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University Students' Attitudes Towards Epilepsy in Madina, KSA

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Abstract

Background: Over 50 million people worldwide are affected by epilepsy, a condition often misunderstood. This misunderstanding leads to negative attitudes that can result in social isolation, discrimination, and a reduced quality of life for individuals with epilepsy. This lack of understanding exacerbates the burden of the disease.

Aim of Study: This study was conducted to investigate the attitudes of Saudi Arabian University Students towards people with epilepsy.

Design: This is a cross-sectional study.

Settings: University students survey.

Main Outcome Measures: This study was conducted to investigate the attitudes of Saudi Arabian University Students towards people with epilepsy.

Patients and Methods: An Arabic-speaking Taibah University students, aged 17 to 28 years, with an average age of 20.37±2.66 years are surveyed. Most participants were female (62.8%). All participants completed a structured online questionnaire to assess their general knowledge and understanding of epilepsy, their attitudes towards people with epilepsy, and their perceptions about employment, driving, and social participation for individuals with epilepsy.

Sample Size: This study examined 137 Taibah University students from medical and non-medical colleges.

Results: Although more than half of the study participants had some prior experience with epilepsy, only a small fraction (11.5%) correctly identified it as a physical condition. Despite recognizing the rights of individuals with epilepsy to participate in everyday life, a large number of participants expressed reservations about marrying (78.3%) or hiring (33.6%) someone with epilepsy. Additionally, a significant majority (77.6%) believe that individuals with epilepsy cannot live independently, and almost all (91.2%) believe they should not drive. These results emphasize the continued presence of significant misconceptions and stigmatization surrounding epilepsy.

Conclusion: This research revealed a significant lack of knowledge regarding epilepsy among university students, indicating that the general public may be even less informed. This knowledge gap can exacerbate the difficulties experienced by individuals with epilepsy.

Limitations: Small sample size.

Conflict of Interest: The authors declare no conflict of interest. All aspects of this work, including its design, data collection, analysis, interpretation, and publication, were conducted independently and without influence from any external parties, financial or otherwise.

Key Words: *Epilepsy – Epilepsy Saudi Arabia – Saudi Arabian epileptic patients – Patient with epilepsy – Epileptics.*

Introduction

EPILEPSY is a chronic neurological disorder that impacts more than 50 million individuals worldwide. The prevalence rate stands at 5.6 per 1,000, with an annual incidence of 54 per 1,000. The burden of epilepsy extends beyond the number of epileptic sufferers to the social, cultural, and economic systems of societies **[1,2]**.

Public attitudes and the level of understanding toward epilepsy and the people with epilepsy are widely influenced by the traditions, customs, and culture. People are still afraid of the disease and its consequences and are often influenced by ancient myths and beliefs that epilepsy is due to supernatural behavior and is caused by devil's possession **[3,4]**. Public opinion regarding epilepsy ranging from fear to hostility, stigma, or discrimination and may stem from societal norms or a lack of information **[5]**. The misconceptions and myths about epilepsy have a profoundly negative impact on the quality of life of people with the condition, leading, in turn, to significant morbidity and disability. People with disturbed attitudes are reluctant to assist people with epilepsy, exerting a negative effect on their potential for rehabilitation and social integration **[6,7]**.

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While university students are often open-minded, their attitudes towards epilepsy can be influenced by various factors, including family experiences, personal interactions, and media portrayals. Despite the importance of understanding these attitudes, few studies have explored this topic. Given that students will eventually become policymakers and caregivers, it is crucial to identify their hidden beliefs to develop effective educational programs about epilepsy **[8,9]**.

Negative attitudes toward people with epilepsy can lead to social isolation, discrimination, and impairment in the progress and well-being of those patients. To effectively manage epilepsy, it is necessary to address and educate the community about these negative perceptions **[10-12]**.

Different cultures and communities have varying attitudes towards epilepsy, which can affect the psychological status of patients and their families, as well as their adherence to treatment. To address this, this study was conducted to investigate the attitudes of Saudi Arabian university students towards people with epilepsy. Understanding these attitudes will assist healthcare professionals in creating effective educational programs to enhance the quality of life for individuals with epilepsy **[13,14]**.

Material and Methods

This cross-sectional study surveyed a group of Arabic-speaking students, aged 18 or older, enrolled in various programs at Taibah University in Medina, Saudi Arabia. Taibah University is a major institution in western Saudi Arabia has six branches and sixteen colleges that accommodate more than 70,000 students every year. The study focused on undergraduate students residing in Medina.

In November 2024, an online validated questionnaire was sent to 7,000 students. Of these, 137 agreed to participate, while the rest did not respond. All 137 participants completed the questionnaire. They were informed of their right to withdraw at any time and that their participation was voluntary and would not affect their academic standing. The questionnaire had no right or wrong answers.

The researchers created a structured online questionnaire in Arabic using Google Forms, which was then shared through social media platforms like WhatsApp and Twitter. The questionnaire consisted of three sections: An informed consent form, a section for collecting demographic information, and a final section to assess epilepsy awareness, attitudes, and the impact of epilepsy on employment, driving, and social activities.

The study was approved by the Research Ethical Committee of Taibah University in Madinah, Saudi Arabia, study ID TU-006-37. (Reference Number: IORG0007164 -IRB00010314). To protect participant privacy, no personal informations were collected. Participants provided an electronic informed consent after understanding the purpose of the study. The collected data were used solely for research purpose.

To analyze the categorical data, a chi-square test of homogeneity was used to determine if the groups were similar. A *p*-value less than 0.05 was considered statistically significant. All statistical analyses were performed using SPSS version 10.0.

Results

The demographic features of the participating students are given in Table (1). The study included 137 students, Most participants were female (62.8%) and single (95.6%), aged 17 to 28 with an with an average age of 20.37±2.66 years (Table 1).

Table (1): Demographic features of the participants.

Variable	Male	Females	Total
Numbers *	51 (37.2%)	86 (62.8%)	137 (100%)
Age (years) **	20.27±2.82	20.43±2.57	20.37±2.66
Marital status:			
Single*	50 (98%)	81(94.2%)	131 (95.6%)
Married*	1 (2%)	3 (3.5%)	4 (2.9%)
Divorced*	0 (0.0%)	2 (2.3%)	2 (1.5%)
College:			
Health-Related*	30 (58.8%)	49 (57.0%)	79 (57.7%)
Non-Health Related*	21 (41.2%)	37 (43.0%)	58 (42.3%)

* = Expressed in Number and percentage.
** = Expressed in mean ± standard deviation.

Awareness and knowledge:

A validated questionnaire assessed students' knowledge and attitudes about epilepsy. One hundred and thirty seven students completed the questionnaire. Of the 137 participants, while 42.3%% knew someone with epilepsy and 14.7% had witnessed a seizure, only 17.5% had prior knowledge about the condition. Alarmingly, a significant proportion of participants (51%) attributed epilepsy to demonic possession, while 48.2% considered it a mental disorder, and only a minority (11.5%) recognized it as a physical neurological condition. These findings highlight a substantial knowledge gap and the persistence of harmful misconceptions about epilepsy within this educated population.

The results showed that while 72.3% of participants correctly believed epilepsy is treatable, only 16.1% were aware of minor seizures. Additionally, 97.1% correctly understood that epilepsy is not contagious. However, the majority (92.4%) incorrectly believed that all people with epilepsy experience the same symptoms (Table 2).

Table (2): Awareness and understanding of epilepsy among participants.

	Responses		*p*-value
	Yes (%)	No (%)	
Awareness and knowledge:			
- Have you ever get information regarding epilepsy?	25 (17.5%)	112 (78.3%)	***
- Do you know anyone who has epilepsy?	58 (42.3%)	79 (57.7%)	Ns
- Have you ever witnessed someone having a seizure?	21 (14.7%)	116 (81.1%)	***
- Is epilepsy contagious?	4 (2.9%)	133 (97.1%)	***
- Is epilepsy a mental illness?	66 (48.2%)	71 (51.8%)	Ns
- Do you believe epilepsy is caused by demonic possession?	73 (51.0%)	64 (44.8%)	Ns
- Do all people with epilepsy have same symptoms?	106 74.1%)	31 (21.7%)	***
- Is epilepsy a treatable disease?	99 (72.3%)	38 (27.7%)	***
- Can some seizures be so brief that they go unnoticed?	22 (16.1%)	115 (83.9%)	***

(*) *p*<0.05, (**) *p*<0.001, (***) *p*<0.0001; Ns: Non-significant.

Attitude:

While most participants (72.3%) supported people with epilepsy getting married and having children (50.4%), they were less likely to personally marry someone with epilepsy (17.5%). Additionally, they were even less likely to encourage their family members to marry someone with epilepsy (30.1%).

The results showed overwhelmingly positive attitudes towards people with epilepsy in most aspects. A vast majority (93.7%) would encourage their relatives to socialize with individuals with epilepsy. However, there was less support for employment, with only 62.2% agreeing to hire someone with epilepsy. Additionally, 14.6% would be uncomfortable sitting next to a student with epilepsy.

Most participants (77.6%) believe that people with epilepsy cannot live independently and require constant care. Among the participants, 67.9% stated they would not hide their diagnosis if they had epilepsy. This group was predominantly male (72.5%), with only 27.5% being female (Table 3).

Table (3): Participants Attitude towards patients with epilepsy.

	Responses		*p*-value
	Yes (%)	No (%)	
Attitude:			
- Do you believe individuals with epilepsy should marry?	99 (72.3%)	38 (27.7%	***
- Do you believe individuals with epilepsy should have children?	69 (50.4%)	66 (49.6%)	Ns
- Would you consider marrying someone with epilepsy?	25 (17.5%)	112 (78.3%)	***
- Would you recommend your relatives to spend time with an epileptic friend?	96 (67.1%)	41 (28.7%)	***
- Would you recommend your relatives to marry an epileptic?	43 (30.1%)	94 (65.7%)	**
- Can epilepsy patients live independently?	26 (18.2%)	111 (77.6%)	***
- Would you hire someone with epilepsy if you were an employer?	89 (62.2%)	48 (33.6%)	***
- Would you be comfortable working with a colleague who has epilepsy?	117 (85.4%)	20 (14.6%)	***
- Would you hide your diagnosis if you had epilepsy?	93 (67.9 %)	44 (32.1%)	**

(*) *p*<0.05, (**) *p*<0.001, (***) *p*<0.0001; Ns: Non-significant.

Management:

The research highlighted a significant lack of knowledge about seizures and their management among participants. A concerning 53.3% approved incorrect first-aid practices, such as using cologne or onion or physically restraining individuals during a seizure. While 24.1% accurately recognized that not all individuals with epilepsy require lifelong medication, 75.9% incorrectly assumed that all individuals with epilepsy necessitate anti-epileptic medications. Additionally, only 13.9% were aware of how to assist an individual experiencing a seizure (Table 4).

Table (4): Participants knowledge regarding epilepsy managements.

	Responses		*p*-value
	Yes (%)	No (%)	
Management:			
- Do people with epilepsy need lifelong medication?	104 (75.9%)	33 (24.1%)	***
- Does everyone with seizures need to take anti-seizure medication?	112 (81.8%)	25 (18.2%)	***
- Can smelling cologne or onions stop a seizure?	73 (53.3%)	64 (46.7%)	NS
- Is it helpful to restrain patient›s arms and legs during a seizure with convulsions?	22 (16.1%)	115 (83.9%)	***
- Do you know how to assist someone during an epileptic seizure?	19 (13.9%)	118 (86.1%)	***

(*) $p<0.05$, (**) $p<0.001$, (***) $p<0.0001$; Ns: Non-significant.

Employment, driving, and social activities:

The majority of participants (83.2%) believed that people with epilepsy could succeed in demanding professions like executive secretary, scientist, or physician, but less than the half of participants (48.9%) believed that children with epilepsy could succeed in mainstream classrooms. However, a concerning number of them (37.1%) suggested that teaching was the most suitable profession for people with epilepsy, while 36.4% believed that no professions were suitable. Most respondents (80%) thought that people with epilepsy should not be allowed to drive.

A concerning number of participants (84.7%) believed that people with epilepsy should limit their social activities. Additionally, 91.2% thought that people with epilepsy should be prevented from participating in sports (Table 5).

Negative attitude of medical students compared to non-medical university students towards individuals with epilepsy.

Both medical and non-medical students predominantly agreed that individuals with epilepsy should be prohibited from driving, with more than 90% of each group sharing this view, indicating a shared concern for safety. Moreover, both groups advocated for restricting individuals with epilepsy from participating in sports and social activities, a view point that may limit their quality of life and social integration.

Although most students supported the fundamental human rights of individuals with epilepsy to marry and have children, a statistically significant difference arose between the two groups. Medical students were more inclined to support these rights (82.3%) than non-medical students (58.6%). Both groups demonstrated considerable hesitance to engage in a marital union with individuals diagnosed with epilepsy.

Despite the medical knowledge possessed by medical students, a considerable proportion of both medical (36.7%) and non-medical (62.1%) students misunderstanding epilepsy as a mental health disorder. This misconception highlights a pervasive misunderstanding of neurological conditions, even among future healthcare professionals.

Both medical and non-medical students expressed significant discomfort with the idea of working with a colleague who has epilepsy, with over 80% of both groups sharing this sentiment. This indicates a widespread lack of comfort and understanding regarding epilepsy within both groups (Table 6).

Table (5): Participants' Views on Employment, Driving, and Social Activities of Individuals with Epilepsy.

	Responses		*p*-value
	Yes (%)	No (%)	
Employment, driving, social activities:			
- Can epileptics succeed in demanding jobs like executive secretary, doctor, or scientist?	114 (83.2%)	22 (16.1%)	***
- Can a child with epilepsy be successful in a regular class?	67 (48.9%)	70 (51.1%)	Ns
- Should people with epilepsy be allowed to drive?	11 (8.0%)	126 (92.0%)	***
- Do you think people with epilepsy should avoid social activities due to the risk of seizures?	116 (84.7%)	21 (15.3%)	***
- Should epileptic be restricted from participating in sports?	125 (91.2%)	12 (8.8%)	***

(*) $p<0.05$, (**) $p<0.001$, (***) $p<0.0001$; Ns: Non-significant.

Table (6): Comparison of attitudes between medical and non-medical students.

	Responses		p-value
	Yes (%)	No (%)	
Number:			
- Would you hide your diagnosis if you had epilepsy?	57 (72.2%)	362 (62.1%)	Ns
- Do you believe individuals with epilepsy should marry?	65 (82.3%)	34 (58.6%)	**
- Do you believe individuals with epilepsy should have children?	48 (60.8%)	28 (48.3%)	*
- Would you consider marrying someone with epilepsy?	19 (24.1%)	6 (10.3%)	**
- Should people with epilepsy be allowed to drive?	7 (8.9%)	3 (5.2%)	*
- Do you think people with epilepsy should avoid social activities?	69 87.3%)	47 (81.0%)	Ns
- Should epileptic be restricted from participating in sports?	73 (92.4%)	52 (89.7%)	Ns
- Would you be comfortable working with a colleague who has epilepsy?	67 (84.8%)	51 (87.9%)	Ns
- Is epilepsy a mental illness?	29 (36.7%)	36 (62.1%)	**

(*) $p<0.05$, (**) $p<0.001$, (***) $p<0.0001$; Ns: Non-significant.

Discussion

The quality of life of people with epilepsy may seriously be affected by the attitudes of society members especially if the people around them are unaware of or uneducated about their condition. This fact renders the people with epilepsy helpless, fragile, and unconfident. They became socially isolated, decreasing their chances in normal life especially in marriage and employment [8,14].

A significant number of both non-medical (62.1%) and medical students (36.7%) still mistakenly believe that epilepsy is a mental disorder, despite their educational background. This misconception aligns with previous research in Saudi Arabia, including studies conducted in Jeddah by Tahir Obeid et al. (2012) [5], Riyadh by Alaqeel et al. (2013) [9], Qassim by Abdullah Alsohibani et al. (2019) [15], and Makkah by Algahtani et al. (2024) [5], which revealed persistent beliefs in supernatural causes and mental illness as explanations for epilepsy, even among well-educated individuals. A comprehensive review by AlHarbi et al. (2021) further supports these findings, highlighting the widespread belief that epilepsy is a psychological disorder across various regions of Saudi Arabia [13]. These results underscore the urgent need for targeted public health campaigns to address these misconceptions and promote accurate understanding of epilepsy at all educational levels.

Many comprehensive analyses revealed a significant knowledge gap regarding epilepsy treatment, particularly concerning emergency management [16-18]. While medical students demonstrated a slightly better understanding of the nature and management of epilepsy compared to non-medical students, both groups fell short of the expected level of knowledge about this prevalent neurological condition. This finding aligns with previous research conducted in Saudi Arabia, highlighting a persistent need for improved public education and awareness campaigns to remove misconceptions and promote accurate understanding of crucial emergency management steps for epilepsy [19-21].

While the majority of university students knew the treatable nature of epilepsy and admitted the rights of individuals with epilepsy to marry and have children, a significant number exhibited underlying biases against them. This was evident in their reluctance to socialize, marry, or employ individuals with the condition. While medical students exhibited slightly less negative attitudes towards people with epilepsy compared to non-medical students, the difference was not statistically significant. This finding highlights the persistence of negative stereotypes and misconceptions about epilepsy, despite advancements in medical understanding, consistent with findings from previous studies by AlHarbi et al. (2021) [22] and J.M. Al-Khateeb et al. (2014) [23].

The negative attitudes of the participants can significantly impact the quality of life for individuals with epilepsy. A significant proportion (75.3%) believe that people with epilepsy cannot live independently or participate fully in social activities, requiring constant care. This viewpoint may be influenced by cultural factors, as many cultures, including Arabian customs, emphasize family and community support, particularly for vulnerable individuals. While well-intentioned, this overprotective attitude can hinder the independence and autonomy of people with epilepsy. To address these misconceptions and promote a more inclusive society, it is crucial to implement targeted education and awareness campaigns [24,25].

A significant majority of both medical and non-medical students (over 90%) agreed that individuals with epilepsy should be prohibited from driving, reflecting concerns about the safety of both the driver and others. This viewpoint aligns with the findings of Hussein Algahtani et al. (2019), who reported a high prevalence of male patients with epilepsy driving cars without proper medical counseling or adequate seizure control, highlighting potential safety risks. These findings emphasize the importance of strict adherence to driving regulations for individuals with epilepsy to ensure the safety of all road users [26].

Limitations of current study:

This study investigated the attitudes of Madinah University students towards epilepsy. However, the research is subject to several limitations. Notably, the sample size may not be fully representative of the entire student population. Additionally, the reliance on self-reported data through surveys raises concerns about social desirability bias, as participants may provide answers that align with societal norms rather than their genuine beliefs.

Online Questionnaire.

	Responses	
	Yes	No
Awareness and knowledge:		
Have you ever get information regarding epilepsy?		
Do you know anyone who has epilepsy?		
Have you ever witnessed someone having a seizure?		
Is epilepsy contagious?		
Is epilepsy a mental illness?		
Do you believe epilepsy is caused by demonic possession?		
Do all people with epilepsy have same symptoms?		
Is epilepsy a treatable disease?		
Can some seizures be so brief that they go unnoticed?		
Attitude:		
Do you believe individuals with epilepsy should marry?		
Do you believe individuals with epilepsy should have children?		
Would you consider marrying someone with epilepsy?		
Would you recommend your relatives to spend time with an epileptic friend?		
Would you recommend your relatives to marry an epileptic?		
Can epilepsy patients live independently?		
Would you hire someone with epilepsy if you were an employer?		
Would you be comfortable working with a colleague who has epilepsy?		
Would you hide your diagnosis if you had epilepsy?		
Management:		
Do people with epilepsy need lifelong medication?		
Does everyone with seizures need to take anti-seizure medication?		
Can smelling cologne or onions stop a seizure?		
Is it helpful to restrain patient›s arms and legs during a seizure with convulsions?		
Do you know how to assist someone during an epileptic seizure?		
Employment, driving, social activities		
Can epileptics succeed in demanding jobs like executive secretary, doctor, or scientist?		
Can a child with epilepsy be successful in a regular class?		
Should people with epilepsy be allowed to drive?		
Do you think people with epilepsy should avoid social activities due to the risk of seizures?		
Should epileptic be restricted from participating in sports?		
Do people with epilepsy need lifelong medication?		

Conclusions:

This study, conducted in Saudia Arabia, was the first survey of university students attitudes toward epilepsy in Madinah region. In general, negative attitudes were rarely seen. The reason for this rarity might be that our participants were all university students.

This study revealed a significant knowledge gap about epilepsy, particularly prevalent among well-educated university students. This suggests that the general population, especially those with lower levels of education, may harbor even more pronounced misconceptions. Such misunderstandings can significantly exacerbate the challenges faced by individuals with epilepsy.

It's crucial to recognize that a comprehensive approach to epilepsy management extends beyond mere pharmacological intervention. Addressing societal misconceptions and promoting accurate public understanding of epilepsy as a neurological condition is equally vital. By implementing targeted educational campaigns and fostering empathy, we can work towards reducing stigma and improving the quality of life for individuals with epilepsy.

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مواقف طلاب الجامعات السعودية تجاه الأشخاص المصابين بالصرع

الخلفيـة: أكثر مـن ٥٠ مليون شـخص حـول العالـم يعانـون مـن الصـرع، وهـو حالـة غالبًا مـا يسـاء فهمهـا. هـذا الفهـم الخاطـئ يـؤدى إلـى مواقـف سـلبية يمكـن أن تـؤدى إلـى العزلـة الاجتماعيـة، والتمييـز، وانخفـاض جـودة الحيـاة للأفـراد المصابـين بالصـرع. هـذا الفهـم الخاطـئ يزيـد مـن عبء المرض.

الأهداف: تم إجراء هذه الدراسة للتحقيق فى مواقف طلاب الجامعات السعوديين تجاه الأشخاص المصابين بالصرع.

التصميم: هذه دراسة مقطعية.

الإعدادات: استبيان طلاب الجامعة.

مقاييـس النتائـج الرئيسـية: تم إجراء هـذه الدراسـة للتحقيـق فـى مواقـف طـلاب الجامعـات السـعوديين تجـاه الأشـخاص المصابـين بالصرع.

المرضـى والطـرق: تمـت دراسـة طـلاب جامعـة طيبـة الناطقـين بالعربيـة، الذيـن تتـراوح أعمارهـم بـين ١٧ و٢٨ عامًـا، بمتوسـط عمـر ٣٧ , ٢٠ ± ٢ , ٦٦ عامًـا. كان معظـم المشـاركين مـن الإنـاث (٨ , ٦٢٪). أكمـل جميـع المشـاركين اسـتبيانًا منظمًـا عبـر الإنترنـت لتقييـم معرفتهـم وفهمهـم العـام لمرض الصـرع، ومواقفهـم تجـاه الأشـخاص المصابـين بالصـرع، وتصوراتهـم حـول التوظيـف، والقيـادة، والمشـاركة الاجتماعيـة للأفـراد المصابـين بالصـرع.

حجم العينة: درست هذه الدراسة ١٣٧ طالبًا من جامعة طيبة من كليات الطب وغير الطب.

النتائـج: علـى الرغـم مـن أن أكثـر مـن نصـف المشـاركين فـى الدراسـة كان لديهـم بعـض الخبـرة السـابقة مـع الصـرع، إلا أن نسـبة صغيـرة فقـط (٥ , ١١٪) حددتـه بشـكل صحيـح كحالـة جسـدية. علـى الرغـم مـن الاعتـراف بحقـوق الأفـراد المصابـين بالصـرع فـى المشـاركة فـى الحيـاة اليوميـة، أعـرب عـدد كبيـر مـن المشـاركين عـن تحفظاتهـم بشـأن الـزواج (٣ , ٧٨٪) أو توظيـف (٦ , ٣٣٪) شـخص مصـاب بالصـرع. بالإضافـة إلـى ذلك، يعتقـد الغالبيـة العظمـى (٦ , ٧٧٪) أن الأفـراد المصابـين بالصـرع لا يمكنهـم العيـش بشـكل مسـتقل، ويعتقـد تقريبًـا الجميـع (٢ , ٩١٪) أنهـم لا ينبغـى عليهـم القيـادة. تؤكـد هـذه النتائـج علـى اسـتمرار وجـود مفاهيـم خاطئـة كبيـرة ووصـم حـول الصـرع.

الخاتمـة: كشـفت هـذه الدراسـة عـن نقـص كبيـر فـى المعرفـة بمـرض الصـرع بـين طـلاب الجامعـات، ممـا يشـير إلـى أن الجمهـور العـام قـد يكـون أقـل إلمامًـا بالموضـوع. يمكـن أن يـؤدى هـذا الفجـوة المعرفيـة إلـى تفاقـم الصعوبـات التـى يواجههـا الأفـراد المصابـون بالصـرع.

القيود: القيود: حجم العينة صغير.

تضـارب المصـالح: يعلـن المؤلفـون عـدم وجـود أي تضـارب فـي المصالـح. جميـع جوانـب هـذا العمـل، بمـا فـي ذلـك تصميمـه، وجمـع البيانـات، والتحليـل، والتفسـير، والنشـر، تم إجراؤهـا بشـكل مسـتقل ودون تأثيـر مـن أي أطـراف خارجيـة، سـواء كانـت ماليـة أو غيـر ذلـك.