Covid-Epilepsy follow-up questionnaire

General questions

Q: Have you previously completed the COVID epilepsy questionnaire on this website? **(*)**
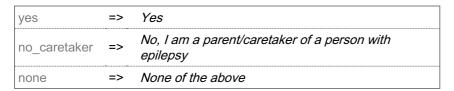
`Type: choice`

A: one of the following:

yes	=>	*Yes*
no	=>	*No*

Q: I am a person with epilepsy (*)

`Type: choice`

A: one of the following:

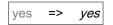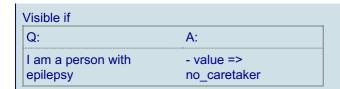|		
yes	=>	*Yes*
no_caretaker	=>	*No, I am a parent/caretaker of a person with epilepsy*
none	=>	*None of the above*

Q: If you are a parent/caretaker, please confirm that you will complete the questionnaire from the viewpoint of the person with epilepsy (*)
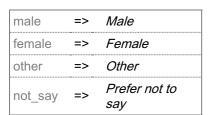
`Type: choice`

A: one of the following:

yes	=>	*yes*

Visible if	
Q:	A:
I am a person with epilepsy	- value => no_caretaker

Q: Age (in years) (*)

`Type: number`

A: number (min: 1 / max: 110 / step: 1)

Q: Gender (*)

`Type: choice`

A: one of the following:

male	=>	*Male*
female	=>	*Female*
other	=>	*Other*
not_say	=>	*Prefer not to say*

Q: Which country do you live in? (*)

A: one of the following:

Afghanistan	=>	*Afghanistan*
Albania	=>	*Albania*
Algeria	=>	*Algeria*
American Samoa	=>	*American Samoa*
Andorra	=>	*Andorra*
Angola	=>	*Angola*
Anguilla	=>	*Anguilla*
Antarctica	=>	*Antarctica*
Antigua & Barbuda	=>	*Antigua & Barbuda*
Argentina	=>	*Argentina*
Armenia	=>	*Armenia*
Aruba	=>	*Aruba*
Ascension Island	=>	*Ascension Island*
Australia	=>	*Australia*
Austria	=>	*Austria*
Azerbaijan	=>	*Azerbaijan*
Bahamas	=>	*Bahamas*
Bahrain	=>	*Bahrain*
Bangladesh	=>	*Bangladesh*
Barbados	=>	*Barbados*
Belarus	=>	*Belarus*
Belgium	=>	*Belgium*
Belize	=>	*Belize*
Benin	=>	*Benin*
Bermuda	=>	*Bermuda*
Bhutan	=>	*Bhutan*
Bolivia	=>	*Bolivia*
Bosnia & Herzegovina	=>	*Bosnia & Herzegovina*
Botswana	=>	*Botswana*
Bouvet Island	=>	*Bouvet Island*
Brazil	=>	*Brazil*
British Indian Ocean Territory	=>	*British Indian Ocean Territory*
British Virgin Islands	=>	*British Virgin Islands*
Brunei	=>	*Brunei*
Bulgaria	=>	*Bulgaria*
Burkina Faso	=>	*Burkina Faso*
Burundi	=>	*Burundi*
Cambodia	=>	*Cambodia*
Cameroon	=>	*Cameroon*
Canada	=>	*Canada*
Canary Islands	=>	*Canary Islands*
Cape Verde	=>	*Cape Verde*
Caribbean Netherlands	=>	*Caribbean Netherlands*

Cayman Islands	=>	*Cayman Islands*
Central African Republic	=>	*Central African Republic*
Ceuta & Melilla	=>	*Ceuta & Melilla*
Chad	=>	*Chad*
Chile	=>	*Chile*
China	=>	*China*
Christmas Island	=>	*Christmas Island*
Clipperton Island	=>	*Clipperton Island*
Cocos (Keeling) Islands	=>	*Cocos (Keeling) Islands*
Colombia	=>	*Colombia*
Comoros	=>	*Comoros*
Congo - Brazzaville	=>	*Congo - Brazzaville*
Congo - Kinshasa	=>	*Congo - Kinshasa*
Cook Islands	=>	*Cook Islands*
Costa Rica	=>	*Costa Rica*
Croatia	=>	*Croatia*
Cuba	=>	*Cuba*
Curaçao	=>	*Curaçao*
Cyprus	=>	*Cyprus*
Czechia	=>	*Czechia*
Côte d'Ivoire	=>	*Côte d'Ivoire*
Denmark	=>	*Denmark*
Diego Garcia	=>	*Diego Garcia*
Djibouti	=>	*Djibouti*
Dominica	=>	*Dominica*
Dominican Republic	=>	*Dominican Republic*
Ecuador	=>	*Ecuador*
Egypt	=>	*Egypt*
El Salvador	=>	*El Salvador*
Equatorial Guinea	=>	*Equatorial Guinea*
Eritrea	=>	*Eritrea*
Estonia	=>	*Estonia*
Eswatini	=>	*Eswatini*
Ethiopia	=>	*Ethiopia*
Falkland Islands	=>	*Falkland Islands*
Faroe Islands	=>	*Faroe Islands*
Fiji	=>	*Fiji*
Finland	=>	*Finland*
France	=>	*France*
French Guiana	=>	*French Guiana*
French Polynesia	=>	*French Polynesia*
French Southern Territories	=>	*French Southern Territories*
Gabon	=>	*Gabon*
Gambia	=>	*Gambia*
Georgia	=>	*Georgia*
Germany	=>	*Germany*

Ghana	=>	*Ghana*
Gibraltar	=>	*Gibraltar*
Greece	=>	*Greece*
Greenland	=>	*Greenland*
Grenada	=>	*Grenada*
Guadeloupe	=>	*Guadeloupe*
Guam	=>	*Guam*
Guatemala	=>	*Guatemala*
Guernsey	=>	*Guernsey*
Guinea	=>	*Guinea*
Guinea-Bissau	=>	*Guinea-Bissau*
Guyana	=>	*Guyana*
Haiti	=>	*Haiti*
Heard & McDonald Islands	=>	*Heard & McDonald Islands*
Honduras	=>	*Honduras*
Hong Kong SAR China	=>	*Hong Kong SAR China*
Hungary	=>	*Hungary*
Iceland	=>	*Iceland*
India	=>	*India*
Indonesia	=>	*Indonesia*
Iran	=>	*Iran*
Iraq	=>	*Iraq*
Ireland	=>	*Ireland*
Isle of Man	=>	*Isle of Man*
Israel	=>	*Israel*
Italy	=>	*Italy*
Jamaica	=>	*Jamaica*
Japan	=>	*Japan*
Jersey	=>	*Jersey*
Jordan	=>	*Jordan*
Kazakhstan	=>	*Kazakhstan*
Kenya	=>	*Kenya*
Kiribati	=>	*Kiribati*
Kosovo	=>	*Kosovo*
Kuwait	=>	*Kuwait*
Kyrgyzstan	=>	*Kyrgyzstan*
Laos	=>	*Laos*
Latvia	=>	*Latvia*
Lebanon	=>	*Lebanon*
Lesotho	=>	*Lesotho*
Liberia	=>	*Liberia*
Libya	=>	*Libya*
Liechtenstein	=>	*Liechtenstein*
Lithuania	=>	*Lithuania*
Luxembourg	=>	*Luxembourg*
Macao SAR China	=>	*Macao SAR China*

Madagascar	=>	*Madagascar*
Malawi	=>	*Malawi*
Malaysia	=>	*Malaysia*
Maldives	=>	*Maldives*
Mali	=>	*Mali*
Malta	=>	*Malta*
Marshall Islands	=>	*Marshall Islands*
Martinique	=>	*Martinique*
Mauritania	=>	*Mauritania*
Mauritius	=>	*Mauritius*
Mayotte	=>	*Mayotte*
Mexico	=>	*Mexico*
Micronesia	=>	*Micronesia*
Moldova	=>	*Moldova*
Monaco	=>	*Monaco*
Mongolia	=>	*Mongolia*
Montenegro	=>	*Montenegro*
Montserrat	=>	*Montserrat*
Morocco	=>	*Morocco*
Mozambique	=>	*Mozambique*
Myanmar (Burma)	=>	*Myanmar (Burma)*
Namibia	=>	*Namibia*
Nauru	=>	*Nauru*
Nepal	=>	*Nepal*
Netherlands	=>	*Netherlands*
Netherlands Antilles	=>	*Netherlands Antilles*
New Caledonia	=>	*New Caledonia*
New Zealand	=>	*New Zealand*
Nicaragua	=>	*Nicaragua*
Niger	=>	*Niger*
Nigeria	=>	*Nigeria*
Niue	=>	*Niue*
Norfolk Island	=>	*Norfolk Island*
Northern Mariana Islands	=>	*Northern Mariana Islands*
North Korea	=>	*North Korea*
North Macedonia	=>	*North Macedonia*
Norway	=>	*Norway*
Oman	=>	*Oman*
Outlying Oceania	=>	*Outlying Oceania*
Pakistan	=>	*Pakistan*
Palau	=>	*Palau*
Palestinian Territories	=>	*Palestinian Territories*
Panama	=>	*Panama*
Papua New Guinea	=>	*Papua New Guinea*
Paraguay	=>	*Paraguay*
Peru	=>	*Peru*

Philippines	=>	*Philippines*
Pitcairn Islands	=>	*Pitcairn Islands*
Poland	=>	*Poland*
Portugal	=>	*Portugal*
Puerto Rico	=>	*Puerto Rico*
Qatar	=>	*Qatar*
Romania	=>	*Romania*
Russia	=>	*Russia*
Rwanda	=>	*Rwanda*
Réunion	=>	*Réunion*
Samoa	=>	*Samoa*
San Marino	=>	*San Marino*
Saudi Arabia	=>	*Saudi Arabia*
Senegal	=>	*Senegal*
Serbia	=>	*Serbia*
Seychelles	=>	*Seychelles*
Sierra Leone	=>	*Sierra Leone*
Singapore	=>	*Singapore*
Sint Maarten	=>	*Sint Maarten*
Slovakia	=>	*Slovakia*
Slovenia	=>	*Slovenia*
Solomon Islands	=>	*Solomon Islands*
Somalia	=>	*Somalia*
South Africa	=>	*South Africa*
South Georgia & South Sandwich Islands	=>	*South Georgia & South Sandwich Islands*
South Korea	=>	*South Korea*
South Sudan	=>	*South Sudan*
Spain	=>	*Spain*
Sri Lanka	=>	*Sri Lanka*
St. Barthélemy	=>	*St. Barthélemy*
St. Helena	=>	*St. Helena*
St. Kitts & Nevis	=>	*St. Kitts & Nevis*
St. Lucia	=>	*St. Lucia*
St. Martin	=>	*St. Martin*
St. Pierre & Miquelon	=>	*St. Pierre & Miquelon*
St. Vincent & Grenadines	=>	*St. Vincent & Grenadines*
Sudan	=>	*Sudan*
Suriname	=>	*Suriname*
Svalbard & Jan Mayen	=>	*Svalbard & Jan Mayen*
Sweden	=>	*Sweden*
Switzerland	=>	*Switzerland*
Syria	=>	*Syria*
São Tomé & Príncipe	=>	*São Tomé & Príncipe*
Taiwan	=>	*Taiwan*
Tajikistan	=>	*Tajikistan*

Tanzania	=>	*Tanzania*
Thailand	=>	*Thailand*
Timor-Leste	=>	*Timor-Leste*
Togo	=>	*Togo*
Tokelau	=>	*Tokelau*
Tonga	=>	*Tonga*
Trinidad & Tobago	=>	*Trinidad & Tobago*
Tristan da Cunha	=>	*Tristan da Cunha*
Tunisia	=>	*Tunisia*
Turkey	=>	*Turkey*
Turkmenistan	=>	*Turkmenistan*
Turks & Caicos Islands	=>	*Turks & Caicos Islands*
Tuvalu	=>	*Tuvalu*
U.S. Outlying Islands	=>	*U.S. Outlying Islands*
U.S. Virgin Islands	=>	*U.S. Virgin Islands*
Uganda	=>	*Uganda*
Ukraine	=>	*Ukraine*
United Arab Emirates	=>	*United Arab Emirates*
United Kingdom	=>	*United Kingdom*
United States	=>	*United States*
Uruguay	=>	*Uruguay*
Uzbekistan	=>	*Uzbekistan*
Vanuatu	=>	*Vanuatu*
Vatican City	=>	*Vatican City*
Venezuela	=>	*Venezuela*
Vietnam	=>	*Vietnam*
Wallis & Futuna	=>	*Wallis & Futuna*
Western Sahara	=>	*Western Sahara*
Yemen	=>	*Yemen*
Zambia	=>	*Zambia*
Zimbabwe	=>	*Zimbabwe*
Åland Islands	=>	*Åland Islands*

Q: Which city do you live in? (*)

Type:
text

A: text input

Q: Relationship status (*)

Type: choice

A: one of the following:

single	=>	*Single*
in_a_relationship	=>	*In a relationship or married*

Q: Maximum educational level (*)

Type: choice

A: one of the following:

primary	=>	*Primary*
secondary	=>	*Secondary*
university_undergraduate_degree holder	=>	*University undergraduate degree*
university_postgraduate_degree	=>	*University postgraduate degree*
none	=>	*None*

Q: Who do you currently live with? (many answers possible) (*)

Type: choice_multiple

A: multiple answers possible:

parents	=>	*My parents*
spouse_partner	=>	*My spouse/partner*
children	=>	*My child(ren)*
siblings_relatives	=>	*My siblings or other family relatives*
friend	=>	*My friend(s)*
alone	=>	*I live alone*

Q: How would you describe your socio-economic situation? (multiple answers possible) (*)

Type: choice_multiple

A: multiple answers possible:

difficulties_feeding	=>	*Financial difficulties to feed properly*
difficulties_housing	=>	*Financial difficulties to pay for housing/bills*
difficulties_drugs	=>	*Financial difficulties to pay for anti-epileptic drugs*
no_difficulties	=>	*No financial difficulties*

Q: What is your job status at this moment? (*)

Type: choice

A: one of the following:

self-employed	=>	*I am self-employed*
employee	=>	*I am an employee*
retired	=>	*I am retired*
no_job	=>	*I have no job*
student	=>	*I am a student*
other	=>	*Other (please specify)*

Q: Please specify your job status

A: text input

Q:	A:
What is your job status at this moment?	- value => other

Q: If you have no job, were you already jobless before the implementation of COVID-19 restrictions in your country?(*)

Type: choice

A: one of the following:

yes	=>	Yes
no	=>	No

Visible if

Q:	A:
What is your job status at this moment?	- value => no_job

Psychosocial status: HADS-A and HADS-D

Tick the box beside the reply that is closest to how you have been feeling in the past week. Don't take too long over your replies; your immediate answer is the best.

HADS-A

Q: I feel tense or wound up (*)

Type: choice

A: one of the following:

0	=>	Not at all
1	=>	From time to time, occasionally
2	=>	Often
3	=>	Most of the time

Q: I get a sort of frightened feeling as if something awful is about to happen(*)

Type: choice

A: one of the following:

3	=>	Very definitely and quite badly
2	=>	Yes, but not too badly
1	=>	A little, but it does not worry me
0	=>	Not at all

Q: Worrying thoughts go through my mind (*)

Type: choice

A: one of the following:

3	=>	*Most of the time*
2	=>	*Often*
1	=>	*From time to time, but not too often*
0	=>	*Only occasionally*

Q: I can sit at ease and feel relaxed (*)

Type: choice

A: one of the following:

0	=>	*Definitely*
1	=>	*Usually*
2	=>	*Not often*
3	=>	*Not at all*

Q: I get a sort of frightened feeling like butterflies in the stomach(*)

Type: choice

A: one of the following:

0	=>	*Not at all*
1	=>	*Occasionally*
2	=>	*Quite often*
3	=>	*Very often*

Q: I feel restless as if I have to be on the move (*)

Type: choice

A: one of the following:

3	=>	*Very much indeed*
2	=>	*Quite often*
1	=>	*Occasionally*
0	=>	*Not at all*

Q: I get sudden feelings of panic (*)

Type: choice

A: one of the following:

3	=>	*Very often indeed*
2	=>	*Quite often*
1	=>	*Occasionally*
0	=>	*Not at all*

HADS-D

Q: I still enjoy the things I used to enjoy (*)

A: one of the following:

0	=>	Definitely as much
1	=>	Not quite as much
2	=>	Only a little
3	=>	Hardly at all

Q: I can laugh and see the funny side of things (*)

A: one of the following:

0	=>	As much as I always could
1	=>	Not quite so much now
2	=>	Definitely not so much now
3	=>	Not at all

Q: I feel cheerful (*)

A: one of the following:

3	=>	Not at all
2	=>	Not often
1	=>	Sometimes
0	=>	Most of the time

Q: I feel as if I am slowed down (*)

A: one of the following:

3	=>	Nearly all the time
2	=>	Very often
1	=>	Sometimes
0	=>	Not at all

Q: I have lost interest in my appearance (*)

A: one of the following:

3	=>	*Definitely*
2	=>	*I don't take as much care as I should*
1	=>	*I may not take quite as much care*
0	=>	*I take just as much care as ever*

Q: I look forward with enjoyment to things (*)

`Type: choice`

A: one of the following:

0	=>	*As much as I ever did*
1	=>	*Rather less than I used to*
2	=>	*Definitely less than I used to*
3	=>	*Hardly at all*

Q: I can enjoy a good book or radio or TV program (*)

`Type: choice`

A: one of the following:

0	=>	*Often*
1	=>	*Sometimes*
2	=>	*Not often*
3	=>	*Very seldom*

Covid-related questions

Q: Since the onset of COVID-19 in your country, have you experienced any of the following flu-like symptoms? (multiple answers possible) (*)

`Type: choice_multiple`

A: multiple answers possible:

fever	=>	*Fever*
headaches	=>	*Headaches*
sore_throat	=>	*Sore throat*
loss_taste	=>	*Loss of taste*
loss_smell	=>	*Loss of smell*
stuffy_nose	=>	*Stuffy and/or running nose*
dry_cough	=>	*Dry cough*
productive_cough	=>	*Productive cough*
shortness_breath	=>	*Shortness of breath*
muscle_pain	=>	*Muscle or body pains*
weakness	=>	*General weakness*
nausea	=>	*Nausea*
diarrhea	=>	*Diarrhea*
other	=>	*Other symptoms (specify)*

no_symptoms	=>	*I had no symptoms*

Q: Specify other symptom

`Type: text`

A: text input

Q: When did these symptoms appear?

`Type: choice`

A: one of the following:

last_two_weeks	=>	*Last two weeks*
last_month	=>	*Last month*
more_than_a_month_ago	=>	*More than a month ago*

Q: Since the beginning of the epidemic, have you been tested for COVID-19 infection? (*)

`Type: choice`

A: one of the following:

yes	=>	*Yes*
no	=>	*No*
do_not_know	=>	*Do not know*

Q: What was the result of the test? (*)

`Type: choice`

A: one of the following:

positive	=>	*Positive*
negative	=>	*Negative*
do_not_know	=>	*Do not know*
positive_negative	=>	*First positive, now negative*
negative_positive	=>	*First negative, now positive*

Q: When did your first test get positive?

A: one of the following:

last_two_weeks	=>	*Last two weeks*
last_month	=>	*Last month*
more_than_a_month_ago	=>	*More than a month ago*

Visible if		
Q:	A:	
0	- :input[name="what_was_the_result_of_the_test_"] =>	
1		
2	- :input[name="what_was_the_result_of_the_test_"] =>	
3		
4	- :input[name="what_was_the_result_of_the_test_"] =>	

Q: What was the reason you were tested? (*)

Type: choice

A: one of the following:

contact	=>	*I was in close contact with someone who had COVID-19 infection*
mandatory_screening	=>	*Mandatory screening at work*
regular	=>	*Regular screening before a medical procedure, e.g. pre-operative*
mass_screening_campaign	=>	*Mass screening campaign in my neighbourhood*
symptoms	=>	*I had flu-like symptoms*
do_not_know	=>	*Do not know*

Visible if	
Q:	A:
Since the beginning of the epidemic, have you been tested for COVID-19 infection?	- value => yes

Impact of COVID-19

Q: Where confinement measures implemented in your town residence? (*)

Type: choice

A: one of the following:

yes	=>	*Yes*
no	=>	*No*

Q: How did COVID-19 measures impact your daily life? (multiple answers possible) (*)

Type: choice_multiple

A: multiple answers possible:

lost_job	=>	*I lost my job*

work_home	=>	*I had to work from home*
temporary_jobless	=>	*I was temporary jobless since I cannot work from home and was not allowed to work in company*
not_go_outside	=>	*I was not allowed to go outside except for going to the supermarket*
not_see_people	=>	*I was not allowed to see people other than my housemates*
care_children	=>	*I had to care for my children every day*
other	=>	*Other (please specify)*
no-impact	=>	*No impact*

Q: Other (please speficy)

`Type: text`

A: text input

> **Visible if**
> | Q: | A: |
> |---|---|
> | :input[name="how_did_covid_impact_your_daily_life_multiple_answers_possible_[other]"] - checked => 1 | |

Q: How have the COVID-19 measures impacted your finances over the last few months? (*)

`Type: choice_scale`

A: Impact of COVID-19 lockdown on my incomeImpact of COVID-19 lockdown on my expenditure

increased	=>	*Increased*
decreased	=>	*Decreased*
no_change	=>	*No change*
not_applicable	=>	*Not applicable*

Q: If your income decreased during/after COVID-19 lockdown, please specify the reason (*)

`Type: choice`

A: one of the following:

lost_job	=>	*I lost my job during COVID*
less_income	=>	*I had less income/was temporary workless during COVID*
sick	=>	*I go sick*
other	=>	*Other (please specify)*

> **Visible if**
> | Q: | A: |
> |---|---|
> | :input[name="how_have_the_covid_19_measures_impacted_your_finances_over_the_l[impact_income]"] | - value => decreased |

Q: If you got sick, please specify (multiple anwers possible) (*)

`Type: choice_multiple`

A: multiple answers possible:

diagnosis_COVID	=>	*I was diagnosed with COVID-19*
diagnosis_other	=>	*I was diagnosed with another disease*

Q: Other reason (please speficy)

Type: text

A: text input

Q: Have you been vaccinated against seasonal flu since september 2019? (*)

Type: choice

A: one of the following:

yes	=>	*Yes*
no	=>	*No*

Q: Would you consider vaccination against the flu for the coming season? (*)

Type: choice

A: one of the following:

yes	=>	*Yes*
no	=>	*No*

Q: As a person with epilepsy, I have a higher risk of getting infected with COVID-19(*)

Type: choice

A: one of the following:

true	=>	*True*
false	=>	*False*

Epilepsy related questions

Q: Compared to the period before the implementation of COVID-19 restrictions, how would you describe your seizure frequency? (*)

Type: choice_scale

A: During the lockdown periodDuring the last two weeks

increased	=>	*Increased*
decreased	=>	*Decreased*
no_change	=>	*No change*
not_applicable	=>	*Not applicable*

Q: Are you currently taking anti-epileptic drugs? (*)

`Type: choice`

A: one of the following:

yes	=>	*Yes*
no	=>	*No*

Q: How many anti-epileptic drugs (AED) are you currently taking? (*)

`Type: choice`

A: one of the following:

1	=>	*1*
>1	=>	*>1*

Visible if	
Q:	A:
Are you currently taking anti-epileptic drugs?	- value => yes

Q: Was your anti-epileptic drug (AED) therapy adapted during COVID? (*)

`Type: choice`

A: one of the following:

yes_switched	=>	*Yes, I was switched to other AED*
yes_dose_increased	=>	*Yes, the dose of my AED was increased*
yes_dose_reduced	=>	*Yes, the dose of my AED was reduced*
yes_other	=>	*Yes, other (specify)*
postpone_changes	=>	*We decided to postpone changes until after COVID-19*
no	=>	*No, this was never mentioned*
not_applicable	=>	*Not applicable*

Q: Please specify other

`Type: text`

A: text input

Visible if	
Q:	A:
Was your anti-epileptic drug (AED) therapy adapted during COVID?	- =>

Q: Between January and June 2020, did you encounter problems obtaining your anti-epileptic drug (AED) treatment due to the measures taken against the coronavirus? (multiple answers possible) (*)

A: multiple answers possible:

no	=>	No, I had no problems getting my anti-epileptic treatment
yes_not_available	=>	Yes, because AEDs were not available at the hospital/pharmacy
yes_cannot_go	=>	Yes, because I couldn't go to the hospital/pharmacy due to COVID-19 related mobility restrictions
yes_no_income	=>	Yes, because I had no/less income to buy AEDs because of COVID-19
yes_other	=>	Yes, for other reasons (specify)

Visible if	
Q:	A:
Are you currently taking anti-epileptic drugs?	- value => yes

Q: Specify other reasons

A: text input

Visible if	
Q:	A:
:input[name="did_you_encounter_problems_obtaining_your_aed_treatment_due_to_t[yes_other]"] - checked => 1	

Q: Did this lead to an increase in seizure frequency? (*)

A: one of the following:

yes	=>	Yes
no	=>	No

Visible if	
Q:	A:
0	- :input[name="did_you_encounter_problems_obtaining_your_aed_treatment_due_to_t[yes_not_available]"] =>
1	
2	- :input[name="did_you_encounter_problems_obtaining_your_aed_treatment_due_to_t[yes_cannot_go]"] =>
3	
4	- :input[name="did_you_encounter_problems_obtaining_your_aed_treatment_due_to_t[yes_no_income]"] =>
5	
6	- :input[name="did_you_encounter_problems_obtaining_your_aed_treatment_due_to_t[yes_other]"] =>

Q: Since July 2020, did you encounter problems obtaining your anti-epileptic drug (AED) treatment due to the measures taken against the coronavirus? (multiple answers possible) (*)

A: multiple answers possible:

no	=>	No, I have no problems getting my anti-epileptic treatment
yes_not_available	=>	Yes, because AEDs were not available at the hospital/pharmacy
yes_cannot_go	=>	Yes, because I cannot go to the hospital/pharmacy due to COVID-19 related mobility restrictions
yes_no_income	=>	Yes, because I have no/less income to buy AEDs because of COVID-19
yes_other	=>	Yes, for other reasons (specify)

<div style="background:#cfe2e8">

Visible if

Q:	A:
Are you currently taking anti-epileptic drugs?	- value => yes

</div>

Q: Specify other reasons

`Type: text`

A: text input

<div style="background:#cfe2e8">

Visible if

Q:	A:
:input[name="since_july_2020_did_you_encounter_problems_obtaining_your_anti_e[yes_other]"] - checked => 1	

</div>

Q: Did this lead to an increase in seizure frequency? (*)

`Type: choice`

A: one of the following:

yes	=>	*Yes*
no	=>	*No*

<div style="background:#cfe2e8">

Visible if

Q:	A:
0	- :input[name="since_july_2020_did_you_encounter_problems_obtaining_your_anti_e[yes_not_available]"] =>
1	
2	- :input[name="since_july_2020_did_you_encounter_problems_obtaining_your_anti_e[yes_cannot_go]"] =>
3	
4	- :input[name="since_july_2020_did_you_encounter_problems_obtaining_your_anti_e[yes_no_income]"] =>
5	
6	- :input[name="since_july_2020_did_you_encounter_problems_obtaining_your_anti_e[yes_other]"] =>

</div>

Q: Was the unavailability of anti-epileptic drugs (AED) already a problem before the onset of COVID? (*)

`Type: choice`

A: one of the following:

yes	=>	*Yes*
no	=>	*No*

Q: Did you experience reluctance to seek medical care because of COVID-19? (multiple answers possible)(*)

`Type: choice_multiple`

A: multiple answers possible:

no	=>	*No*
yes_fear	=>	*Yes, due to fear of getting infected with COVID-19*
yes_symptoms_not_important	=>	*Yes, because I thought my symptoms were not that important during the pandemic*
yes_occupied_healthcare_providers	=>	*Yes, because I thought healthcare providers were occupied*
yes_healthcare_less_accessible	=>	*Yes, because healthcare was less accessible during COVID-19*
yes_other	=>	*Yes, for other reasons (specify)*

Q: Please specify for other reasons

`Type: text`

A: text input

Q: Are you taking anti-depressants/anxiolytic treatment? (*)

`Type: choice`

A: one of the following:

yes_long_time	=>	*Yes, since a long time*
yes_since_covid	=>	*Yes, I started taking them during the COVID-19 epidemic period*
no	=>	*No*

Q: Did you have any doctor's visit planned during the COVID-19 lockdown period? (*)

`Type: choice`

A: one of the following:

yes	=>	*Yes*
no	=>	*No*

Q: If yes, what happened to this planned visit given the confinement measures? (*)

`Type: choice`

A: one of the following:

cancelled_me	=>	Was cancelled by me
cancelled_healtcare_provider	=>	Was cancelled by the healthcare provider
changed_to_telephone_consult	=>	Was changed to telephone consult
took_place	=>	Took place as planned
changed_to_video_consult	=>	Was changed to video consult

Visible if

Q:	A:
Did you have any doctor's visit planned during the COVID-19 lockdown period?	- value => yes

Q: If changed to telephone or video consult, had this already taken place?(*)

`Type: choice`

A: one of the following:

yes	=>	Yes
no	=>	No

Visible if

Q:	A:
0	- :input[name="if_yes_this_vist"] =>
1	
2	- :input[name="if_yes_this_vist"] =>

Q: On a scale of 1 (totally disagree) to 5 (totally agree), to what extent do you agree with the following statements?(*)

`Type: choice_scale`

A: I was very satisfied with the telephone or video consultI was able to discuss everything I planned to discussI was equally satisfied as with an in-person meeting

1	=>	1
2	=>	2
3	=>	3
4	=>	4
5	=>	5

Visible if

Q:	A:
If changed to telephone or video consult, had this already taken place?	- value => yes

Q: What did you discuss during the telephone or video consultation (multiple answers possible)(*)

`Type: choice_multiple`

A: multiple answers possible:

seizure_situation	=>	Discussion of seizure situation
test_results	=>	Discussion of test results

evaluation_treatment	=>	*Evaluation of treatment and possible side effects*
scheduling_investigations	=>	*Scheduling of new investigations*
prescription	=>	*Writing prescription for anti-epileptic drug*
COVD-19_related_worries	=>	*Discussion of COVD-19 related worries*
psychological_problems	=>	*Discussion of psychological problems*
requested_in-person_meeting	=>	*I was requested to come to the hospital for an in-person meeting*
requested_admission	=>	*I was requested to come to the hospital for an admission*
other	=>	*Other (specify)*

Visible if	
Q:	A:
If changed to telephone or video consult, had this already taken place?	- value => yes

Q: Please specify other

Type: text

A: text input

Visible if	
Q:	A:
:input[name="what_did_you_discuss_during_the_telephone_or_video_consultation_[other]"] - checked => 1	

Q: At the present moment, how do you feel about going to the hospital for a follow-up visit with your doctor? (many answers possible) (*)

Type: choice_multiple

A: multiple answers possible:

safe	=>	*I think it is safe to go to the hospital now*
scarred_infected	=>	*I am still scared of getting infected with COVID-19 in the hospital*
busy_healthcare_providers	=>	*I think that the healthcare providers are still very busy with COVID-19*
prefer_telephone_video_consultations	=>	*I prefer telephone/video consultations, and I want to continue that way*
other	=>	*Other (specify)*

Q: Please specify other

Type: text

A: text input

Visible if	
Q:	A:
:input[name="at_the_present_moment_how_do_you_feel_about_going_to_the_hospita[other]"] - checked => 1	

Q: Do you belong to an association that supports persons with epilepsy? (*)

Type: choice

A: one of the following:

yes	=>	*Yes*
no	=>	*No*

Q: I fully understand what this study is about, and I consent to participate. All the information I provide can be used by researchers to better understand the impact of the coronavirus pandemic on persons with epilepsy. (*)

`Type: checkbox`

A: checkbox

Q: I consent to be contacted for a follow-up survey in a few weeks

`Type: checkbox`

A: checkbox

Q: Please provide an e-mail address to contact you in a few weeks

`Type: text`

A: text input

Visible if	
Q:	A:
I consent to be contacted for a follow-up survey in a few weeks	- checked => 1