



The Brain Buzz

A UAMS NEWSLETTER FOR STROKE SURVIVORS AND THEIR CAREGIVERS

Need Some Support?

Each week, stroke survivor Molly Schwarz visits patients at UAMS on H8 that have had a stroke. If you are interested in having her visit with you to share her experience and provide support, please let your nurse know.



UAMS
For a Better State of Health

B.E.F.A.S.T.—Recognizing a Stroke

Written by:

Michelle Peters, BSN, RN, CCRN

Amanda, a 34 year old office worker, did not know she was having a stroke. “It started one day when I was at work, I was having difficulty walking without stumbling over my own feet.” Over the next 3 weeks she experienced increasing problems with her balance and coordination. “I had frequent bouts of dizziness and fell doing simple things, like putting on my shoes.” Amanda’s husband feared something was wrong and encouraged her to see a doctor. “I never imagined she was having a stroke,” Tom said. “I still remember the fear when the doctor said the word STROKE, our whole life together flashed before my eyes.”

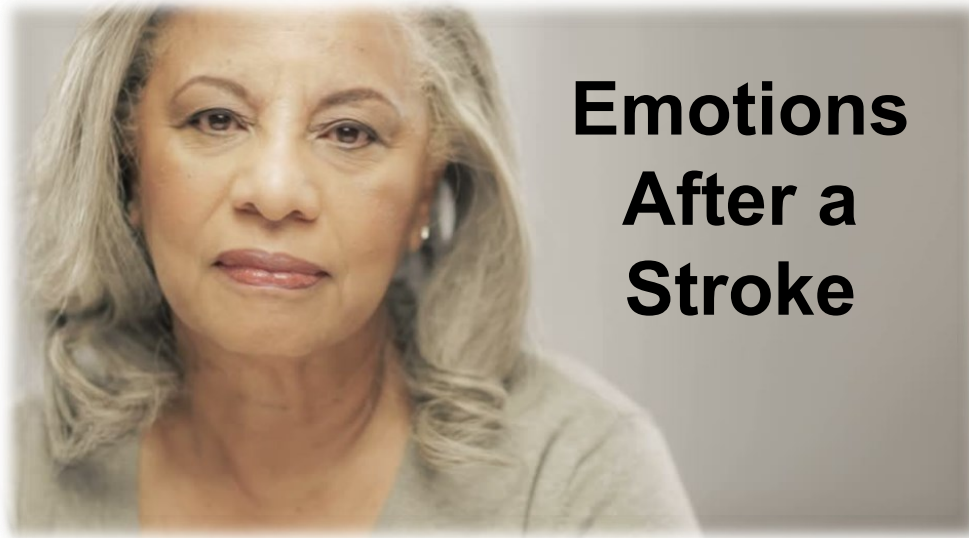
Being able to spot the signs of a stroke early can help improve the life of someone you love. Studies have shown that approximately 1.9 million brain cells die every minute during a stroke (Saver, 2006). Losing these brain cells can leave stroke victims with lifelong disabilities. Early recognition is the key to preserving function and quality of life after a stroke. Amanda suffered a hemorrhagic (brain bleed) stroke in the back of her brain along the Posterior Cerebral Artery (PCA). This is the area of the brain that controls vision and balance.

Many people know how to spot a stroke using the F.A.S.T. acronym, but there is another acronym that can better help us identify strokes that affect the back area of the brain along the PCA. This acronym is B.E.F.A.S.T. If you recognize any of the following signs or symptoms in someone you know or love, call 911 right away!

B	E	F	A	S	T
Balance off	Eyes — unclear vision	Face/ facial droop	Arms/ legs weak	Speech slurred, confused	Time lost is brain lost

CALL 911 AS SOON AS SYMPTOMS BEGIN

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Emotions After a Stroke

Right after a stroke, a survivor may respond one way, yet weeks later respond differently. Some survivors may react with understandable sadness; others may be amazingly cheerful. These emotional reactions may occur because of biological or psychological causes due to stroke. These changes may vary with time and can interfere with rehabilitation.

- Tell yourself that your feelings aren't "good" or "bad." Let yourself cope without feeling guilty about your emotions.
- Find people who understand what you're feeling. Ask about a support group.
- Get enough exercise and do enjoyable activities.
- Give yourself credit for the progress you've made. Celebrate the large and small gains.
- Learn to "talk" to yourself in a positive way.
- Allow yourself to make mistakes.
- Ask your doctor for help. Ask for a referral to a mental health specialist for psychological counseling or antidepressant medication if needed for depression.
- Make sure you get enough sleep at night. Sometimes lack of sleep can cause emotional changes.

*Source: American Stroke Association, 2012

B.E.F.A.S.T. Continued....

For more information on B.E.F.A.S.T.:



American Heart Association Journals: <http://stroke.ahajournals.org/>

Stanford Medicine (2014), BE FAST: Learn to recognize the signs of stroke (video); Retrieved from <http://scopeblog.stanford.edu/2014/05/02/be-fast-learn-to-recognize-the-signs-of-stroke/>

Saver, J.L. (2006). Time is Brain Quantified, *Stroke* 37(1), 263-266. Retrieved from <http://stroke.ahajournals.org/content/37/1/263>



Caregivers: Need Help After Your Loved One Has Had a Stroke?

The website provided by the American Stroke Association can help. This website provides many resources for caregivers to help you to manage the stressful time right after a stroke. Go to www.strokeassociation.org, click on “Life After Stroke” and then on “Family Caregivers.” If you aren’t able to access the internet, call the American Stroke Association at 1-888-4-STROKE.

Adaptive Clothing for Stroke Survivors

By Dana Smith, MS, MCHES
Patient Education Department

Special needs clothing, also known as adaptive clothing, can be very helpful for people who are disabled or have a limited range of motion and need help getting dressed. Adaptive clothing allows the wearer to retain his or her dignity and provide some level of self-care.

Specific products you might find include:

- Front zip dresses for women who have weakness in her arms.
- Elastic waist band slacks with loops in the front to pull slacks on with ease
- Snap back shirts which are easy to slide on and off and for the caregiver to snap
- Velcro fasteners rather than buttons
- Side zippers which are good for those who have weakness in the legs
- Lap robes for patients needing to be in a wheelchair

What to Look for When Purchasing Adaptive Clothing:

- Materials that aren’t abrasive to the skin
- High quality fabric that can hold up to cleaning
- Fasteners that are not located on tender areas of the body
- Feel natural and comfortable
- Correct sizing
- Look like normal clothes and not medical clothes.
- Do not hang where they could get caught in wheelchair wheels or a walker

Following are some companies that sell adaptive clothing.**

Silvert’s
www.silverts.com
800-387-7088

Adaptive Clothing Showroom
www.adaptiveclothingshowroom.com
845-352-1674

Buck & Buck
www.buckandbuck.com
800-458-0600

BH Medwear
www.bhmedwear.com
866-992-4633



**Need More
Information
About Stroke?**



National Stroke Association

1-800-STROKES (787-6537)

www.stroke.org

American Stroke Association

1-888-4-STROKE (478-7653)

www.strokeassociation.org

UAMS Neurology Department

501-686-5838

<http://neurology.uams.edu/>

Could you be at risk for **STROKE?**

Do you have high blood pressure? High cholesterol?

Diabetes? Excess weight? Heart problems?

A family history of stroke or aneurysms? Do you smoke?

All of these factors put you at a higher risk for stroke.

A stroke occurs when blood circulation to the brain fails due to either a blocked or ruptured blood vessel. The resulting lack of oxygen to brain cells can impair brain function. **STROKE IS THE THIRD LEADING CAUSE OF DEATH IN THE UNITED STATES.** Of the roughly 600,000 new and recurrent cases of stroke each year, 160,000 are fatal. **CURRENTLY, THERE ARE 4 MILLION STROKE SURVIVORS, MANY OF WHOM HAVE SIGNIFICANT DISABILITIES.**

STROKE RISK FACTORS

ESTIMATED INCREASE IN RISK

ATRIAL FIBRILLATION	17 times
HYPERTENSION	2 TO 4
CARDIAC DISEASE	2 TO 4
NO EXERCISE	1.8 TO 3.5
DIABETES	1.5 TO 2.5
SMOKING	1.5 TO 2.5
HEAVY ALCOHOL USE	1 TO 3