

Your Health Matters! By Your Pharmacist -Angela Kwok

Stroke: Type, Signs and Treatment

Stroke can happen in two main ways:

Ischaemic Stroke: A blood clot or plaque that blocks blood vessel in the brain (80%)

When a blood clot forms somewhere in the body and travels to the brain, it gets stuck in small blood vessel and stops blood getting through. These kind of strokes are called **embolic strokes**

As blood flows through the arteries, it may leave cholesterol-laden “plaques” that stick to the inner wall of the artery. Over time, these plaques get larger and block major arteries in the neck and stop blood getting to the brain. These kinds of strokes are called **thrombotic strokes**.

Haemorrhagic Stroke: Due to blood vessels in the brain leak or rupture (20%)

When blood leaks into the brain, it stops oxygen and nutrients being delivered. Several disorders can cause haemorrhagic strokes, including long standing high blood pressure and cerebral aneurysm (a weak spot in an artery wall that balloons out, gets bigger and weaker and can burst).

Mini Stroke (Transient Ischaemic Attack)

When signs of stroke are present but go away within 24 hours, the term TIA is used. TIA can last from a few minutes to several hours. TIA requires emergency treatment, as the risk of having a stroke is at its highest in the first few hours to days after a TIA.

Risk factors for Stroke:

High blood pressure (**most important risk factor for stroke**)
Family history of stroke, Previous TIA, Irregular pulse (Atrial Fibrillation)
Diabetes, High cholesterol, Fibromuscular Dysplasia (FMD)
Smoking, Excessive alcohol intake (more than 6 standard drink per day)
Obesity, Poor diet and Lack of exercise

Sign of Stroke: F. A. S. T Test

FACE: Check their face. Has their mouth drooped? Can they smile?

ARM: Can they lift both arms and leave them there?

SPEECH: Is their speech slurred? Do they understand you?

TIME: Is critical Call 000 with the above signs - sooner treatment means better recovery

If the Stroke person is **CONSCIOUS:**

Follow **DRS ABCD**
Calm and reassure the patient
Support head and shoulders on pillows
Loosen tight clothing
Maintain body temperature
DO NOT give them anything to eat and drink
Wipe away secretions from mouth
Ensure an ambulance has been called

If the Stroke person is **UNCONSCIOUS:**

Follows **DRS ABCD**
Call 000- do NOT hang up -
Ensure an ambulance is coming
Send someone for a defibrillator
Check airway and breathing-
- Start CRP if not breathing
Attach Defibrillator ASAP
Be ready to defibrillate if required

Treatment of Stroke

Early treatment after a stroke is vital - faster treatment means more of the brain can be saved
tPA (Tissue Plasminogen Activator) which breaks down blood clots (but it can also cause bleeding) may be given for ischaemic stroke patient provided that
It is started within 4.5 hours of stroke and after a CT scan
It is started in a hospital where experienced doctors and specialist service are present

For more information about treatment & medicines for Stroke, talk to your doctor or pharmacist

Useful Websites: Stroke Foundation Australia <https://strokefoundation.com.au>

