

C Strengthening links between patient and health care professionals

Dr JK Soler (Chair) , Dr Doriette Soler, Mr Lino Sghendo (rapporteur), Mr Michael Lawrence, Dr Martin Micallef

1. Who is involved in the links between persons with epilepsy and HCPs in Malta?
2. What is hindering these links in Malta?
3. What concrete suggestions can be made to encourage these links?

Main points to emerge:

- Attitude of health care professionals
- Research
- Stigma
- Driving issues
- Work-related issues
- Access to pharmaceutical care
- Psychological issues
- Media issues

The links between epileptic patients and health care professionals are strong. By law, epileptic patients must be at least one year seizure-free before a driving license can be issued. Also, diving licenses cannot be issued if an epileptic subject applies for. However, an epileptic patient cannot be discriminated and not employed. A plan of management for epileptic patients is to be established. The plan is to indicate when the patient is referred back to hospital. A task force is to be established in the management of such patients. A difficulty may arise in the relationship between an epileptic parent and his or her children. The help of a psychologist is fundamental in this case.

A psychologist and a neuropsychologist are of particular help for epileptic patients. There is a shortage of psychologists in the Government Health Services. Support groups and resources are available in case of need. Counsellors need to be available in case help is required. A managed network of services is also important. The managed network is first to be established in hospital and then this is to be transferred to the community. Controlled epileptic patients lead to less psychological events. Care pathways are used abroad in the management of this condition. Psychologists need to be specialised on how to tackle patients with epilepsy. Media may be important in providing information regarding this topic. Guidance teachers are to be assisted in their duty with regards to management of children with epilepsy.

A buccal formulation of midazolam may be of help instead of administering rectal diazepam. Only medically trained professionals can administer diazepam rectally or any other drug in schools. However, teachers need to know first aid techniques. Information through media to the general public is required. Caritas has no specific groups for children or adolescents suffering from epilepsy. Communication between health care professionals is once again stressed throughout the workshop. Parents who experience similar seizure events of their children can share these experiences and be partly relieved. Epilepsy is not a single condition on its own usually. Most of the times, a complex of symptoms may appear and this is indicative that other conditions may be related with epilepsy.

Leaflets on the condition need to be available to general practitioners, polyclinics and to all health care professionals. General practitioners need to be aware of available websites regarding this condition. Local councils, parish churches and youth clubs need to be involved in promotion in such a field. Fund raising activities need to be set up, apart from governmental resources. A question may be raised regarding to what extent a nursing mother that suffers from recurrent fits can adequately take care of her baby. The epilepsy topic needs to be part of continuing medical education and continuing education of other health care professionals. Advocacy of health care professionals, particularly doctors, is required in cases where patients suffering from epileptic fits are discriminated.