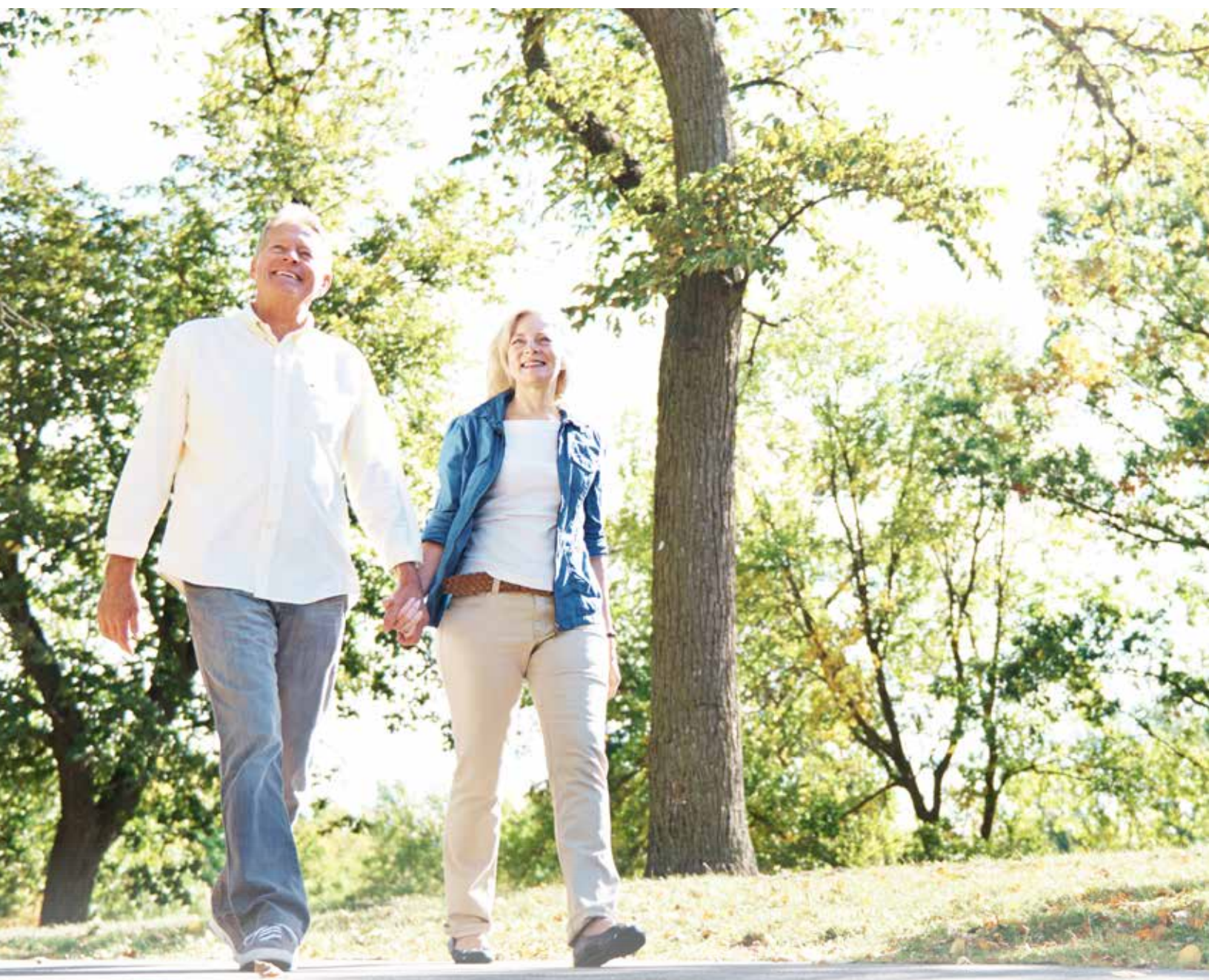


A GUIDE TO

What Every Patient Should Know After Having A Stroke



Primary Stroke Center



**Oak Hill
Hospital**

Care that revolves around you.®



Thank you for entrusting Oak Hill Hospital with your healthcare.

We've developed this stroke education booklet to aid you, your caregivers and loved ones during the recovery process. This booklet provides information to improve the recovery process, including preventive information such as warning signs, risk factors, lifestyle changes, rehabilitation and more.

We're here for you during your recovery. We will call you shortly after your discharge. Should you have any questions or concerns, please call us at 352-596-6632. In an emergency, dial 911.

Free Physician and Health Information Referral Service

1-877-4HCA-DOCS

(toll free 1-877-442-2362)

We wish you health, happiness, and a full recovery!

The Stroke Team
at Oak Hill Hospital



1-800-787-6537 | Stroke.org



1-800-553-6321 | StrokeAssociation.org

TABLE OF CONTENTS

Major Stroke and TIA.....	2
Stroke Signs/Symptoms	3
Risk Factors for Stroke.....	4
Diagnosing Stroke	5
Things You Can't Control	
Ischemic Strokes.....	6
Hemorrhagic Strokes	7
Complications After Stroke	8
Changes Caused by Stroke.....	9
Lifestyle Changes to Prevent Another Stroke	10
Rehab After Stroke.....	11
Living At Home After a Stroke	
Making Changes at Home	12
Options Other Than Going Home	
Assistance for Caregivers.....	13
Notes.....	14

Major Stroke

- A “brain attack”
- Occurs when blood flow to the brain is blocked or ruptures
- Deprives the brain of oxygen
- Nerve cells stop working and die within minutes
- The parts of the body those nerves control stop working

.....

Transient Ischemic Attack (TIA)

- A “minor stroke”
- Occurs when a blood clot blocks an artery for a short time
- Symptoms are usually the same as a stroke, but last only a few minutes
- About 15 percent of major strokes start with TIAs



Stroke **Signs/Symptoms**

Any one of these signs could mean stroke:



FACE

Look for an uneven smile



ARM

Check if one arm is weak



SPEECH

Listen for slurred speech



TIME

Call 911 right away



CONTROLLING HIGH BLOOD PRESSURE

- Lose weight if you're overweight.
- Eat a healthy diet that's low in salt, saturated fat, trans fat and cholesterol.
- Eat fruits and vegetables, and fat-free or low-fat dairy products
- Enjoy regular physical activity
- Limit alcohol to no more than two drinks a day if you're a man and one drink a day if you're a woman. Check with your doctor about drinking alcohol; it can raise blood pressure.
- Take medicine as prescribed.
- Know what your blood pressure should be and try to keep it at that level.

Risk Factors for Stroke

Things You Can Change or Treat

- High blood pressure
- Tobacco use
- Diabetes mellitus
- High blood cholesterol
- Physical inactivity and obesity
- Carotid or other artery disease
- Transient ischemic attacks (TIAs)
- Atrial fibrillation or other heart disease
- Certain blood disorders; a high red blood cell count; sickle cell anemia
- Excessive alcohol intake
- Illegal drug use



Things You Can't Control

- Increasing age
- Gender; more men than women have a stroke
- Heredity and race
- Prior stroke

People at a Higher Risk

- People with a family history of high blood pressure
- African Americans
- People 35 years or older
- People who are overweight or obese
- People who eat too much salt
- People who drink too much alcohol
- People who aren't physically active
- Women who use birth control pills
- Pregnant women

Diagnosing Stroke

- It's critical to diagnosis a stroke as soon as possible.
- Treatment for stroke depends on the type of stroke and, in some cases, the location of the injury to the brain.
- Other conditions with similar symptoms that will need to be ruled out include:
 - Low blood sugar
 - Seizures
 - Fainting
 - Migraine headaches
 - Other general medical conditions

In the emergency room, your doctor or stroke emergency team may:

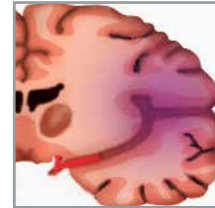
- **Ask you when the symptoms of the stroke started.**
- Ask you about your medical history.
- Conduct a physical and neurological examination.
- Have certain blood tests done.
- Do a CT or MRI brain scan (*this determines what type of stroke a person had*)

Ischemic Strokes

Ischemic strokes are the most common type of strokes.

Thrombotic Stroke

- Caused by a blood clot in an artery going to the brain.
- The clot blocks blood flow to part of the brain.
- Blood clots usually form in arteries damaged by plaque.



Ischemic Stroke

Blood clot stops blood flow to an area of the brain

Embolic Strokes

- Caused by a wandering clot that's formed elsewhere (usually in the heart or neck arteries).
- Clots are carried in the bloodstream and block a blood vessel in or leading to the brain.

Treatment of Ischemic Strokes

- Immediate treatment is given by the healthcare team when a stroke happens.
- The goal of acute treatment is to keep the amount of brain injury as small as possible.
- A drug to treat acute ischemic stroke is tissue plasminogen activator (tPA). This is a clot-busting drug that must be given within 4.5 hours of the first symptoms of stroke.
- Preventative treatment may be given before or after a stroke happens because when someone has a stroke, they are at a higher risk for another stroke.
 - *Antiplatelet agents such as aspirin and anticoagulants interfere with the blood's ability to clot and can play an important role in preventing stroke.*
 - Antiplatelet Agents keep blood clots from forming by preventing blood platelets from sticking together. These include aspirin, ticlopidine, clopidogrel and the combination of aspirin and dipyridamole.
 - Anticoagulants are medicines that delay the clotting of blood. They make it harder for clots to form or keep existing clots from growing in your heart, veins or arteries.
 - *Carotid endarterectomy is a procedure in which blood vessel blockage is surgically corrected.*
 - *Doctors sometimes use devices called "stents" to keep the blood vessel open.*

Hemorrhagic Strokes

Intracerebral Hemorrhages

- Occurs when a blood vessel bleeds or ruptures into the tissue deep within the brain.
- Most often caused by high blood pressure.
- Sometimes caused by a cluster of abnormally formed blood vessels.



Hemorrhagic Stroke

Hemorrhage / blood leaks into the brain tissue

Subarachnoid Hemorrhages

- Occurs when an aneurysm (a blood-filled pouch that balloons out from an artery) on or near the surface of the brain ruptures and bleeds into the space between the brain and the skull.
- Often caused by high blood pressure. Other factors include:
 - *Cigarette smoking*
 - *Oral contraceptives (particularly those with high estrogen content)*
 - *Excessive alcohol intake*
 - *Use of illegal drugs*

Treatment of Hemorrhagic Strokes

- Hospital care is required.
- Medication is used to control high blood pressure and other medicine may be given to reduce brain swelling that follows a stroke.
- Surgery may be needed depending on the cause of the hemorrhage.

Sometimes a stroke is the first sign a person has of other health conditions, such as high blood pressure, diabetes or atrial fibrillation (a heart rhythm disorder). If any of these are diagnosed, the healthcare team will prescribe appropriate treatment.

Complications After Stroke

The highest priority after a stroke is to prevent complications from the stroke and to prevent another stroke.

Common Complications

Pneumonia – causes breathing problems, a complication of many major illnesses.

Swallowing – things “going down the wrong pipe” leading to aspiration pneumonia.

Urinary tract infections and/or bladder control

Seizures – abnormal electrical activity in the brain causing convulsions.

Clinical depression – a treatable illness that often occurs with stroke and causes unwanted emotional and physical reactions to changes and losses.

Bedsore – pressure ulcers that result from decreased ability to move and pressure on areas of the body because of immobility.

Limb contractures – shorten muscles in an arm or leg from reduced range of motion or lack of exercise.

Shoulder pain – stems from lack of support of an arm due to weakness or paralysis. This usually is caused when the affected arm hangs resulting in pulling of the arm from the shoulder.

Deep venous thrombosis – blood clots form in veins of the legs because of immobility from stroke.

Treatment

If you need medical or physical treatment, your doctor will prescribe it. Treatment may include:

- Medication designed to reduce risk factors (i.e. hypertension, diabetes, elevated cholesterol, etc.).
- Range-of-motion exercises and physical therapy.
Helps avoid limb contracture, shoulder pain and blood vessel problems.
- Frequent turning while in bed.
Helps prevent pressure sores.
- Bladder training program for incontinence.
- Swallowing and respiratory therapy and deep breathing exercises.
Helps decrease the risk of pneumonia.
- Psychological treatment including counseling or therapy for feelings that result from clinical depression.
May include antidepressant medication, psychotherapy, support group referral, or a combination of the three.

Changes Caused by Stroke

Most Common General Effects of Stroke

- Weakness on one side of the body
- Inability to move on one side of the body
- Neglect of one part of your body (you forget that it's there)
- Difficulty speaking or slurred speech
- Difficulty getting your words out or understanding what is being said
- Trouble swallowing
- Fatigue
- Loss of emotional control and changes in mood
- Problems with memory, judgment, problem-solving or a combination of these
- Personality changes, improper language or actions
- Visual disturbances



Lifestyle Changes to Prevent Another Stroke

- **Take your medicine as directed.**
- **Check your blood pressure regularly.**
- **Work with your doctor to manage high blood pressure.**
- **Reach and maintain a healthy weight.**
- **Decrease your stress level.**
- **Seek emotional support as needed.**
- **Schedule regular medical checkups.**
- **Don't smoke and avoid second-hand smoke.**
 - *Make a decision to quit and stick to it.*
 - *Ask your doctor for information, programs and medications that may help.*
- **Eat better.**
 - *Eat foods low in saturated fat, trans fat, cholesterol, sodium and added sugars.*
 - *Avoid foods like egg yolks, fatty meats, butter and cream (all are high in fat and cholesterol).*
 - *Bake, broil, roast and boil instead of frying.*
 - *Read nutrition labels on packaged meals; many are high in sodium.*
 - *Limit alcohol to one drink per day for women and two drinks per day for men.*
 - *Eat more fruits, vegetables, whole-grains, dried peas and beans, pasta, fish, poultry and lean meats.*
- **Be physically active.**
 - *Check with your doctor before you add physical activity to your lifestyle.*
 - *Start slowly.*

Rehab After Stroke

When you're medically stable, it's time to consider rehabilitation therapy, which may reverse some of the effects of a stroke.

Rehab helps you:

- Change or relearn how you live day-to-day.
- Increase independence.
- Improve physical functioning.
- Gain a satisfying quality of life after stroke.

Rehab programs often focus on:

- Activities of daily living such as eating, bathing and dressing.
- Mobility skills such as transferring from bed to chair, walking or self-propelling a wheelchair.
- Communication skills in speech and language.
- Cognitive skills such as memory or problem solving.
- Social skills in interacting with other people.
- Psychological functioning to improve coping skills and treatment to overcome depression, if needed.
- Make lifestyle changes to prevent another stroke.

Living at Home After A Stroke

Going Home: Is It The Right Choice

- Are you able to care for yourself?
- Are you able to follow medical advice, such as taking medication as prescribed and scheduling doctor appointments?
- Do you have a caregiver, someone who is available and willing to help when needed?

Making Changes **At Home**

Living at home successfully depends on how well your home can be adapted to meet your needs.

Safety – Fall Prevention is Key

- *Remove anything that may be dangerous.*
- *This might be as simple as throw rugs, testing the temperature of the bath water or wearing rubber-soled shoes.*
- *It may be more involved, like installing handrails in your bathroom or other areas.*

Accessibility

- *You need to be able to move freely within the house.*
- *Changes can be as simple as moving the furniture.*
- *Changes may be as involved as installing a ramp.*

Independence

- *Your home may need to be changed so you can be as independent as possible.*
- *You may need to add special equipment like grab bars or transfer benches.*

Driving/Air Travel

- *A stroke may affect your ability to drive safely.*
- *Contact your physician before driving or air travel.*

Options Other Than Going Home

Nursing facility

This may be a good option if you have ongoing medical issues.

Skilled Nursing Facility

This may be a good option if you need medical attention, continued therapy and more care than a caregiver can provide at home.

Intermediate Care Facility

If you don't have serious medical problems and can manage some level of self-care, this may be a good option.

Assisted Living

If you can live somewhat independently but need some assistance with things like meals, medications and housekeeping, this may be a good option for you.

Being the Caregiver for Someone Who's Had A Stroke

It's important that you're a "care partner" with your caregiver(s).

It may be a challenge for both of you to adjust to your roles. It may be easier if you share in the decision-making as much as possible, and if you share your feelings honestly.

Common responsibilities of caregiving include:

- Providing physical help with personal care and transportation.
- Managing financial, legal and business affairs.
- Monitoring behavior to ensure safety.
- Managing housework and making meals.
- Coordinating healthcare and monitoring or giving medications.
- Helping the survivor maintain learned rehab skills and work to improve them.
- Providing emotional support for the stroke survivor and family members.
- Encouraging the stroke survivor to continue working toward recovery and to be as independent as possible.



Assistance for caregivers & stroke survivors include:

Adult day care – professional supervision of adults in a social setting during the day.

Adult foster homes – supervised care in approved (licensed) private homes.

Meal programs (Meals on Wheels) – a federally sponsored nutrition program.

Home health aide service – in-home personal care assistance.

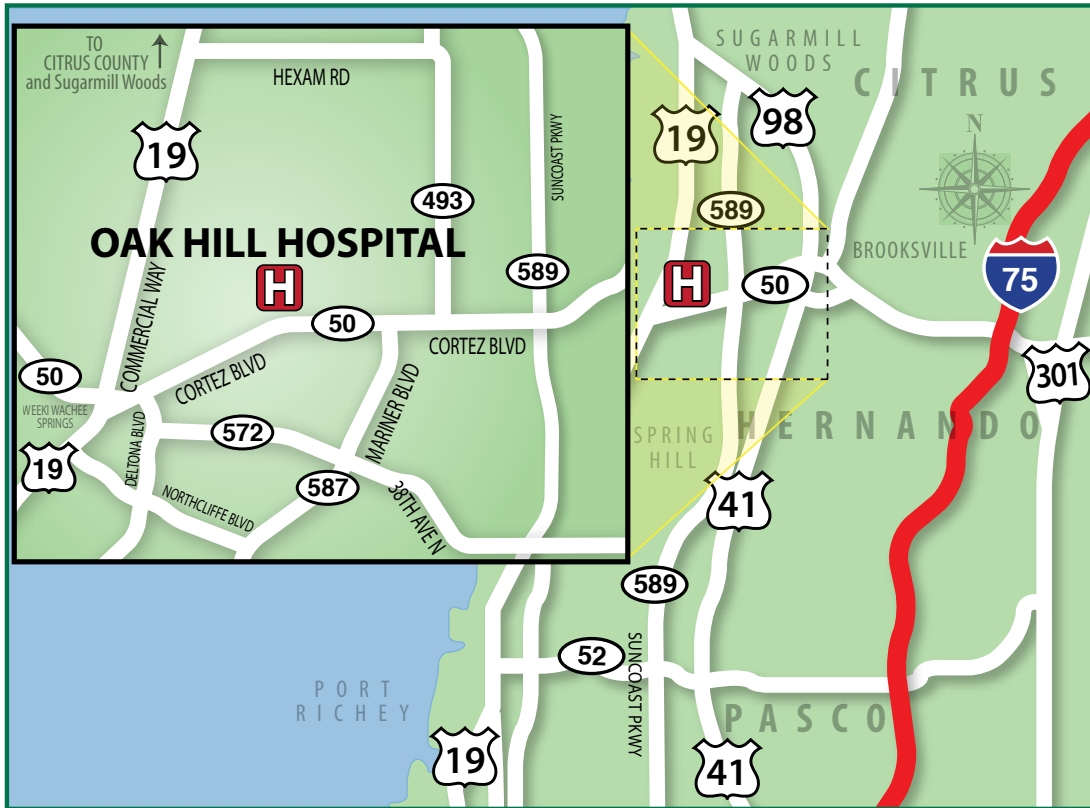
Homemaker assistance – supervised, trained personnel who help with household duties.

Respite care – people come into the home for a limited time to give caregivers a break. Some nursing homes also provide short-term respite care.

Is training available for family caregivers?

For training availability for caregivers, visit ElderCare.gov.

NOTES



11375 Cortez Boulevard, State Road 50
Brooksville, FL 34613

352-596-6632 Hernando | 352-628-6441 Citrus
1-877-4HCA-DOCS (toll free 1-877-442-2362)

OakHillHospital.com

