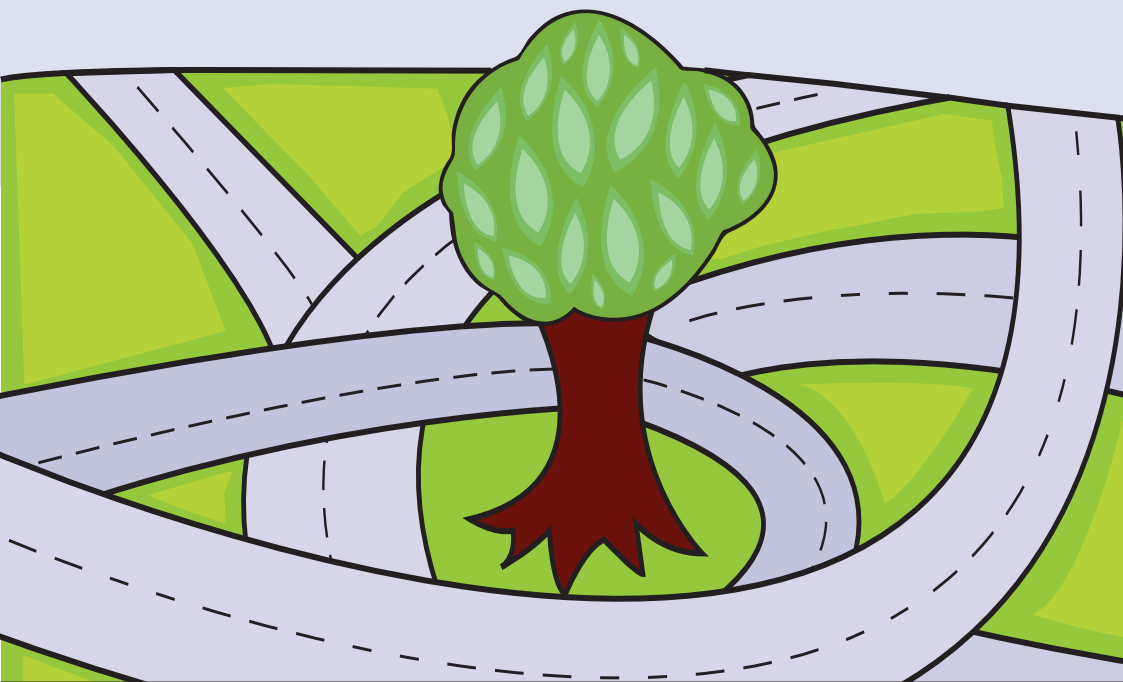


Your Stroke Journey

Part 1



What is a Stroke?

A **stroke** happens when the **blood supply** to **part** of the **brain** is **interrupted**.

There are **two** types of **stroke**:

A clot



A bleed

- Some cells will **recover**.
- Some cells will be **damaged** or **die**.
- **Other cells may take over** from damaged cells.

How stroke affects you

How **stroke** affects **you** depends on:

- Which **part** of the **brain** has been **damaged**
- How **severe** the **stroke** was
- **Age** and **general health** before the stroke

Here are **some** of the most **common effects**:



Weakness or **paralysis** down one side of the body



Difficulty with **communication** – you may not be able to speak or understand



Difficulty with **swallowing** – you may not be allowed to eat or drink right away



Concentration and memory problems

After your stroke

After your stroke you may be recovering:



in **hospital**

People with severe strokes may require **more monitoring and intervention** to avoid complications.



or at **home**

Tests and investigations may be carried out at a **local hospital** or **clinic**.

How you may feel

You may:



Feel **tired** and **sleepy**



Feel **confused** about what is happening



Have **difficulty remembering** information



Find it **helpful** to have **someone** around to **help** with **questions**

Tests and investigations

The **doctor or consultant** will **arrange some tests** to:

- find out what **caused** the **stroke**
- **confirm** the **symptoms** are definitely **due to the stroke**
- find out **what kind of stroke**
- find out **what area of the brain was affected** and **how severely** it was affected

People may have **all** or **some** of the following **tests**:



Blood Tests



Chest X-ray



Scans



Take your medication regularly as prescribed by your doctor. Medicines can be provided in other forms if you can not swallow.

Medication following stroke focuses mainly on reducing the risks from underlying medical conditions.

Antiplatelets e.g. aspirin
Prevents clots forming.

Anticoagulants – e.g. warfarin
Prevents blood clots from heart problems such as atrial fibrillation, a heart valve problem or a recent heart attack.

Antihypertensives – e.g. ace inhibitors/betablockers/calcium channel blockers /diuretics
Controls high blood pressure.

Statins – e.g. simvastatin
Lowers cholesterol even if not found to be high.



Avoid prolonged time in bed

Early mobilisation is important it:

- helps **prevent limbs** becoming **stiff and sore**
- helps **recover** posture, balance and movement
- makes it **easier to eat and drink**
- **reduces risk of blood clots** in the legs
- **reduces risk** of developing **chest infections**

Reducing the Risk



Consider **lifestyle changes** to help prevent a further stroke



Stop smoking



Control weight



Keep as **active as you can**



Moderate alcohol intake



Eat Healthily – fruit and vegetables, low fat and reduced salt

Recreational drugs may increase the risk of stroke.

Help from Chest, Heart & Stroke Scotland

CHSS Volunteer Stroke Service (VSS) provides a **range of services** in the community designed to meet **communication needs** of each **individual**. Services available throughout **Scotland** by referral from therapists.

CHSS Stroke Nurses provide **support** during the transition from **hospital to home** and after. Services available in Fife, Lothian, Grampian, Highlands, Dumfries and Galloway and Lanarkshire.

CHSS Advice line is staffed by **nurses** and provides **confidential, independent advice**. You can phone, fax, text or email.



Phone: 0845 077 6000



Fax: 0131 220 6313



Email: advice@chss.org.uk



Text “CHSS” followed by message to 07766 40 41 42

This symbol-based education resource has been created using Boardmaker and other images such as clip art.

It is designed for people who have had a stroke and have aphasia.

There are three parts to the series:

Part 1 - Early Days

Part 2 - Rehabilitation

Part 3 - Moving On

Also available from CHSS is the Conversation Support Book.

CHSS would appreciate any comments about using this resource in order to improve it further. Please direct comments to Lorna McTernan Health Information Manager.



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www.chss.org.uk