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epilepsy and family dynamics

Since time immemorial parents have protected their children, brothers and sisters have protected each other and virtually all members of society have protected the vulnerable. This is how it should be. The downside, however, is when the protection is overbearing and becomes restrictive so as to limit independence so lessening quality of life.

It is entirely appropriate to assess levels of risk in activities in relation to the presence of epilepsy and to take reasonable precautions to limit risk of injury. It is highly inappropriate, however, for a third party to impose restrictions which limit those who they are trying to help of their independence.

Family members have to be extremely careful not to try and live their loved ones lives for them. One the other hand, the one perceived to be needing the protection has a fine balancing act to perform in establishing a level of personal independence without offending those who so obviously care so much for their well being and safety.

If the problem of tensions arising as a result of epilepsy affecting a family member become intolerable it is possible, at least for an adult, to seek independent and confidential help. The most usual source of such help is through the family GP who can arrange help be provided through specialist agencies such as psychological or counselling services.

At the end of the day nobody wants to be at odds with a member of the family but at the same time nobody wants to be denied of their independence. If unpleasant collision courses are anticipated with family members the only way forward is to seek professional help, knowing that at the end of the day it is possible but improbable that there could be a break down, albeit almost certainly of a temporary nature, of relationships within the family.