

Be Watchful of Stroke Warning Signs

Getting to the hospital fast gives victims a better chance of recovery.

by *Kindra Gordon*

The sooner a stroke victim gets to a hospital, the better their chances of recovery. Yet, fewer than two in five people recognize the key warning signs of a stroke, according to a recent survey from the American Stroke Association (ASA).

Here is information all of us should know:

A heart attack and a stroke are not the same thing. A heart attack affects the heart muscles due to the sudden blockage of a coronary artery. A stroke occurs when blood flow to the brain is interrupted, and thus is sometimes called a “brain attack.” According to *MyHeartCentral.com*, a heart attack is characterized by chest pain, whereas symptoms of a stroke relate more to brain function, such as speech, vision and facial numbness.

The National Institute of Neurological Disorders and Stroke (NINDS) reports that stroke is the third leading cause of death in the United States — and a leading cause of serious, long-term disability in adults. About 600,000 new strokes are reported in the U.S. each year.

How can you recognize the signs of a stroke? Because stroke injures the brain, someone having a stroke may just look unaware or confused. But to minimize long-term damage to the brain, it is imperative to recognize stroke signs quickly and get treatment, if possible, within 60 minutes.

The ASA suggests watching for these warning signs of a 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, loss of balance or coordination.
- ▶ Sudden, severe headache with no known cause.

The ASA has created the FAST test, using an acronym to aid recall of stroke symptoms. If you suspect someone is having a stroke, remember Face, Arms, Speech, Time (FAST):

- ▶ **Face:** Ask the person to smile. Does one side droop?
- ▶ **Arms:** Ask the person to raise both arms. Does one arm drift downward?
- ▶ **Speech:** Ask the person to repeat a simple sentence. Are words slurred? Can he/she repeat the sentence correctly?
- ▶ **Time:** If the person shows any of these symptoms, time becomes crucial. Call 911 immediately.

As a bystander, what can you do if someone is having a stroke? Immediately call emergency medical help. The longer blood flow is cut off to the brain, the greater the damage. Immediate treatment can save people’s lives and enhance their chances for successful recovery.

The ASA fact sheet emphasizes that you may need to be persistent in helping someone. “Expect the person to protest — denial is common. Don’t take ‘no’ for an answer. Insist on taking prompt action,” it says.

Also, note the time, so that you’ll know when the first symptoms occurred. The NINDS web site reports that ischemic strokes, the most common type of strokes, can be treated with a drug called t-PA that dissolves blood clots obstructing blood flow to the brain. The window of opportunity to start treating stroke patients is three hours, but to be evaluated and receive treatment, patients need to get to the hospital within 60 minutes.

A five-year study by NINDS found that some stroke patients who received t-PA within the three-hour window were at least 30% more likely to recover with little or no disability after three months.

A second type of stroke is called a TIA, or transient ischemic attack. The NINDS web site describes this as a “warning stroke” or “mini-stroke” that produces stroke-like symptoms but no lasting damage.

The short duration of these symptoms might preclude someone from seeking medical attention, but treatment of TIAs can reduce your risk of a major stroke, according to NINDS.

What can you do to prevent a stroke?

The NINDS web site suggests that you monitor your blood pressure, track your cholesterol level, stop smoking, exercise regularly and find out if you should be taking a drug to reduce blood clotting.

For stroke information, call the American Stroke Association at 1-888-4-STROKE or visit www.strokeassociation.org.



More stroke statistics

There are some unique characteristics of stroke risk factors. They include:

- ▶ **Age** — The chance of having a stroke approximately doubles for each decade of life after age 55. But stroke can also occur in younger people.
- ▶ **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 do. This is partly because blacks have higher risks of high blood pressure, diabetes and obesity.
- ▶ **Gender** — Stroke is more common in men than in women.

However, more than half of total stroke deaths occur in women. The use of birth control pills and pregnancy pose special stroke risks for women.

- ▶ **Prior stroke, transient ischemic attack (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. A person who’s had one or more TIAs or “warning strokes” is almost 10 times more likely to have a stroke than someone of the same age and sex who hasn’t.
- ▶ **Geographic location** — Strokes are more common in the southeastern United States than in other areas.

— *Source: American Stroke Association*