



Journey to Good Health

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Stroke: Heading Off Disability

Before his stroke, Clifford was a professor who spoke three languages fluently. He is now on permanent disability and able to communicate only simple needs and emotions.

Virginia was more fortunate but even so, her stroke left her with weakness on one side of her body that causes problems for her even if some of her friends barely notice the disability.

Stroke is the third leading cause of death in the United States and the number one cause of disability. It occurs most commonly when blood flow to the brain is interrupted, usually related to blockage of a blood vessel. A less common cause, but one that often has catastrophic consequences, is a hemorrhage that occurs when a blood vessel in the brain bursts or leaks.

A stroke is a brain attack - a sudden rapid assault - and the extent of damage it causes is, to some degree, a matter of chance - where in the brain the attack occurs and the amount of brain that is damaged.

There are, however, specific things you can do to keep from having a stroke or to lessen the risk of death or disability if you do.

The first thing you should do is know your risk factors and do everything you can to lower them.

Some risk factors, such as age, cannot be changed. Once you're 55, your risk of suffering a stroke doubles with each passing decade. Men are more vulnerable than women. If your father, mother, sister or brother suffered a stroke, your own risk is also high.

Persons with atrial fibrillation, an abnormal heart rhythm, also have a high risk of suffering a stroke.

While there is nothing you can do about your age, gender or family medical history, you can pay closer attention to following a protective lifestyle if you have a higher than average risk of stroke.

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You can reduce your risk of stroke by 1) avoiding first- and second-hand cigarette smoke, 2) monitoring your cholesterol and blood pressure and 3) eating a diet that will keep both low.

Hypertension is a major risk factor for stroke, but the risk falls considerably if the condition is detected early and brought under control with medication and a diet that includes five servings of fruit and five servings of vegetables every day plus whole grains and low-fat dairy products.

Weight control and regular exercise are crucial to controlling hypertension as well as the risk of stroke.

The second thing you can do to head off the disability of a stroke is to know the signs and to take quick action should they occur. A stroke is a medical emergency - no question about it - and every minute lost in getting definitive treatment means additional damage to the brain.

You probably know the signs of a heart attack, but do you know the signs of a stroke? You should.

- Sudden weakness, numbness or paralysis of the face, arm or leg (especially on one side).
- Loss of speech or trouble talking or understanding.
- Sudden loss of vision, particularly in one eye.
- A sudden, severe headache with no apparent cause.
- Unexplained dizziness, loss of balance or coordination.

Other symptoms may include confusion, nausea, vomiting, fever, fainting or convulsions.

Many individuals suffer mini-strokes or transient ischemic attacks (TIAs) with symptoms that last only briefly - from a few minutes to several hours. These are caused by a partial blockage or temporary interruption of blood flow and should be taken seriously as a warning sign. A full-blown stroke usually follows, often within a few days but sometimes several weeks later.

It's important that a stroke patient get immediate treatment in an emergency center that has up-to-date diagnostic equipment and a skilled medical team.

Once a proper diagnosis is made, determining whether the stroke is ischemic or hemorrhagic, emergency room staff can take quick action to either restore blood flow or stop the hemorrhage. Timely use of clot-dissolving drugs and other medications can make an enormous difference.

The final thing you can do to prevent disability after you've had a stroke, is to conscientiously follow your rehabilitation program. Some of the greatest advances in stroke treatment have come in the area of rehabilitation.

About 700,000 Americans suffer a stroke every year. Their chances of full or nearly full recovery depend a lot on how much they know about stroke - the risk factors, signs, the need for quick action and, once a stroke has occurred, long-term rehabilitation.

St. Agnes Hospital has been designated as a Primary Stroke Center. This means a special stroke center team is able to rapidly care for patients who may have suffered a stroke and provide early interventions, such as the clot-busting drug TPA, which can help limit the stroke's effect and enhance recovery.