

Stroke Facts 2011

Stroke Awareness

May 1st kicks off National Stroke Awareness month geared towards reducing the incidence and impact of stroke through compelling education programs focused on prevention, treatment, rehabilitation and support for all impacted by stroke. “I’m excited to be a member of the National Stroke Association team because I believe understanding the early warning signs of stroke is very important and can prevent some of the long-term damage that can occur in stroke survivors” states Roxanne Filizetti RN , CNRN.

See stroke overview, symptoms and treatment video clip @

<http://www.youtube.com/watch?v=yH6WqBNBOZQ&feature=related>

Stroke in Michigan

According to the Michigan Department of Community Health (2011) Michigan currently ranks the 23rd worst in the U.S. for stroke mortality and 28th worst for no leisure time physical activity. Modifiable risk factors that can be managed to improve stroke mortality include high blood pressure, cigarette smoking, obesity, transient ischemic attacks, heart disease, diabetes mellitus, and illicit drug use.

The Michigan Department of Community Health: Stroke Brief 2011 can be found @

http://www.michigan.gov/documents/mdch/Stroke_Brief.pub_346836_7.pdf

Stroke is a medical emergency

Stroke is a “brain attack” that results in decreased blood supply to the brain. This condition occurs when a vessel is obstructed by a blood clot or by the gradual build-up of plaque (Ischemic stroke) or a rupture of the blood vessel (Hemorrhagic stroke). Treat symptoms as a medical emergency and call 9-1-1 at the first signs of stroke.

See stroke brochure @

http://www.michigan.gov/documents/mdch/Brochure_pg1-2_321240_7.pdf

Stroke 911

Stroke is a serious illness requiring emergency treatment. 9-1-1 transport significantly shortens the arrival time to hospital for people suffering stroke symptoms. With fast recognition of symptoms in the field and appropriate medical intervention, stroke patients can have positive outcomes. On average patients arriving to the MGHS emergency department in 2010 waited more than 301 minutes to seek medical attention.

A simple test will help you detect stroke symptoms and help you to act F.A.S.T.

See F.A.S.T. clip @ <http://www.youtube.com/watch?v=TQQJUBVL730&feature=related>

Stroke symptoms

Few Americans know the symptoms of stroke. Learning them and acting FAST by calling 9-1-1 could save a life. 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

<http://www.youtube.com/watch?v=gnZcxJ7MZY4&feature=related>

MGHS Primary Stroke Center

MGHS is proud to be among 38 Joint Commission Certified Primary Stroke Centers. This distinction recognizes organizations that make exceptional efforts to foster better outcomes for stroke care. Achievement of certification signifies adherence to national standards and guidelines. It also demonstrates organized program management, performance improvement and a commitment to education of both stroke patients and hospital staff. Locate your nearest primary stroke center @ <http://maps.heart.org/quality/>

High Blood Pressure

High blood pressure is the number one cause of stroke. Nearly 60 million Americans have high blood pressure, and almost a third do not know they have it. For people over age 18, optimal blood pressure is considered 120/80 or lower. Blood pressure, like your heart rate, will vary occasionally with exercise or stress. A blood pressure reading consistently higher than 120/80 is considered pre-hypertension. High blood pressure or Stage One hypertension is a measurement of 140/90 or higher. Maintaining the blood pressure below 140/90 may reduce the risk of further complications.

Brain Attack

There are two main types of stroke, called Ischemic stroke or hemorrhagic stroke. **Ischemic stroke** occurs when blood flow to a part of the brain suddenly decreases or stops due to a blood clot, or gradual buildup of plaque or other fatty deposits. Almost 85% of all strokes are ischemic.

Hemorrhagic strokes occur when a weakened blood vessel in the brain bursts. Bleeding irritates the brain tissue, increases pressure on the brain and can causing brain swelling. Damage to the brain can occur very rapidly. Almost 15% of all strokes are hemorrhagic, but are responsible for more than 30% of all stroke deaths.

Clot Buster

Tissue Plasminogen Activator (t-PA) is the only FDA-approved treatment for acute ischemic stroke at this time. This drug works by dissolving blood clots in the arteries to the brain allowing blood flow to resume and minimizing damage to the tissues of the brain. In order to be effective t-PA must be administered within three hours from the first signs of stroke.

Transient Ischemic Attack

Transient Ischemic Attack (TIA) is a mini stroke. The symptoms are the same as stroke but the symptoms usually resolve in less than 24 hours. Prompt evaluation and intervention is important because risk for stroke is high in the first few days after a TIA. See video clip on TIA @

<http://www.youtube.com/watch?v=TQQJUBVL730&feature=related>

Stroke Risk Factors

People with diabetes are twice as likely to have a stroke compared to people without the disease. Diabetes damages blood vessels including arteries that supply blood to the brain. This damage makes it easier for fatty deposits, or plaque to form in the arteries. The build-up of plaque can reduce or cut off blood supply which can lead to stroke.

Smoking and Stroke

The risk of stroke in current smokers is about double that of nonsmokers after adjustment for other risk factors. For a free printable tobacco quit kit that lists resources that help you on the road to a tobacco-free lifestyle go to the Michigan Department of Community Health at <http://www.> http://www.michigan.gov/documents/QK11_54790_7.pdf

Atrial fibrillation and stroke

The heart condition known as atrial fibrillation (A. Fib) causes an irregular heartbeat. People with atrial fibrillation are six times more likely to have a stroke than those without the condition. The most effective and most common treatment for atrial fibrillation is an anticoagulant medicine called Coumadin. See A. Fib video clip @ <http://www.youtube.com/watch?v=AfijUM-lBrM&feature=relmfu>

High cholesterol and Stroke

High cholesterol may increase stroke risk by not allowing blood to move freely through the arteries. Cholesterol build-up can break off causing a clot to form and a possible stroke to occur. For most people the combined HDL (good cholesterol) and LDL (bad

cholesterol) should fall below 200. Maintain a healthy cholesterol level by eating a diet low in saturated fat and incorporating exercise into your daily routine.

For more information please go to the American Heart Associations “fats 101” course and test your fats IQ at <http://www.americanheart.org/presenter.jhtml?identifier=1200010>

High Blood Pressure and Stroke

According to the American Heart Association (2011) managing high blood pressure is the most important thing you can do to lessen your risk for stroke. A blood pressure less than 120/80 is considered normal. More information on blood pressure reading and categories can be found @

http://www.heart.org/HEARTORG/Conditions/HighBloodPressure/AboutHighBloodPressure/Understanding-Blood-Pressure-Readings_UCM_301764_Article.jsp

Complication Associated with Stroke

Dysphagia is a swallowing disorder that often occurs as a result of stroke in up to 65% of stroke patients. If not identified and managed appropriately it can lead to poor nutrition, pneumonia, dehydration and increased complications. The MGHS Nursing Swallow Screen has been implemented for the care of all stroke patients. The MGHS Nursing Swallow Screen study is in progress and the results are very promising.

Stroke Prevention

Stroke is one of the most preventable of all life threatening health problems. Making simple lifestyle changes can reduce the risk of stroke. Get moving, stay active and incorporate exercise into your daily regimen. Don't smoke, if you are a smoker make a resolution to quit. Drink alcohol only in moderation. Free printable tobacco quit kit @ http://www.michigan.gov/documents/QK11_54790_7.pdf

May is National Stroke Awareness Month

A stroke can cause sudden changes in a person's emotions and behavior. This is because stroke affects the brain and the brain controls a person emotions and behavior. The result can be depression, anger and frustration. Encourage your loved one to be active and independent, as much as possible, to help him or her regain a sense of self-reliance and confidence.

Rehabilitation for stroke

After hospitalization for stroke, many patients still have problems with physical, speech and mental functions. Rehabilitation programs are critical in helping patients regain lost skills, relearn tasks, and work to be independent again. With diligent rehabilitation there is great potential for the brain to recover.