



## **EPILEPSY SUPPORT ASSOCIATION UGANDA**

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## **EPILEPSY & RELATIONSHIPS**

### **Relationships in general**

Most of us have many different types of relationships such as family, school friends, colleagues, intimate friendships and life partner. Relationship of any kind can be very rewarding, giving a sense of belonging, security and love. However, when a person has a pre-existing medical condition or is newly diagnosed, problems can occur even in a strong, loving relationship. Although there is general awareness that all relationships need to be nourished, there are times within a relationship when the partners need to work harder to develop or strengthen the bond. Below we cover possible areas of concern, which could occur in relationships where epilepsy is a factor.

### **To disclose or not to disclose**

Most people with epilepsy have normal healthy relationships in which their epilepsy causes no problems.

This may be because their seizures are well controlled or because they have a lifestyle where they are very open about their epilepsy, giving simple explanations and practical guidance to their friends etc. Forming new relationships can be a difficult time for any of us. Some people are shy, lack confidence or may not have had much experience in forming relationships. When a person has any medical condition it can be a difficult decision as to when and how to disclose their condition.

As epilepsy can still be misunderstood by most people who have not come into contact with the condition before, disclosing details of your own condition may cause concerns. Some people with epilepsy are very open, talking freely their condition, while others feel better giving their relationship time to bond before disclosing their condition. The choice in disclosure is a personal one and needs to be made according to what is best for the individual.

### **Understanding your partner's epilepsy**

Although 70% of people with epilepsy can have their seizures controlled with medication, just the fact that the person has epilepsy can in itself cause problems. Partners may respond to epilepsy in much the same way as the individual themselves: with denial, guilt or by searching for a reason. It may be tempting for the partner to overprotect, something which may affect the relationship. Therefore, it is advisable for both members of the relationship to understand epilepsy, talk to one another about their concerns and where relevant seek help or advice.



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### Social aspects

Some people with epilepsy may not have had the experience of forming relationships and the reasons for this will vary from person to person. This may be due to the lack of opportunities in developing social skills. For example:

- Frequent seizures causing worries about being in public places.
- Over protection as a child.
- The general public's attitude to epilepsy.
- One's own acceptance and understanding of epilepsy.

Epilepsy developing in adulthood can also have a debilitating effect on some individuals, potentially restricting social activities which could result in difficulties in meeting suitable life partners. The fact that they may not be able to drive could for some people be a social problem.

### Sexual Drive

In general, most people will need the comfort, pleasure and closeness that human contact can bring. Sexuality is a normal expression for men and women. And for people with epilepsy this is no different. In general sexual activity can be fulfilling, allowing an individual the potential to experience the same pleasure as other. The main anxiety for some people with epilepsy and their partner is that a seizure may occur during sexual intercourse. In fact, a seizure is no more likely to occur at this time than at any other any. Research does suggest a seizure is less likely to occur when a person with epilepsy is occupied or doing something they enjoy

In general, health sexuality relies on harmony of the body and mind. It is therefore known that sexual behaviour can be disturbed in many people with any chronic (i.e long-term) condition, including epilepsy. Such sexual problems may be as a result of an individual's emotional state, side effects of medication or dysfunction of the part of the brain concerned with mood feeling and instinct.

It is unclear at present whether some anti-epileptic medication causes alteration in several of the hormones which are responsible for our ability to become sexually aroused as the information in this area is limited and controversial.

Some doctors believe there is a connection between medication and its effect on our hormones which deal with our sexual desires, therefore suppressing these desires. When hypo sexuality (or low sex drive) occurs due to epilepsy or the medication it often causes concern which in turn could lead to difficulties in the relationship. Should anyone believe they are experiencing problems due to their epilepsy or its treatment, it is advisable to discuss this possibility with their neurologist.

Alternatively there are organizations unrelated to epilepsy which you may wish to contact. Contact Epilepsy Support Association Uganda their contact details.



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### **Impotence**

Most men at some time experience impotence and there can be various reasons for this, for example: stress, tiredness, illness, and alcohol. Your GP can arrange any necessary tests, treatment or referrals to a specialist if appropriate. It is unlikely that epilepsy will be directly responsible for impotence. However, as impotence could be due to psychological and /or physical problems, some individuals with epilepsy who experience these symptoms could find these factors having an effect on their sexual ability. In some instances, talking the situation over with their partner and /or GP can help. With regards to the possibility of anti-epileptic medication being the cause, some anti-epileptic drugs affect the liver and can therefore, theoretically cause a drop in testosterone level. If your doctor thinks that there is some connection between your impotence and your epilepsy or medication, she/he may decide to refer you to your epilepsy specialist.

### **Fertility**

There is limited information about the effects of epilepsy on fertility. One of the most recent population studies in Iceland showed that there was no difference in rates of fertility between men and women who had epilepsy and those without epilepsy. Other research does suggest that fertility rates appear to be slightly reduced in both men and women with epilepsy compared to the general population.

There are many couples, who successfully conceive and have perfectly health children irrespective of their epilepsy or anti-epileptic medication. Reduced fertility rates can be due, for example to life styles and seizure types (temporal lobe epilepsy). Some women may experience menstrual irregularities and also experience polycystic ovary syndrome, which could interfere with their ability to conceive. Should a person experience problems with fertility they should seek advice from their GP or neurologist.

### **Heredity**

Epilepsy itself is only inherited in a few very rare instances. However, people with a low seizure threshold may be more susceptible to epilepsy and this threshold may be passed down in the genes. Even if your child does inherit a low seizure threshold however, it is by no means certain that she/he will develop epilepsy.

### **Parenting**

Many people with epilepsy successfully care for and bring up their children, irrespective of the many practical steps that can be taken in order to ensure that the care of a young child is carried out as safely as possible. As with any parent some may need support in their parenting role, but this should be assessed on an individual basis. Any parent with concerns about coping with any aspect of the care of their young child should discuss these with any Social Worker.

Alternatively you can contact any nearest organization which offers support and advice on various parenting issues.



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Most people with epilepsy can and do enjoy the pleasure of having relationships. We hope this information will help individuals overcome their concerns and consequently feel more comfortable in forming relationships.