

**ESTIGMA PERCIBIDO Y CALIDAD DE VIDA RELACIONADA CON LA SALUD
EN PACIENTES CON DIAGNÓSTICO DE EPILEPSIA EN LA GUAJIRA**

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RESUMEN

Introducción: Debido a la complejidad y curso crónico de la epilepsia, las personas con esta enfermedad se enfrentan a varios factores de carga social y psicológica que pueden ser generados por el estigma percibido, impactando en la calidad de vida relacionada con la salud mediante la discriminación y la autopercepción negativa. **Objetivo:** Analizar la relación entre el estigma percibido y el compromiso de la calidad de vida relacionada con la salud en pacientes con diagnóstico de epilepsia en el departamento de la Guajira. **Metodología:** Estudio cuantitativo, descriptivo transversal con fase analítica correlacional, constituido por 135 pacientes con diagnóstico de epilepsia de la Fundación Vida Con Amor IPS, en La Guajira Colombia. **Resultados:** El 50.4% fueron hombres; media de edad de 43 años y media de presentación de crisis epilépticas 24,8 años (DE:18,8), 59% presentaron estigma leve-moderado ($p=0.8$), 53% regular calidad de vida, relación 1:1 con el sexo ($p=0.8$). Existe correlación moderada entre el compromiso de la calidad de vida y el estigma percibido por la población de estudio ($p<0,000$). **Conclusiones:** Gran parte de la población se siente estigmatizada y más de la mitad tiene algún grado de compromiso en su calidad de vida relacionada con la salud, las variables clínicas que presentaron relación con dicha variable fueron: privación de sueño, cambios en la temperatura, etiología de la epilepsia y número de fármacos anticrisis, las situaciones estresantes fue la única que se relacionó con la calidad de vida y el estigma percibido.

Palabras clave: Epilepsia, calidad de vida, calidad de vida relacionada con la salud, estigma.

ABSTRACT

Introduction: Due to the complexity and chronic course of epilepsy, people with this condition face various social and psychological factors that can be generated by perceived stigma, impacting the human health related to the quality of life through discrimination and negative self-perception. **Objective:** To analyze the relationship between perceived stigma and the compromise of quality of life related to health in patients diagnosed with epilepsy in the department of La Guajira. **Methodology:** Quantitative study, cross-sectional descriptive study with correlational analytical phase, consisting of 135 patients with a diagnosis of epilepsy from the Foundation Vida con Amor IPS of La Guajira, Colombia. **Results:** 50.4% were male; age range 43 years and mean age of onset of epileptic seizures 24.8 years (SD: 18.8), 59% had mild-moderate stigma ($p=0.8$), 53% reported regular quality of life, with a 1:1 ratio between sexes ($p=0.8$). There is a moderate correlation between the compromise of quality of life and the perceived stigma by the study population ($p<0.000$).

Conclusions: A significant part of the population feels stigmatized, and more than half have some degree of compromise in their health-related to quality of life. Clinical variables related to this, included sleep deprivation, changes in temperature, epilepsy etiology, and the number of anti-epileptic medications. Stressful situations were the only factor related to both quality of life and perceived stigma.

Keywords: Epilepsy, quality of life, health-related quality of life, stigma.

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