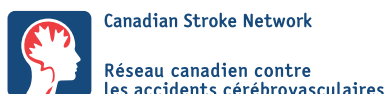




A Patient's Guide to Canadian Best Practice Recommendations for Stroke Care

Canadian Best Practice Recommendations for Stroke Care have been developed by stroke experts across the country. These recommendations focus on optimal treatment for stroke patients. This guide provides patients and their families with practical information drawn from the recommendations. Learn more about the Canadian Stroke Strategy at www.canadianstrokestrategy.ca



Stroke Prevention, Treatment and Recovery: Basic Information for Patients and Their Families

Strokes can be prevented and treated. *Canadian Best Practice Recommendations for Stroke Care* describe how to prevent stroke and how to care for patients with stroke. These recommendations are based on current research. When the *Best Practices* are followed, the impact of stroke is reduced.

Be informed | Be involved | Take action

KNOW ABOUT STROKE

- Stroke is a medical emergency.
- The faster a possible stroke patient gets to hospital, the better their chances of receiving treatments that could help reverse the effects of the stroke.
- Be familiar with the warning signs of stroke and take immediate action by calling 9-1-1 or your local emergency number.

Know the Signs and Symptoms of Stroke:

Weakness — Sudden loss of strength or sudden numbness in the face, arm or leg, even if temporary.

Trouble speaking — Sudden difficulty speaking or understanding or sudden confusion, even if temporary.

Vision problems — Sudden trouble with vision, even if temporary.

Headache — Sudden severe and unusual headache.

Dizziness — Sudden loss of balance, especially with any of the above signs.





EMERGENCY RESPONSE

- Never drive yourself or the person having a stroke to the hospital. **Call an ambulance.**
- Ask to be taken to the closest hospital that provides expert stroke care.
- You should be seen by doctors and nurses quickly after you arrive at hospital.
- You should receive a brain scan to find out if your stroke was caused by a blood clot or bleeding into your brain.
- If there is a blood clot in your brain, you should be assessed to see if you might benefit from a clot-busting drug (called tPA) that can help re-open blocked arteries. This drug can reduce the severity of the stroke and reverse some of the effects of the stroke. However, it must be given as soon as possible. **Find out if tPA can help you.**
- If you have had a mini-stroke, called a transient ischemic attack or TIA, you need immediate treatment to prevent a major stroke, even if you are not admitted to hospital. **Ask about treatment and follow-up appointments.**



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STROKE CARE IN HOSPITAL

- You should be seen by a team of health-care professionals who are experts in stroke, preferably in a special unit dedicated to the care of stroke patients.
- The stroke team will plan your treatment and rehabilitation needs, and discuss these with you. **Get involved in the plan.**
- You should be assessed to see if you have trouble swallowing. Swallowing difficulties are common after stroke and can lead to choking and pneumonia. Your diet should be assessed as well.
- If your stroke was caused by a blood clot, you should be given a blood thinner, like ASA (commonly referred to as Aspirin™) to help prevent more blood clots. **Ask if a “blood thinner” can help you.**
- You should have a special scan to see if the blood vessels in your neck are blocked and are a cause of your stroke.
- If your neck arteries are blocked, you should be assessed to see if you need surgery.
- You should have your blood pressure checked to make sure it is not too high. High blood pressure is the leading cause of stroke. **Know your blood pressure.**
- You should have your blood sugar checked to find out if you have diabetes. Diabetes is an important risk factor for stroke.





REHABILITATION

- Your rehabilitation team should involve you in deciding what kind of rehabilitation you need and develop a plan just for you. **Get involved in making the plan.**
- Your rehabilitation plan should be updated as your recovery progresses.
- Your mood, memory, ability to handle personal affairs and your ability to think should be assessed.
- Depression is very common after stroke for both patients and their caregivers. **Share your concerns.**
- Your ability to communicate, use your limbs, walk by yourself, carry out personal care and other daily tasks necessary to safely return home should be assessed.
- You should work with your health-care team to get ready for your return home. **Know what changes need to be made in your home to make it safe and accessible.**
- When you leave hospital, rehabilitation should continue and may occur either in a day hospital, in a clinic, other community services, or at home. **Know what your continued rehabilitation needs are.**
- When returning home, you may require additional help from family or other caregivers. **Know what help you may need from others.**
- Rehabilitation, recovery and reintegration into the community can continue for days, months, or years after stroke.



PREVENTION

- Once you have had a stroke or mini-stroke, the chance of having another one is higher. Know the signs and symptoms and **be prepared** to respond.
- You need to work with health-care providers to develop a plan to deal with the things that put you at risk of stroke.
- Know your risk factors for stroke and find out how to reduce them. **Take action.** These include:
 - high blood pressure
 - unhealthy diet
 - lack of exercise
 - smoking
 - high cholesterol (lipids)
- You may be prescribed ASA (commonly referred to as Aspirin™) or another blood thinner to take every day.
- A combination of lifestyle changes and medications may be necessary to control your blood pressure, diabetes, and cholesterol. **Take control.**



EDUCATION

If you had a stroke or mini-stroke, or if you are at risk for stroke, you should be given key information from health-care professionals at every stage of your care. **Find out:**

- What has the stroke done to me?
- What will my recovery be like?
- What are my needs after I leave the hospital?
- What are my emotional needs and those of my family?
- What can I do to prevent another stroke?
- How can I access services and support in my community?

Before you leave hospital, you should receive educational materials, such as the Heart and Stroke Foundation's "Let's Talk About Stroke."

Ask questions, get answers.

There is hope after stroke.
To learn more, visit:

www.canadianstrokestrategy.ca

www.heartandstroke.ca

www.canadianstrokenetwork.ca

www.sodium101.ca

www.strokengine.ca