

## WHAT YOU NEED TO KNOW ABOUT STROKES

- A stroke is a sudden diminution or loss of consciousness, sensation, and voluntary motion caused by rupture or obstruction (as by a clot) of a blood vessel of the brain, cutting off vital blood flow and oxygen to the brain.
- In the U.S., stroke is the third leading cause of death, killing 160,000 people each year, and is the leading cause of adult disability.
- Approximately 780,000 strokes will occur this year, however 500,000 of those strokes can be prevented.
- Strokes can happen to anyone at anytime, regardless of race, sex, or age.
- Two million brain cells die every minute during a stroke, increasing the risk of permanent brain damage, disability, or death.

### Types of Stroke:

- **Ischemic Stroke** occurs when arteries are blocked by blood clots or by the gradual buildup of plaque and other fatty deposits. Almost 85% of all strokes are ischemic,
- **Hemorrhagic Stroke** occurs when a blood vessel in the brain breaks, leaking blood into the brain. Hemorrhagic strokes account for about 15% of all strokes, yet are responsible for more than 30% of all stroke deaths.

**Recognizing symptoms and acting fast to get medical attention can save a life and help to limit disabilities.**

### Recognizing Symptoms

Few Americans know the symptoms of a stroke. Learning them, and acting FAST when they occur, could save your life or the life of a loved one.

### Common stroke symptoms include:

- Sudden numbness or weakness of the face, arm, or leg- especially on one side of the body.
- Sudden confusion, trouble speaking, or understanding.
- Sudden trouble seeing in one or both eyes.
- Sudden trouble walking, dizziness, loss of balance, or coordination.
- Sudden severe headache with no known cause.

### This simple test will help you detect stroke symptoms and Act F.A.S.T.:

- **F – FACE** Ask the person to smile. Does one side of the face droop?
- **A – ARM** Ask the person to raise both arms. Does one arm drift downward?
- **S – SPEECH** Ask the person to repeat a simple sentence. Does the speech sound slurred or strange?
- **T – TIME** If you observe any of these signs, it is time to call 911 or get to the nearest stroke center or hospital.

### Reducing Stroke Risk

Everyone has some stroke risk. A few stroke risk factors are beyond your control, such as being over age 55, being male, being an African American, having diabetes, and having a family history of stroke. If you have one of these risk factors, it is even more important that you learn about the lifestyle and medical changes you can make to prevent a stroke.

Medical stroke risk factors include: previous stroke, previous episode of transient ischemic attack (TIA) or mini stroke, high cholesterol, high blood pressure, heart disease, atrial fibrillation, and carotid artery disease. These medical risk factors can be controlled. Talk with your doctor about what will work best for you.

Lifestyle stroke risk factors include: smoking, being overweight, and drinking too much alcohol. You can control these lifestyle risk factors by quitting smoking, exercising regularly, watching what and how much you eat, and limiting alcohol consumption.

### **Common Disabilities After a Stroke:**

- Mobility problems are common during the acute stroke period, but a large majority of survivors are able to walk with or without assistance six months to a year later.
- Basic activities of daily self-care functions, such as dressing, bathing, feeding, toileting, and grooming that a person must perform to be independent may become impossible.
- Communication often becomes a challenge for stroke victims. It is common to experience some spontaneous improvement though.
- Balance and coordination become problems that can be demonstrated by doing finger-to-nose, heel-to-shin, and alternating movement tests. Numbness, tingling, abnormal sensations, and excessive reactions to sensory stimuli are common.
- Visual deficits are very common, especially homonymous hemianopsia.
- Unilateral neglect is when the patient lacks awareness of a specific part of the body. This usually occurs on the less dominant side, usually right hemisphere. In these patients, sensory stimuli in the left half of the environment are muted and ignored.
- Speech and language deficits effect verbal expression, reading, and writing. It becomes very difficult to name objects, and fluency and adequacy of content.
- Pain such as headache, neck pain, or face pain can result from a stroke.

### **Closer Look**

As a caregiver of a stroke victim, my best advice would be to get as close to your patient as possible, and try to understand them the best way you can. It's important to realize that every stroke patient is going to have different needs. The key to effective care is not necessarily the medications or ways of effective care that you read about in books/articles. However, from personal experience I've found that the most effective care comes from compassion, patience, and a personal understanding of your patient. It's important to remember that although your patient's life has been changed permanently, you need to be optimistic. It's also important to realize that you don't know what it's like to go through a stroke, and how it feels to be the burden of others. Life is not always fair, and those who deserve good don't always receive good. But there is life after stroke. Nothing is impossible, however life has just changed. Dignity is a very important word when dealing with a stroke victim. Treat the person with the same dignity you would want given to you. There is more than hope after a stroke, there is life, and this is my personal advice for effective care of your stroke victim.