

CHAPTER 8—**PREVENTING RECURRENT STROKE**

The best defense against recurrent stroke is good offense. Equip yourself, the stroke survivor and family members with information and tips for preventing another stroke.

NATIONAL STROKE ASSOCIATION RESOURCES FOR PREVENTING ANOTHER STROKE

MULTIMEDIA



- Explaining Stroke Interactive
- iHOPE: Medication Adherence and Compliance
- iHOPE: Preventing Another Stroke

BROCHURES/FACT SHEETS



- African Americans and Stroke
- Fact Sheet Series
- High Blood Pressure and Stroke
- Medication Adherence
- Steps Against Recurrent Stroke (STARS)
- Stroke and Cholesterol

TOOLS



- Medication Adherence Tracker
- Stroke Risk Scorecard

Download at www.stroke.org

PREVENT RECURRENT STROKE

RISK FACTOR MANAGEMENT

Be aware of your loved one's symptoms and challenges. Helping them manage their health will help reduce their risk of recurrent stroke.

CONTROLLABLE RISK FACTORS

Alcohol

Reduce or eliminate alcohol consumption. Drinking more than two alcoholic drinks in one day raises a person's risk for stroke by 50 percent. Alcohol can negatively affect many organs and systems. Alcohol depresses the central nervous system and inhibits the liver's ability to produce proteins that regulate blood clotting. This thins the blood, which can be a good and a bad thing. Alcohol also influences platelet (irregularly shaped cell fragments that circulate in the blood) function. Too many platelets cause excessive bleeding and too few cause blood clots. Alcohol contributes to platelet activation; activated platelets are more "sticky" than normal ones, causing blood clots. One drink of alcohol increases platelets a little, but excessive drinking causes too many platelets to activate, thus increasing risk for clots. Over time, excessive alcohol use can lead to long-term increases. Alcoholic beverages usually contain a lot of calories as well, which can contribute to weight gain.

The influence alcohol has on an individual depends on the person's age, gender, height, weight, genetics, level of hydration and medications. While some research says that drinking a small or moderate amount of alcohol can be beneficial in reducing risk of stroke, always consult with a healthcare professional. Heavy drinking can also increase the risk for atrial fibrillation in men.

Atrial fibrillation (Afib)

Afib is an irregular, rapid heartbeat that impairs a person's heart functioning because it slows blood to the heart. Afib is a major risk factor for stroke with no visible symptoms. A person with Afib is five times more likely to have a stroke. However, 75 percent of Afib-related strokes can be prevented with the use of anticoagulant medications that thin the blood. Because the risk of blood clots increases in those with Afib, anticoagulants are essential to prevention. Learn more about Afib by watching **iHOPE:** Atrial Fibrillation at www.stroke.org/ihope.

Diabetes

Diabetes is a group of chronic conditions where a person has high levels of sugar in the blood because of the body's inability to produce and/or use insulin. Medical treatment and dietary changes will be essential to manage diabetes, which increases the risk for stroke. To learn more about diabetes, visit www.stroke.org/diabetes.

Drug use

Illegal drugs like cocaine and amphetamines raise the risk for stroke as they narrow blow vessels and increase blood pressure.

Exercise

Staying active and exercising for 30 minutes five times a week can help a stroke survivor stay healthy and reduce risk factors. Exercise doesn't necessarily mean walking, running or lifting weights. Talk to the stroke survivor's medical and rehab care teams for exercises that can be done at home. For more information on rehab at home, watch and listen to **iHOPE:** Rehabilitation at Home at www.stroke.org/ihope.

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High cholesterol

Cholesterol is a fat that is present in the outer layer of every cell in the body. It is produced by the liver and is necessary for normal bodily functioning. A cholesterol level of over 200 is considered high and raises the risk for recurrent stroke. High cholesterol can be caused by smoking, drinking too much alcohol, being overweight, not exercising and eating foods that are high in saturated fat. Medical treatments and diet changes are effective in lowering cholesterol. Talk with the stroke survivor's medical care team about appropriate treatment for high cholesterol.

Hypertension

High blood pressure, or hypertension, is another major risk factor for stroke. A blood pressure reading of 140/90 indicates hypertension. Talk with the stroke survivor's medical care team about effective strategies to lower blood pressure. Medical treatments, diet changes and exercise are most common.

Nutrition

Low-sodium, low-fat diets with lots of fruits and vegetables are best. Watch and listen to *iHOPE*: Nutrition to learn more about eating right to prevent stroke at www.stroke.org/ihope. Refer to the Post-Stroke Concerns section in Chapter 6 of this guide for websites that have healthy recipes and help with meal planning.

Smoking

Stop! Nicotine raises blood pressure. Smoking cigarettes reduces oxygen in the blood, making the blood thicker and more likely to clot. Ask the stroke survivor's primary care provider for tips for quitting smoking.

Weight

The combination of an active lifestyle and healthy diet will help reduce weight gain. Not only does maintaining a healthy weight reduce the risk of stroke, but it can also reduce the risk for obesity, diabetes, heart problems and more.

UNCONTROLLABLE RISK FACTORS

Age

Strokes can occur at any age. The risk for stroke, however, doubles every 10 years between the ages of 55 and 85.

Family history, gender and race

Take note that:

- Stroke risk factors run in families.
- The risk for stroke is higher among men.
- African Americans and Latinos are twice as likely to have a stroke as Caucasians.

STROKE WARNING SIGNS

Once someone has had a stroke, he/she has a higher risk of recurrent stroke than the general population. Helping the stroke survivor manage his/her health is important but you should also know the warning signs of a stroke so you can identify one immediately if it occurs.

Some sudden signs of stroke:

- Dizziness, including trouble walking or standing.
- Numbness or weakness of the face, arm or leg.
- Confusion, including trouble speaking or understanding.
- Severe headache with no known cause.
- Trouble seeing.

Warning Signs of Stroke

Learn the many warning signs of a stroke. Act FAST and CALL 9-1-1 IMMEDIATELY at any sign of a stroke. Use FAST to remember warning signs:

FACE: Ask the person to smile. Does one side of the face droop?

ARMS: Ask the person to raise both arms. Does one arm drift downward?

SPEECH: Ask the person to repeat a simple phrase. Is their speech slurred or strange? —

TIME: If you observe any of these signs, call 9-1-1 immediately.

FIRST APPEAR. If given within three hours of the first symptom, there is an FDA-approved clot-buster medication that may reduce long-term disability for the most common type of stroke.

LEARN ABOUT MORE SIGNS OF STROKE AT









www.stroke.org/symp

In addition to these signs, women can experience unique and sudden symptoms that include but are not limited to:

- Hiccups
- Shortness of breath
- General weakness

- Nausea
- Heart palpitations
- Face or limb pain

Chest pain

If your loved one is experiencing one or more of these symptoms, act FAST and call 9-1-1 IMMEDIATELY.

If the stroke survivor has another stroke, if will be helpful if you:

- Know which hospital/stroke center you and your loved one prefer. Choices should be based on previous care, location and reputation.
- Take your caregiver binder with you. It will have the stroke survivor's insurance information, identification cards, medication list, healthcare professional information and medical history information.
- Insist on an MRI (magnetic resonance imaging) or a CAT scan (computerized axial tomography) due to previous stroke history. An MRI uses magnetic and radio waves to take pictures of different body parts, and a CAT scan is a specialized x-ray.
- Be assertive! Follow your instincts!