

What are the warning signs of a stroke?

A warning sign of stroke is an indication that a part of the brain may not be receiving enough oxygen. A person experiencing any of the following symptoms should seek immediate medical attention:

- Sudden numbness or weakness of the face, arm or leg, especially concentrated on one side of the body.
- Sudden blurred vision in one or both eyes.
- Sudden confusion or trouble speaking or understanding.
- Sudden, severe headaches unlike any you have had before.
- Sudden difficulty in walking, involving dizziness, loss of balance or coordination.
- Other warning signs may include double vision, drowsiness, nausea or vomiting.

These brief episodes are known as transient ischemic attacks (TIAs), often referred to as "mini-strokes."

Although these episodes may last only a few minutes (or up to 24 hours) and then completely resolve, it is important to take them seriously and seek medical attention without delay.

Treatments can reduce the risk of damage from stroke, but only if you get help quickly - within 3 hours of the first symptoms.

What treatment options are available for stroke survivors?

Depending on the level of need, there are a number of care options available. Each offers a coordinated team of professionals including skilled nurses, therapists, dietitians and social workers - all working with the patient's doctor to ensure the highest level of care. Most of these programs are available right in your neighborhood.

Adult Day Health Care – ADHC is designed to give relief to the at-home caregiver and provide an opportunity for loved ones to socialize in a medically supervised environment. The program's experienced professionals also provide for on-going health needs, including physical, occupational and speech therapies.

Short-Term Rehabilitation - After the need for acute care has passed, short-term rehabilitation services are often prescribed to help restore patients to their highest level of function and independence. Provided in freestanding facilities or units within certain nursing centers, the goal of short-term rehabilitation is to return patients to their homes or alternate level of care as quickly and safely as possible.

Long-Term Home Health Care - These programs provide a complete team of healthcare professionals who come directly into the home to provide sub-acute care and rehabilitation in accordance with a prescribed treatment plan.

Residential Health Care Facilities - These facilities offer patients both short- and long-term rehabilitation, 24-hour skilled nursing supervision and help with activities of daily living.

Helpful resources

American Stroke Association
A Division of American Heart Association
1-888-4STROKE
www.strokeassociation.org

National Institute of Neurological Disorders and Stroke
1-800-352-9424
www.ninds.nih.gov

Centers for Disease Control and Prevention
1-800-CDC-INFO
www.cdc.gov

National Stroke Association
1-800-STROKES
www.stroke.org

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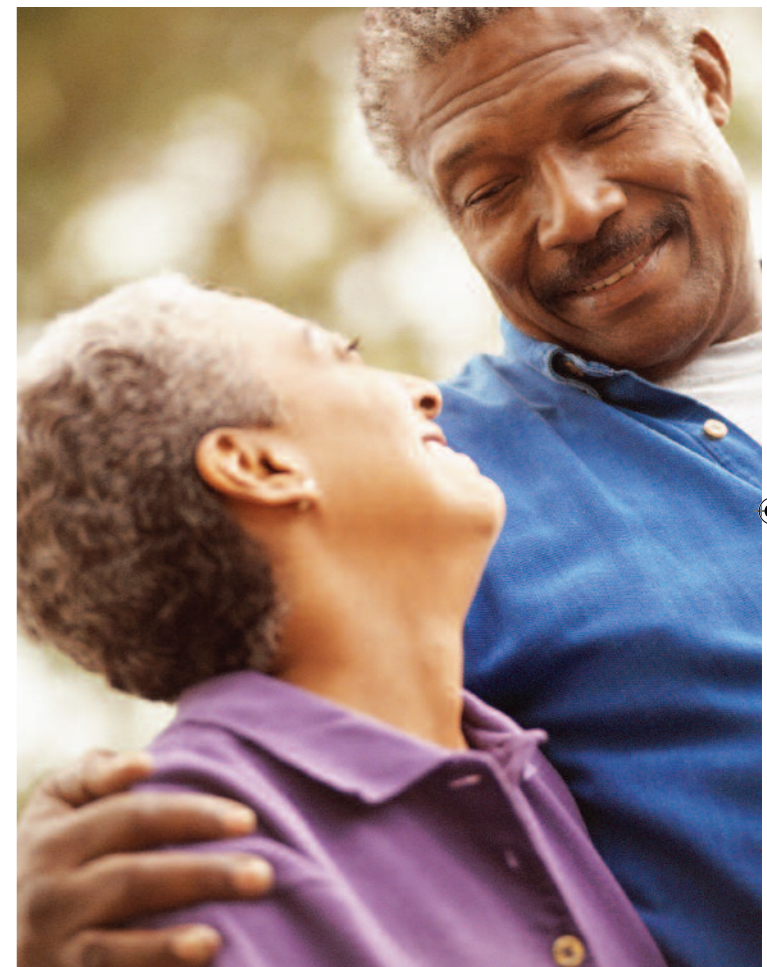
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UNDERSTANDING STROKE

A Leading Cause of Death and Disability



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What is a stroke?

A stroke, also known as a "brain attack," occurs when narrowed blood vessels or blood clots block blood flow to the brain, or when there is bleeding into the brain. As a result, the affected parts of the brain are deprived of vital nutrients and brain nerve cells begin to die almost immediately. Victims of stroke may experience a loss of vision, impaired sensory perception, problems with walking and talking, difficulty thinking or even death.

How serious is it?

Stroke is the third leading cause of death in the United States, behind heart disease and cancer. Even more frightening, stroke is America's leading cause of serious long-term disability. Therefore, it is important to:

Every 45 seconds, someone in the United States has a stroke.

- Understand and minimize the risk factors associated with stroke
- Recognize the symptoms
- Get immediate treatment if you experience any symptoms
- Learn about the short-term rehab therapies available to improve function after a stroke
- Explore the long-term care options that are available to stroke victims

Who is at risk?

Age, gender and race can all affect your chances of having a stroke. In fact, those at greatest risk are African-American males between the ages of 65 and 74. Additional risk factors include:

High blood pressure (hypertension) - This is the leading risk factor for stroke. The only way to know if you have the condition is by visiting your

doctor and having your blood pressure checked. If it's too high, a treatment plan must be developed to bring it into normal range.

Smoking - Smoking has been linked to the buildup of fatty substances in one of the major arteries leading to the brain, a condition that can initiate a stroke. It also contributes to high blood pressure, a reduction of oxygen carried to the brain and thickening of the blood, which makes it more likely to form clots.

Heart disease - Common heart disorders such as irregular heart beat, valve defects and enlargement of one of the heart's chambers can result in blood clots that may break loose and block vessels leading to the brain. If you or someone you love has a heart condition, work closely with your physician to determine the best course of treatment.

Diabetes - Diabetes affects glucose levels in the body and can also cause destructive changes in blood vessels, including those in the brain. Effective diabetes management is essential to avoid potentially devastating complications, including reduced circulation and stroke.

Most risk factors for stroke can be modified, treated or controlled.

Heredity - People who have a history of stroke in their family or in their own personal medical history are at increased risk.

All health conditions that may increase the possibility of stroke should be carefully monitored by a doctor to prevent the onset of a life-threatening incident.



What happens after a stroke?

Stroke impacts people in many different ways depending on the parts of the brain that have been affected. If you are caring for someone who has suffered a stroke, it is important to be prepared for a number of physical and behavioral changes. These may include:

- **Physical symptoms** - Stroke often causes people to lose mobility and feeling in an arm or leg. They may also suffer from a reduction in sight on one side. Consequently, stroke survivors may feel off balance, "neglect" the weaker side and have trouble functioning as they once did.



- **Perception** - Stroke can affect a person's ability to see, feel and think. When this happens, a person's perception of everyday objects can change. This may cause them to bump into things more frequently.
- **Hearing** - Although a stroke does not cause hearing loss, damage to the part of the brain controlling language interpretation can make it difficult for stroke survivors to understand speech and sounds as they had previously.
- **Speech** - Stroke can also significantly affect a person's ability to speak. A stroke that affects the motor areas of the brain can affect the muscles used in talking, resulting in slower,

slurred or distorted speech. A stroke in the language centers of the brain may also prevent a person from being able to translate his or her thoughts into the correct words.

If a stroke occurs in the brain's right side, the left side of the body (and the right side of the face) will be affected.

- **Physical symptoms** - When one side of the mouth or palate is weak, it can cause problems with chewing and swallowing resulting in an increased risk of choking.
- **Thinking** - A stroke can affect a person's ability to think through everyday tasks clearly resulting in confusion about the logical sequence of events involved in performing the task.
- **Emotions** - Sudden mood swings that can include crying or laughing for no apparent reason are common. Stroke victims may also suffer from bouts of depression.

Clearly, a stroke can be severely disabling, not only physically, but also mentally, behaviorally and emotionally. As such, stroke survivors must be treated with patience and compassion.

