

The Medical Minute: Strike back at stroke -- know your risks

May 19 2010, By Raymond J. Reichwein

The incidence of stroke is on the rise; this year more than 795,000 people will have a stroke -- a 30 percent increase from 1996. This increase is likely related to our lifestyle choices.

The good news is that 80 percent of strokes could be prevented with control of the typical stroke and vascular risk factors: high blood pressure (hypertension), high cholesterol (hyperlipidemia), high blood sugars (diabetes mellitus), smoking, alcohol abuse, carotid artery disease and cardiac disease, including atrial fibrillation, an [irregular heart beat](#), with advanced age.

Anyone can suffer a stroke, and at any age. Approximately 25 percent of strokes occur in patients younger than age 65. Younger stroke patients have less common risk factors, to include migraine headaches, estrogen use (oral contraceptive pills, estrogen replacement therapy) and unknown clotting disorders. [Hemorrhagic stroke](#) patients may have an underlying [brain aneurysm](#) or vascular malformation. We also have seen a dramatic increase in childhood obesity and diabetes, with resulting vascular disease showing up as early as late childhood and young adults.

Stroke is still the third leading cause of death and a leading cause of adult disability. It can be either the result of a blood clot blocking a brain blood vessel (otherwise known as an [ischemic stroke](#); most common type representing approximately 85 percent of cases) or a brain blood vessel bursting (otherwise known as a hemorrhagic stroke).

Acute strokes are called "brain attacks," and early treatment leads to a better outcome ("time is brain"). [Acute stroke](#) treatments are available. An intravenous clot buster called t-PA ([tissue plasminogen activator](#)) with a 3-4.5 hour time limit, and intra-arterial mechanical clot removal devices with a 6-8 hour time limit.

Recognition of the symptoms and signs of stroke is crucial to early treatment. These include sudden onset of weakness, numbness, facial droop, language or speech problems, dizziness, coordination problems, balance problems and severe/atypical headaches. A simple way to remember the common signs of stroke is to think F.A.S.T.:

- Face - facial droop, uneven smile, numbness in face
- Arm - weakness, numbness, unable to move one side of body
- Speech - slurred speech, inappropriate words
- Time - time is critical, call 911

Patients also shouldn't ignore "mini-strokes," otherwise known as TIAs (transient ischemic attacks), which have the same stroke symptoms and signs but resolve completely usually in less than 30 to 60 minutes. TIAs can lead to a stroke in approximately 10 percent of cases and are a great opportunity for stroke prevention.

If individuals experience TIA or stroke symptoms or signs, they promptly should go to the emergency department for urgent evaluation and management. Dialing 9-1-1 is the fastest route. It's hoped that acute prompt [stroke](#) evaluation and treatment will lead to a better outcome.

Provided by Pennsylvania State University

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