

Patient Talk!



The International Council of Nurses
Informed Patient Project

Women and Stroke

Did you know that stroke is the second leading cause of death and one of the most important causes of disability worldwide? Did you know that more women than men die from stroke? And did you know that stroke is largely preventable? Stroke prevention starts with knowledge – of what stroke is, what increases the risk of having a stroke, and how best to counter the risk factors with action.

What is stroke?

Stroke is a type of cardiovascular disease marked by a sudden loss of brain function. This loss of function is caused either by the interruption of blood flow to the brain (called an ischemic stroke) or by the rupture of blood vessels in the brain (called a hemorrhagic stroke). Because nerve cells in the area die, a variety of effects can result, depending on what part of the brain has been injured and the extent of the damage.

A stroke can affect a person's emotions, behaviour and personality, as well as their ability to move and coordinate movement, communicate, plan, reason, understand, remember, and more.ⁱ Overnight, stroke changes lives, families and relationships. And overall, it places a significant economic burden on communities and society.

Why focus on women?

Stroke is an important health issue for both men and women. However, traditionally it has been seen as a man's disease – a faulty and dangerous perception. In developing countries, half of all deaths of women over 50 are due to heart disease and stroke.ⁱⁱ In the United States, one in 2.5 women die of heart disease, stroke and other cardiovascular diseases compared with one in 30 who die of breast cancer.ⁱⁱⁱ Despite this, only 13 percent of women in the United States believe heart disease and stroke are the greatest health

threat to women. And surveys show that women's knowledge of stroke warning signs remains low.^{iv}

For those who survive a stroke, women are more likely than men to have a poor outcome. More stroke survivors over age 65 are women^v and, because of their longer life expectancy, women who survive strokes are more likely to live alone than men. This means a woman's hospital stay will generally be longer than a man's. Women are also more likely to be transferred to a chronic care facility rather than to go home or to rehabilitation,^{vi} dramatically affecting their independence and quality of life.

Are you at risk?

Certain factors can place you at increased risk of stroke. A risk factor is something in your physical condition, family history or lifestyle that increases your chances of developing an illness.^{vii} While women and men share many risk factors for stroke, women face additional gender-specific risk factors. For example, hormone replacement therapy and use of birth control pills, especially when combined with smoking, increase stroke risk.^{viii} Most risk factors can be modified, treated or controlled, but some can't. The more risk factors you have, the greater your chance of having a stroke.

Risk factors that can be modified^{ix} include:

- High blood pressure
- Diabetes
- Smoking, especially when combined with use of birth control pills
- Heart disease
- Atrial fibrillation (a type of irregular heart rhythm)
- Obesity and overweight
- Physical inactivity
- Unhealthy diet
- Stress



- Excessive alcohol intake
- High total cholesterol
- High triglyceride levels
- Depression
- “Mini strokes” (known as Transient Ischemic Attacks)

Risk factors that *can't* be modified^x include:

- Advancing age
- Gender
- Ethnicity/race
- Family history of early stroke
- Previous stroke

Make prevention your goal

Nurses and physicians can help you assess your risk for stroke. By discussing your risk factors and how to reduce them, you're taking an important step in gaining better control of your health. You can also reduce your risk of stroke by following these recommendations:^{xi}

- Have your blood pressure checked regularly and get treatment if it is elevated.
- Quit smoking or don't start.
- Start and maintain a regular exercise programme.
- Eat a well-balanced diet that is low in saturated fat, includes polyunsaturated and monounsaturated fats and is rich in fruits, vegetables, fish or omega-3 fatty acids (found in mackerel, lake trout, herring, sardines, albacore tuna and salmon), whole grains and nuts.
- Maintain a healthy weight.
- Limit your alcohol intake.

As you can see, adopting a healthier lifestyle helps reduce your risk of stroke. But some risk factors may require preventive treatment, such as the use of blood thinners or the surgical removal of blood vessel blockages.^{xii} This is why it's important to discuss your health situation with your nurse or physician.

As mothers, sisters, wives and friends, women can also be influential in modelling healthy lifestyle behaviours and encouraging them in others, especially young people. Many risk factors for stroke are determined by behaviours learned in childhood and continued in adulthood, such as smoking, poor diet and lack of exercise. For example, physical activity decreases markedly in

adolescence, particularly in girls.^{xiii} Stroke prevention should start early.

Know the warning signs of stroke

Just as important as learning how to prevent stroke is knowing how to recognize one, because when you or someone you know has a stroke, time is of the essence. Call emergency help immediately. Getting immediate care can minimize injury to the brain and help reduce disability and even death. Stroke warning signs include:

- Sudden numbness or weakness of the face, arm or leg, especially on one side of the body.
- Sudden confusion, trouble speaking or understanding.
- Sudden trouble seeing in one or both eyes.
- Sudden trouble walking, dizziness, loss of balance or coordination.
- Sudden severe headache with no known cause.^{xiv}

Treatment

Once stroke has been diagnosed, acute treatment varies depending on the type of stroke experienced. Where a blood vessel has been blocked by a blood clot, as in an ischemic stroke, therapy with a “clot-busting” drug must be administered within three hours of the stroke's onset to work best.^{xv} Where there is blood vessel leakage, as in a hemorrhagic stroke, surgery or a less-invasive endovascular procedure – where a catheter is guided to the trouble spot via a major artery in the arm or leg – may be recommended.

Longer term care depends on the extent of the stroke and the degree of disability. Quite simply, stroke is different in everyone. Some people make a good recovery and return home, while others face a dramatically different life. In particular, individuals with disability face weeks, months, perhaps years, of rehabilitation, re-learning and frustration. Feelings of depression and worthlessness are common. But small gains can bring great joy; these must be celebrated. Hope is important. Families, too, must adjust to a different pace and a changed loved one. They wonder if and when life will ever get back to normal. It may not. Fatigue is common, especially in family

members who assume caregiving responsibilities. Strong, resilient families gradually find a way to support each other while supporting their loved one. Family and caregiver self-help groups can be helpful for families finding it difficult to cope. As always,

health professionals can provide information and help direct you to appropriate resources.

Quick fact

- Worldwide, 15 million people suffer strokes each year. Of these, 5 million die and 5 million are left permanently disabled.^{xvi}

Resources

World Health Organization & the Centers for Disease Control and Prevention, U.S. Department of Health and Human Services (2004). *The Atlas of Heart Disease and Stroke*. Downloadable at www.who.int/cardiovascular_diseases/resources/atlas/en

World Heart Federation: www.worldheart.org

American Heart Association: www.americanheart.org

American Stroke Association: www.americanstroke.org

Heart and Stroke Foundation of Canada: www.heartandstroke.ca

The Stroke Association, UK: www.stroke.org.uk

ⁱ Heart and Stroke Foundation of Canada. What is a Stroke? Accessed March 2005 at: www.heartandstroke.ca (click on 'Stroke', then 'General Info', then 'What is a Stroke?').

ⁱⁱ World Heart Federation. Women, heart disease and stroke [fact sheet]. Accessed March 2005 at: www.worldheart.org/press-factsheets.php (click on 'Women').

ⁱⁱⁱ American Heart Association. Know Heart and Stroke. Accessed March 2005 at: www.americanheart.org/presenter.jhtml?identifier=2787

^{iv} American Heart Association. Facts about women and cardiovascular diseases. Accessed March 2005 at: www.americanheart.org/presenter.jhtml?identifier=2876.

^v Brigham and Women's Hospital. Women and Stroke: What you need to know about strokes. Accessed March 2005 at: www.brighamandwomens.org/patient/womenandstroke.asp.

^{vi} Canadian Women's Health Network. Women and Stroke. Accessed March 2005 at: www.cwhn.ca/resources/kickers/stroke.html.

^{vii} Heart and Stroke Foundation of Canada. Stroke Risk Factors. Accessed March 2005 at: www.heartandstroke.ca (click on 'Stroke', then 'Risk Factors').

^{viii} World Health Organization. Women: a special case? In *Atlas of Heart Disease and Stroke*, Geneva, WHO, September 2004, p.42.

^{ix} American Stroke Association. Stroke Risk Factors. Accessed March 2005 at: www.strokeassociation.org/presenter.jhtml?identifier=4716; World Health Organization. Women: a special case? In *Atlas of Heart Disease and Stroke*, Geneva, WHO, September 2004, p.42.

^x Ibid (American Stroke Association).

^{xi} Brigham and Women's Hospital. Women and Stroke: What you need to know about strokes. Stroke Prevention. Accessed March 2005 at: www.brighamandwomens.org/patient/womenandstroke.asp.

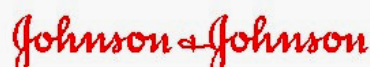
^{xii} American Stroke Association. Acute and Preventive Treatments. Accessed March 2005 at: www.strokeassociation.org/presenter.jhtml?identifier=2532.

^{xiii} World Health Organization. Risk factors start in childhood and youth. In *Atlas of Heart Disease and Stroke*, Geneva, WHO, September 2004, p.26.

^{xiv} American Stroke Association. Learn to recognize a stroke. Because time lost is brain lost. Accessed March 2005 at: www.strokeassociation.org/presenter.jhtml?identifier=1020.

^{xv} American Stroke Association. Acute and Preventive Treatments. Accessed March 2005 at: www.strokeassociation.org/presenter.jhtml?identifier=2532.

^{xvi} World Health Organization. Global burden of stroke. In *Atlas of Heart Disease and Stroke*, Geneva, WHO, September 2004, p.50.



supports this initiative