

Stroke / TIA

Patient and Family Education Booklet

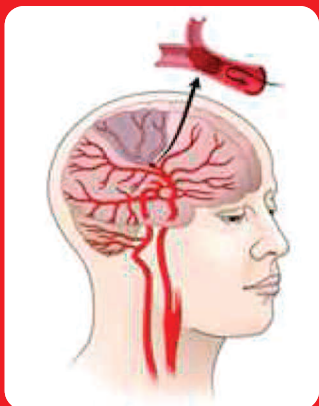
An outline map of the state of Connecticut is centered on the page. The map is white with a black border. The top portion of the map is contained within a red rounded rectangle, while the bottom portion extends below it.

**Building healthier lives,
free of cardiovascular diseases and stroke
for Connecticut Residents.**

**Learn to recognize a stroke.
Because time lost is brain lost.**

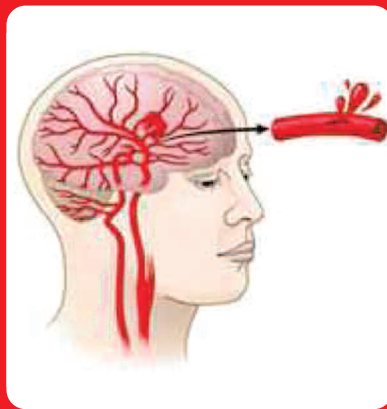
What is a stroke?

There are two major types of stroke. A stroke occurs when the blood supply to the brain is interrupted causing brain cells to die. When the blood supply is interrupted to certain parts of the brain that control speech, strength or vision, patients may experience symptoms such as paralysis, speech and / or visual problems.



Ischemic Stroke

Blood clot stops the flow of blood to an area of the brain.



Hemorrhagic Stroke

Weakened/diseased Blood vessels rupture Blood leaks into brain tissue

Persons who have had one stroke are at risk of having another stroke. It is important to understand what your own risk factors are for stroke and to reduce the chances of having another stroke by reading this booklet and following the recommendations. Please be sure to ask your nurse or doctor any questions you might have about this information or about your recovery care.

Risk factors that cannot be changed or controlled:

Advanced Age

Stroke affects people of all ages, but stroke risk increases with older age. After the age of 55, the risk of having a stroke more than doubles for every ten years of life.

Gender

Men's stroke incidence rates are greater than women's at younger ages, but not at older ages. Each year, about 55,000 more women than men have a stroke. Women of child bearing age who take birth control pills and have other risk factors such as hypertension, migraines or a smoking history are at increased risk for stroke.



Heredity and Race

Having a close blood relative such as your mother or father that has had a stroke increases your risk of having a stroke. African Americans have twice the risk of having a stroke when compared to whites. This is partly due to higher rates of high blood pressure and diabetes in this group. Hispanic Americans are also at a higher risk of having a stroke.

Previous Stroke

If you have had a stroke you are at a higher risk of having another stroke. That is why it is important to make changes in your life to reduce the risks that you can control.

Risk factors you can change or control:

High Blood Pressure (Hypertension)

Hypertension is the most common cause of stroke and is therefore the most important risk factor to control. Causes of hypertension can include a family history of high blood pressure, obesity, a high salt diet, smoking, physically inactive, stress and ethnicity (with African Americans developing hypertension earlier in life).

Diabetes

Diabetes increases your risk of having a stroke because elevated blood sugar changes the walls of the blood vessels in the brain causing either blockages or vessel wall rupture.

Carotid or other Artery Disease

The carotid arteries in your neck supply most of the blood to your brain. Damage caused by fatty buildup inside the artery can cause blockages and stroke.

Atrial Fibrillation or other Heart Disease

When the upper chambers of the heart don't pump effectively blood can clot, increasing the risk of a stroke. Other types of cardiovascular disease can increase the risk of stroke too.

Blood Disorders

Blood disorders, such as sickle cell anemia causes the blood to stick to the blood vessel walls and clog them.

Tobacco Use

Cigarettes and other tobacco products can cause damage to the blood vessels and increase the risk of stroke.



TIA's (Transient Ischemic Attack)

A TIA is a "warning stroke" or "mini-stroke" that produces stroke-like symptoms which usually resolve in within minutes or hours and cause no lasting damage to the brain. While the vast majority of strokes are not preceded by TIA, about a third of people who experience TIA go on to have a stroke within a year. Recognizing and treating TIA's can reduce the risk of a major stroke.

High Cholesterol

Too much cholesterol can cause fatty buildup in your blood vessels which can clog an artery causing a stroke. Ask your doctor to check your lipid profile to keep tabs on your cholesterol numbers.

Physical Inactivity and Obesity

Both of these factors increase your chance of having cardiovascular disease.

Excessive Alcohol Intake and Illegal Drug Use

More than an average of one drink per day for women and two per day for men can raise your blood pressure. Binge drinking can also lead to a stroke. Intravenous drug use carries a risk of stroke. Cocaine use has been linked with sudden cardiac arrest and stroke.

Warning signs and symptoms of stroke:

- 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, or loss of balance or coordination.
- Sudden, severe headache with no known cause.



What to do if you are having symptoms:

CALL 9-1-1

- Not all the warning signs occur in every stroke. Don't ignore signs of stroke, even if they go away!
- Check the time. When did the first warning sign or symptom start? You or the person who is with you will be asked this important question later. Treatment needs to occur as soon as possible. A clot-busting drug or other treatments may reduce long term disability for patients with an ischemic stroke, the most common stroke type.
- If you have one or more stroke symptoms, don't delay! Immediately call 9-1-1. Do not drive yourself to the nearest hospital!
- Expect the person experiencing symptoms to resist going to the hospital. Don't take "no" for an answer because Time Lost is Brain Lost.
- When communicating with Emergency Medical Services or the hospital, make sure to use the word "STROKE."



What to do after you leave the hospital: Need for follow-up medical care after discharge.

- You must take your medications exactly as prescribed by your doctor in order for them to be effective in reducing your risk of another stroke. You must continue taking these medications until you have seen your primary care doctor or neurologist for your first follow-up appointment after discharge.
- The medications are most effective when they help you reach the goal of lowering each of your risk factors. The doses of your medications may be adjusted by your primary care doctor at your first follow-up visit.
- Do not stop taking your medications without first speaking to your doctor.
- It is important that you receive regular medical care after you leave the hospital since this is how the doctors can measure the effectiveness of the treatments and make sure your medicines are adjusted properly. Make sure you have a plan for which doctor(s) you will see and when to see them after you leave the hospital. Be sure you bring your list of medications with you to all doctor visits.
- Your doctor will help ensure that you are getting the right rehabilitation services if you have problems with weakness, difficulty speaking or problems with your memory.
- **Call 9-1-1 if you have recurrent stroke symptoms!**



Did you know...

Each year about 795,000 people experience a new or recurrent stroke.

On average, every 40 seconds someone in the United States has a stroke.

A person who has had one or more TIAs is more likely to have a stroke than someone of the same age and sex who hasn't had a TIA.

The risk of ischemic stroke in current smokers is about double that of nonsmokers after adjustment for other risk factors.

Spanish-speaking Hispanics are less likely to know all stroke symptoms, and far less likely to know all heart attack symptoms, than English-speaking Hispanics, non-Hispanic blacks and non-Hispanic whites.

The good news...

You can improve your health, even if you've had a stroke. A healthy lifestyle plays a big part in decreasing disability and death from stroke and heart attack. Here are the steps to take:

- Don't smoke.
- Improve your eating habits.
- Be physically active.
- Take your medicine as directed.
- Get your blood pressure checked and control it if it's high.
- Reach and maintain a healthy weight.
- Decrease your stress level.
- Seek emotional support when it's needed.
- Have regular medical checkups.

Stroke Resources

Stroke Family Support Network

1-888-4STROKE

www.strokeassociation.org

The Stroke Family Support Network is the National Stroke outreach program of the American Stroke Association.

The Stroke Family "Warmline" (1-888-4STROKE) is a toll free information and referral service for post-stroke information and materials. Callers are assisted by stroke survivors and caregivers.

Stroke Connection Magazine, is a consumer health education and outreach publication about stroke for stroke survivors, caregivers, family members and healthcare professionals. Individuals can subscribe to the magazine by calling the Warmline or via the Stroke Association's website.

Support Groups can be located by contacting the your local hospital, Infoline or the American Stroke Association's Warmline.

Infoline

Dial 2-1-1

www.infoline.org

Stroke Coordinators of Connecticut



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This education booklet was produced by the Stroke Coordinators of Connecticut in conjunction with the American Stroke Association.

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