

Talk Epilepsy

# Your Diary



**Your Diary** is designed to help you to become more involved in your epilepsy care. It's a simple way to monitor your seizures and treatment side effects and to check the impact that your epilepsy is having on your daily life and on your family. It will provide you with a record of the information you would like to share with your doctor at your next consultation.

## Your Diary will help you to:

- *Capture your day-to-day feelings*
- *Monitor your seizures*
- *Learn to recognise potential triggers for your seizures*
- *Record the side effects of your medication*
- *Prepare for your next visit*


## How Do I Feel?

Before your next consultation, use the checklist below to record any changes to your seizures and/or side effects of your medication, and to identify what you would like to discuss with your doctor.

Seizures	This is something I agree with (please tick)		I would like to talk about this (please tick)	
	Yes	No	Yes	No
I am having seizures more often				
My seizures are getting worse				
I am having new types of seizures				
My seizures are lasting for longer				
I often find that my seizures are triggered by:				
A late night				
Stress at work/school/family/other				
Not eating regularly				
Watching TV/computer				
Drinking alcohol (if applicable)				
Flickering lights				
Other (please state)				
<p><b>Please record any further observations regarding your seizures which may have been witnessed by someone you live with.</b></p>				

<b>Side Effects</b>  I am experiencing the following side effects from my current medication:	<b>This is something I agree with</b> (please tick)		<b>I would like to talk about this</b> (please tick)	
	Yes	No	Yes	No
Weight loss				
Weight gain				
Sleepiness				
Tiredness				
Irritability				
Difficulties concentrating				
Poor memory				
Changes in personality				
Headaches				
Dizziness				
Slow speech				
Tremor				
Difficulties finding words				
Skin rash				
Hair loss				
Excessive hair growth				
Acne				
Swollen gums				
Other (please state)				
<b>Other health changes</b>				
I have experienced changes in my general health				
I have started taking medication for another condition unrelated to my epilepsy				

More copies of this checklist can be found at [www.livebeyondepilepsy.com](http://www.livebeyondepilepsy.com)



**Talk Together** (on this site) is a one page document to summarise your most important diary entries, goals and questions. You may find it helpful to take this single form with you when you see your doctor rather than the full pack. It will help you focus on what you most want to discuss during your consultation.