

Basic information about stroke and how it can affect you

We're for life after stroke

Need to talk?

Call our confidential Stroke Helpline on **0303 3033 100**.

You may also find our other leaflets helpful.

- We are the Stroke Association
- How to prevent a stroke
- When a stroke happens
- Life after stroke
- The road to recovery

We also have lots more useful information. To order leaflets and factsheets, or to find out more about stroke, please call **0303 3033 100**, email **info@stroke.org.uk** or visit us at **stroke.org.uk**.

We are a charity. We rely on your support to change lives.

Produced by the Stroke Association's Information Service. To see which references we have used, visit **stroke.org.uk**.

Please call us on **0115 871 3949** or email **quality@stroke.org.uk** if you are unhappy with us in any way. We will happily discuss any issues and help sort them out.

The Stroke Association is registered as a charity in England and Wales (No 211015) and in Scotland (SC037789). Also registered in Northern Ireland (XT33805), Isle of Man (No 945) and Jersey (NPO 369).

Introduction

Every year there are about 152,000 strokes in the UK. That's more than one every five minutes. Most people affected are over 65, but anyone can have a stroke, including children and babies.

For many people a stroke happens suddenly and without warning, and often there is little time to prepare for one. A stroke can affect how you move, feel and think. Although everyone's experience of a stroke is different, some of the effects are more common than others. This leaflet explains what a stroke is and how it could affect you.

"I was having a great day, nothing seemed unusual. Suddenly the lights went out. Later I woke up in hospital. I couldn't move my right side or speak."

David, stroke survivor

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What is a stroke?

"I was making a drink, and the next thing I knew I was lying on the floor, confused and disorientated. I was fit and healthy and worked in the Royal Marines."

Justin was 50 when he had a stroke.

A stroke is a brain attack. It happens when the blood supply to part of your brain is cut off.

Blood carries essential nutrients and oxygen to your brain. Without blood, your brain cells can be damaged or destroyed and they won't be able to do their job.

Because your brain controls everything your body does, a stroke will affect the way your body functions. For example, if a stroke damages the part of your brain that controls your right leg, then you may have weakness or numbness in that leg.

Your brain also controls how you think, learn, feel and communicate.

A stroke is sudden and the effects on your body are immediate.



Your doctor may use the following terms.

CVA – this stands for cerebrovascular accident (the medical name for a stroke). It is better to say 'stroke' as strokes are not accidents – there is always a cause.

Infarction – this means an area of brain tissue hasn't received its blood supply and as a result it has been damaged.

How does a stroke happen?

Blood flow to the brain can be cut off by:

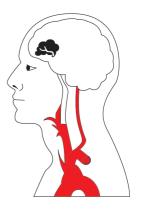
- a blockage (ischaemic stroke), or
- a bleed (haemorrhagic stroke).

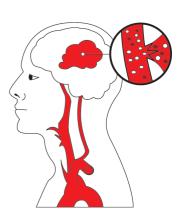
There are two main types of stroke. The most common type of stroke (about 85% of cases) is caused by a blockage. This is called an ischaemic stroke and may be caused when:

- a blood clot forms in a main artery to the brain (sometimes called a cerebral thrombosis)
- a blockage, usually a blood clot from the heart, is carried in the bloodstream to one of the arteries supplying the brain (called a cerebral embolism), or
- a blockage forms in the tiny blood vessels deep within the brain (called a lacunar stroke).

Less commonly, (about 15% of cases) strokes are caused by bleeding in or around the brain. This type of stroke is called a haemorrhagic stroke. It may be caused when:

- a blood vessel bursts within the brain (an intracerebral haemorrhage), or
- a blood vessel on the surface of the brain bursts, causing bleeding into the area between the brain and the skull (called a subarachnoid haemorrhage).





What is a transient ischaemic attack (TIA)?

"I was walking to work when I lost the feeling in one leg, and I sort of collapsed. The following year, I suddenly went blind in one eye. I stood still for five minutes to work out what was going on."

Claire, stroke survivor



A transient ischaemic attack (TIA) happens when your brain's blood supply is interrupted for a very brief time. This is often called a mini-stroke.

The symptoms are very similar to a stroke (such as weakness on one side of your body, problems speaking or loss of sight) but they are temporary – usually lasting a few minutes or hours. You always recover within 24 hours.

With a TIA, part of your brain goes without oxygen for a short time. A TIA is a sign that this part of your brain is not getting enough blood and that you may be at risk of a more serious stroke in the future. So you should not ignore signs of a TIA – get medical help straightaway.

If you or someone you know experiences sudden stroke-like symptoms, don't assume it is a TIA and wait for things to get better. It could be a stroke, even if the symptoms seem to be improving, so always get medical help immediately.

For more information, see our factsheet 'Transient ischaemic attack (TIA).'

Never ignore a TIA (mini-stroke). It's a warning sign.

What are the common signs of a stroke?

The first signs that you have had a stroke are very sudden. Symptoms can include:

- numbness, weakness or paralysis on one side of your body (for example, a limp arm or leg, or a drooping lower eyelid or mouth)
- slurred speech, or difficulty finding words or understanding speech
- · sudden blurred vision or loss of sight
- · confusion or unsteadiness, or
- a sudden, severe headache.

"I was at home, getting ready to go to work when I suddenly collapsed. My dad dialled 999 immediately."

Ashley was 23 when he had a stroke.

Suspect a stroke? Act FAST – Call 999.

This simple test can help you recognise the signs of a stroke.

- **F-Facial weakness:** Can the person smile? Has their mouth or an eye drooped?
- **A Arm weakness:** Can the person raise both arms?
- **S-Speech problems:** Can the person speak clearly and understand what you say?
- T-Time to call 999.

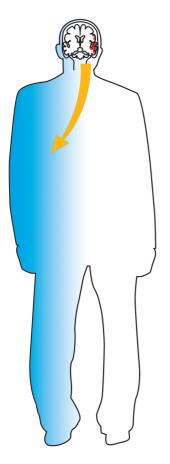
If you see any one of these signs, call 999 immediately.



How does a stroke affect your body?

"I was at home. I was alone. I lost all feeling in my right arm, then also in my right leg. At this point, I fell over. I realised it was a stroke."

Fred, stroke survivor



Your brain is like a computer – it sends messages around your body to enable you to function. It is made up of two halves – the left hemisphere and the right hemisphere. Each part of your brain has a specific job to do.

In general, the right half of your brain controls the left side of your body and vice versa. Specific areas of your brain control your ability to move, speak and write. Other areas will control your memory, emotions and vision.

A stroke damages brain cells so they can no longer work properly. As a result, the areas of your body they control are also affected. For example, if you have visual problems, the stroke will have damaged the area of your brain responsible for your vision.

The effects of your stroke will depend on:

- which part of your brain has been injured
- how bad the injury is, and
- your general health when the stroke happened.

Are you at risk?

You might have questions about why your stroke has happened. Some of the things that increase your risk of stroke cannot be changed.

- Gender (sex) in people under 75, men have more strokes than women.
- Age you are more likely to have a stroke if you are over the age of 65.
- Family history if a close relative has had a stroke, your risk is likely to be higher.
- Ethnic background if you are of South Asian or African-Caribbean origin, you are at a higher risk.

Medical conditions

There are medical conditions that can increase your risk of having a stroke. High blood pressure (hypertension), atrial fibrillation (a type of irregular heartbeat), diabetes and high cholesterol are risk factors, but you can manage them with medication and changes to your lifestyle. Your GP can test you for these conditions.

Lifestyle changes can reduce your risk of stroke.

- Do not smoke
- Avoid heavy drinking
- Be active
- Eat healthy food



Common effects of a stroke

We have factsheets about the many different effects of a stroke. Topics range from the physical effects to the emotional effects, plus communication problems and pain after a stroke. For copies, please contact us.



You are likely to have some disabilities in the first few weeks after having a stroke. Many people will make a good recovery, but some will be left with a long-term disability.

Weakness or paralysis

Weakness, clumsiness or paralysis are the most common effects of a stroke. They usually happen on one side of your body. Weakness or paralysis of an arm or leg is often made worse by stiffness (spasticity) of the muscles.

Speech and language

Are you experiencing problems with speaking, understanding what other people say, reading or writing? If so, you are not alone. Many people have difficulty with language after their stroke. This is known as aphasia.

People can have different types of aphasia. You can read more in our factsheet 'Communication problems after stroke'.

If you are finding it difficult to form words, you may have dysarthria. This happens when a stroke affects the muscles in your face, tongue or throat. It can affect how you speak and how your voice sounds.

Balance

Unsteadiness (loss of balance) can be caused by damage to the part of the brain that controls balance. Your balance can also be affected if you have weakness on one side of your body.

Bladder and bowels

Difficulty controlling your bladder and bowels (incontinence) is quite common after a stroke. Most people get control back after a few weeks.

Swallowing

About 40% of people have difficulty with swallowing after a stroke (dysphagia), though many people recover quickly. It can be dangerous if food goes down the wrong way and gets into your windpipe as it can cause chest infections like pneumonia.

You should have a swallow test in hospital and you should only be allowed to eat and drink when you can swallow safely. You may need fluid thickeners and help with eating for a while.

"I asked John a question and he gave a garbled response. I realised immediately that it was a stroke."

Susie's husband, John, had a stroke that affected his speech.



Common effects of a stroke

All strokes are different – their effects depend on where in the brain they happen. The effects of a second stroke can be just as varied as the first.

Sleep and tiredness

You might suffer from extreme tiredness (fatigue) during the first few weeks after a stroke. You may also have difficulty sleeping, which can make you even more tired. This fatigue can continue for many months. If you have gone back to work you may find this challenging. Being constantly tired may also be a sign of depression or a side effect of medication you are taking. Talk to your GP for advice and see our factsheet 'Fatigue after stroke'.

Sensation

Some people have problems with sensation – they feel too much or too little. You may be very sensitive to colour, sound or light, or you may not feel painful sensations like heat or sharp objects, which can lead to accidents and injuries.

Pain

You might experience pain after your stroke, such as muscle tightness (spasticity) or shoulder pain. You might also feel pain and changes in sensation if the 'pain centre' in your brain has been damaged.

Vision

A stroke can cause many different types of visual problems. Some people experience double vision or lose part of their vision in the centre or out to the side. A common condition is hemianopia – where you can see everything on one side but not on the other. This can cause practical problems. For example, you might have difficulty getting dressed or not be able to read.

Mental processes

A stroke often causes problems with mental processes such as memory, concentration, perception and understanding.

Memory problems might make it difficult for you to remember things that have happened recently. Also, if you are having problems concentrating, this may make your memory problems worse.

If you are finding it difficult to recognise or use familiar objects, you may have problems with your perception. You might also have problems with skills like telling the time if your brain can't make sense of what your eyes see. "My stroke left me with no movement in my left hand, double vision, memory loss and communication difficulties. But I've rebuilt my life and worked hard to get my confidence and independence back."

Robert, stroke survivor



Common effects of a stroke

Emotional problems can be difficult to understand and these 'hidden' effects of stroke are not always easy to talk about. We can help – call us on 0303 303 3100.



You are likely to have emotional ups and downs after a stroke. Feelings of depression, anger, sadness, anxiety, low self-esteem and loss of confidence are common.

It is normal to feel depressed after a stroke. Many people compare this to grieving because of the sense of loss a stroke can cause. Depression can affect your recovery so it is important to talk to your doctor about how you are feeling. Treatments, like counselling and antidepressants, are available. Your emotional recovery is as important as your physical recovery.



You might find it hard to control your emotions and may cry, swear or laugh at inappropriate times. This is known as emotional lability. You may find that your inhibitions are lifted and your behaviour is out of character. For more information, read our factsheets 'Depression after stroke' and 'Emotional changes after stroke'.

Recovering from a stroke

Every stroke is different and people who have had a stroke are affected in different ways. For some people, the symptoms are quite mild and last a short time. Other strokes may cause more severe and lasting damage.

When a stroke happens, some brain cells are damaged and others die. Dead brain cells can't start working again, but others may recover as the swelling caused by the stroke goes down.

It's also possible that some parts of the brain can learn to take over from the damaged areas. This is known as neuroplasticity. Most recovery happens in the first few months after a stroke, but some people can continue to recover for several years.

Life after stroke

Staying positive is key to your recovery – it is important not to give up. There is life after stroke and we can help you adapt and find ways to overcome any hurdles you may face.

Keeping a diary can help you monitor your recovery and see how far you have come. The smallest improvement marks a stage in your recovery and is something you should be proud of.





We are the Stroke Association

We believe in life after stroke. That's why we support stroke survivors to make the best recovery they can. It's why we campaign for better stroke care. And it's why we fund research into finding new treatments and ways of preventing stroke.

We're here for you. If you'd like to know more please get in touch.

Stroke Helpline: 0303 3033 100

Website: stroke.org.uk **Email:** info@stroke.org.uk

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