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| **Supplementary table 1: Semi-structured interview for patients and caregivers** |
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| PATIENTS AND CAREGIVERS |
|  What do you remember from the episode of hepatic encephalopathy? |
|  What happened to you?  |
|  Did you notice something special the days prior to the episode of hepatic encephalopathy?  |
|  Were you aware that an episode of hepatic encephalopathy was likely staring?  |
|  Which feelings did you have?  |
|  Did you act in a special manner?  |
|  Would you like to avoid these situations?  |
|  Do you know the measures that could reduce the risk of these episodes? |
|  Are you afraid to have another episode of hepatic encephalopathy? Why? |
|  How did the episode of hepatic encephalopathy affect your life? |
|  Tell me about your spiritual or religious experiences  |
| ONLY PATIENTS |
|  After you woke up from hepatic encephalopathy, which feelings did you have?  |
| ONLY CAREGIVERS |
|  How is your family living the experience of hepatic encephalopathy? |
|  Do you feel frustration to face an episode of hepatic encephalopathy? Why? |
|  Has the disease changed the extended family relationship? |
|  Has the experience of hepatic encephalopathy affected your personal life? In which way? |
|  If you have a job, what is the impact on you working life? |
|  Which measures do you think could be done to minimize the impact on your personal life? |
|  In your opinion, how can you help your relative? |
|  Do you have any economic help thru private or public insurance?  |
|  Which measures, do you think that might be done in order to minimize the impact in your personal life? |
|  In your opinion, what can you help your relative? |
|  Grants received, whether or not cash contributions ( careers, relatives, …)  |
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