

Stroke

Stroke is a leading cause of disability in Australia. Approximately 60 000 strokes happen in Australia each year. A stroke occurs when the blood flow to the brain is altered. An **ischemic stroke** occurs when one of the blood vessels supplying part of the brain is blocked by a blood clot, which restricts blood flow to that part of the brain. Without a good blood supply, this part of the brain stops working properly. A **haemorrhagic stroke** occurs when one of the blood vessels supplying the brain bursts. This limits the flow of blood to the brain, but it can also put pressure on the brain tissue.

What are the signs of a stroke? Signs of stroke vary, depending on what area of the brain is affected. Signs may include weakness or numbness in the arms or legs, problems with talking, difficulty understanding what someone is saying, difficulty walking or balancing, a 'droopy' face or changes in vision.

Who is at risk of a stroke? The risk of stroke is greater in older people, in men and in people who have a family history of stroke. People who have high blood pressure, high cholesterol, diabetes or who smoke are also at increased risk of stroke.

What are the long term effects of a stroke? The long term effects of a stroke vary from person to person, depending on which area of the brain has been affected, and how much brain has been damaged. While some people return to many of the activities they did before the stroke, many people have ongoing problems. This can include problems with walking and balancing, difficulty using the arm to perform either simple activities (e.g. getting dressed, feeding yourself) or more complex activities (e.g. writing, putting on makeup). Some people may have problems with talking or with understanding other people, or swallowing food. Following a stroke, some people may also have difficulty controlling their emotions, they may have trouble with their thinking or memory or they may become depressed. People who have had a stroke may be more likely to have a fall, may have pain or stiffness, may have incontinence, can lose fitness and may feel tired. Some people, particularly those who have very limited mobility may develop pressure areas or sores on their skin.

While there can be many long term problems following stroke, it is important to remember that there are many things you can do to help your recovery and maintain your level of function and independence.

What can I do to help me recover from a stroke? If you think you may have had a stroke, it is important to seek medical help immediately. There are some treatments that can reduce the severity of some types of stroke, but they must be given quickly (within a few hours) to work.

If you have signs of a stroke that persist after a few days (e.g. weakness, difficulty walking, difficulty talking/ understanding someone, difficulty swallowing, problems with your thinking), you may require rehabilitation. This can be provided while you are in hospital (inpatient rehabilitation) or after you have returned home (outpatient/ community rehabilitation). You will work with a team of health professionals to identify what problems you have following your stroke, your rehabilitation goals, and how you can best achieve those goals. Depending on what sort of problems you have following your stroke, your team of health professionals may include physiotherapists, occupational therapists, speech pathologists, neuropsychologists, social workers, psychologists, dieticians, nursing and medical staff. You and your family are critical members of the rehabilitation team; while the health professionals can provide you with expert advice, guidance and assistance, you and your family will need to work with the team to achieve your goals.

What can I do to reduce my chance of having a stroke. Talk to your doctor about your risk factors and discuss how each risk factor can best be managed. If you are prescribed medication, it is important to take it as instructed by your doctor, and any changes should be first discussed with your doctor. You should make sure you have any tests (e.g. blood tests, heart monitoring) that are recommended. If you are a smoker, you should stop smoking. Your doctor can help you with this. A healthy diet and regular exercise can also reduce some of the stroke risk factors, such as high blood pressure and diabetes. You should try and get about 30 minutes of exercise most days. This can be either in one block, or in several shorter blocks (eg two 15 minute blocks of exercise). Again, your doctor can provide further advice on diet and exercise, or refer you on to other health professionals.