



## **Lafayette General Stroke Center**

Know the symptoms. Know your risks.

# STROKE

## *a definition*

A stroke occurs when the blood supply to an artery in the brain is blocked (a clot), or a blood vessel breaks, causing brain cells in the area to die. Brain cells do not regenerate. The problems experienced after a stroke like the inability to move one side of the body, numbness on one side of the body, speech or visual problems are usually a result of brain damage.

Persons who have had one stroke are at risk of having another stroke. It is important that you practice stroke prevention now, and this guide will help you and your family do just that.

# STROKE

## *the warning signs*

### **What to look for:**

- 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

# STROKE

## *what to do*

### **What to do if you're having symptoms: Activation of the Emergency Medical System (EMS)**

- 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 question later. This is very important, because if given within three hours of the start of symptoms, a clot-busting drug can reduce long-term disability for the most common type of stroke.
- If you have one or more stroke symptoms that last more than a few minutes, don't delay! **Immediately call 9-1-1** or the emergency medical service (EMS) number so an ambulance (ideally with advanced life support) can quickly be sent for you. Do not drive yourself.
- If you're with someone who may be having stroke symptoms, immediately call 9-1-1 or the EMS. Expect the person to resist going to the hospital. Don't take "no" for an answer because 'time lost is brain lost.'
- When communicating with EMS or the hospital make sure and use the word "STROKE".

# *act*

## F

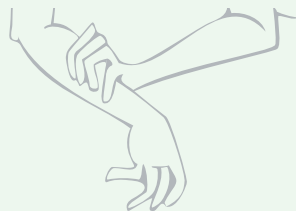
### Face



Does the face look uneven?  
Can they smile?

## A

### Arms



Can they lift both arms?  
Is one weak?

## S

### Speech



Is their speech slurred?  
Can they repeat a simple sentence?

## T

### Time



Call 911 now!  
If you notice any of these signs, do not waste time.

# STROKE

*know your risks*



## What risk factors for stroke can't be changed?

### *Age*

The chance of having a stroke more than doubles for each decade of life after age 55. While stroke is common among the elderly, a lot of people under 65 also have strokes.

### *Heredity (family history) and Race*

Your stroke risk is greater if a parent, grandparent, sister or brother has had a stroke. African Americans have a much higher risk of death from a stroke than Caucasians. This is partly due to higher rates of high blood pressure and diabetes in this group.

### *Sex (gender)*

Stroke is more common in men than in women. In most age groups, more men than women will have a stroke in a given year. However, more than half of total stroke deaths occur in women. At all ages, more women than men die of stroke. Use of birth control pills and pregnancy pose special stroke risks for women.

### *Prior Stroke, TIA or Heart Attack*

The risk of stroke for someone who has already had one is many times that of a person who has not. Transient ischemic attacks (TIAs) are “warning strokes” that produce stroke-like symptoms but no lasting damage. TIAs are strong predictors of stroke. A person who’s had one or more TIAs is almost 10 times more likely to have a stroke than someone of the same age and sex who hasn’t. Recognizing and treating TIAs can reduce your risk of a major stroke. If you’ve had a heart attack, you’re at higher risk of having a stroke, too.

# STROKE

## *know your risks*

### **What stroke risk factors can be changed, treated or controlled?**

#### *High Blood Pressure*

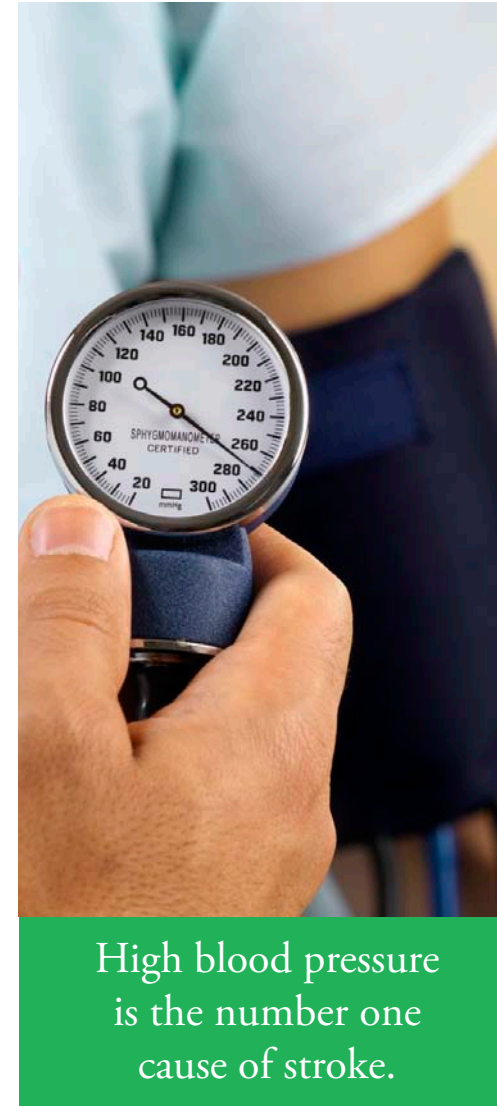
High blood pressure is the most important controllable risk factor for stroke. Have your blood pressure checked routinely by your family doctor. If you are taking medications for blood pressure, continue taking them as directed. Follow your doctor's advice and eat a modified or low sodium diet, and exercise regularly.

#### *Cigarette Smoking*

If you smoke, you need to stop. Every time you light up, you are increasing your chances of having a stroke or heart attack. Nicotine constricts blood vessels, making it more difficult for oxygen rich blood to reach the heart and brain. The use of contraceptive medication (birth control) while smoking greatly increases stroke risk in women.

#### *Diabetes Mellitus*

Have your blood sugar tested at least once a year by your family doctor. If you have diabetes, follow your doctor's advice and control your blood sugar. Keep a record of your daily blood sugar, and follow your diet, and continue your medications as directed by your doctor. Diabetes increases your risk for both stroke and heart attack, so keep it in check!



High blood pressure  
is the number one  
cause of stroke.

### *Carotid or other Artery Disease*

The carotid arteries in the neck supply the brain with much needed oxygen and nutrients. These arteries can become blocked or narrowed as we age due to a build-up of plaque, caused by high cholesterol. If you have high blood pressure, diabetes, high cholesterol, or smoke, the build-up will occur more quickly. If you have any symptoms of stroke, you should have a test to determine if you have any blockage in the carotid arteries, and this should be treated according to the degree of blockage, determined by your doctor.

### *Atrial Fibrillation*

This heart rhythm disorder raises the risk for stroke. Find out if you have atrial fibrillation by seeing your doctor at least annually. If you have any irregularity in your pulse, your doctor will order a test to determine the rhythm. If you have atrial fibrillation, your doctor may prescribe blood thinners to prevent stroke. Take your medication as ordered, keep all of your follow-up appointments, and have your blood work checked as directed.

### *Physical Inactivity and Obesity*

Being inactive, obese or both can increase your risk of high blood pressure, high cholesterol, diabetes, heart disease and stroke. So go on a brisk walk, take the stairs, and do whatever you can to make your life more active. Try to get at least 30 minutes of moderate physical activity five days of the week, or 20 minutes of vigorous physical activity, three days a week, with your doctor's approval.

### *Other Heart Disease*

People with coronary heart disease or heart failure have a higher risk of stroke than those with hearts that work normally. Dilated cardiomyopathy (an enlarged heart), heart valve disease and some types of congenital heart defects also raise the risk of stroke.



## *Sickle Cell Disease*

*(also called sickle cell anemia)*

This is a genetic disorder that mainly affects African-American and Hispanic children. If you are of this ethnicity, find out if you have this disorder. This condition can lead to stroke when these cells clump together and block arteries. If you have sickle cell disease, remember to drink plenty of water—dehydration will increase the chances for stroke with this condition.

## *High Blood Cholesterol*

People with high blood cholesterol have an increased risk for stroke. Find out if you have high cholesterol by seeing your doctor. Your cholesterol level can be reduced by eating right (avoid fried, fatty foods) and exercising routinely. If you are taking medications see your doctor at least annually to have your blood work checked, and continue your medications as directed.

## *Poor Diet*

Diets high in saturated fat, trans fat and cholesterol can raise blood cholesterol levels. Diets high in sodium (salt) can contribute to increased blood pressure. Diets with excess calories can contribute to obesity. A diet containing five or more servings of fruits and vegetables per day may reduce the risk of stroke.

## Stroke Prevention Guidelines

1. Know and control your blood pressure
2. Find out if you have atrial fibrillation
3. If you smoke, stop
4. If you drink, do so only in moderation
5. Know your cholesterol number
6. Control your diabetes
7. Exercise regularly
8. *Enjoy a low-sodium, low-fat diet*
9. Monitor any circulation problems
10. If you have stroke symptoms, seek immediate medical attention



# *we can help*

After a stroke, it is crucial that you continue the medications prescribed by your doctor—exactly as prescribed—in order to reduce the risk of another stroke or cardiovascular event. Do not stop taking them without consulting your physician.

Make sure you have a plan to continue medical treatment after the hospital, as your doctors will need to monitor your progress and likely adjust your medication.

At Lafayette General, we can help if you need:

- Smoking cessation, call 289-8552 • Nutrition counseling, call 289-2840
- An exercise plan from a medically based Wellness Center, call 289-8585



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Medical Center**

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For more information on stroke recovery, and lifestyle changes for stroke prevention, visit [www.lafayettegeneral.com/stroke](http://www.lafayettegeneral.com/stroke) for downloadable pdf's.