes Assessment Program |
| <b>VA</b>          | : | Veteran Administration                                                     |
| <b>WHO</b>         | : | World Health Organization                                                  |
| <b>YLD</b>         | : | Years Lived with Disability                                                |

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