

Cerebrovascular accident (CVA), also known as *stroke* is a leading cause of death in the United States. A stroke, sometimes called a brain attack, occurs when a clot blocks the blood supply to the brain or when a blood vessel in the brain bursts. A person can greatly reduce their risk for stroke through lifestyle changes and, in some cases, medication.

Stroke can cause death or significant disability, such as paralysis, speech difficulties, and emotional problems. Some new treatments can reduce stroke damage if patients get medical care soon after symptoms begin. When a stroke happens, it is important to recognize the symptoms, call 9-1-1 right away, and get to a hospital quickly.

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What you will learn:

- Facts about Stroke
- Symptoms of Stroke
- The Aide's Role in working with a client who has had a stroke



## Sudden Signs of Stroke

**F.A.S.T. is an easy way to remember the sudden signs of stroke. When you can spot the signs, you'll know that you need to call 9-1-1 for help right away. F.A.S.T. is:**

**Letter F \*Face Drooping** – Does one side of the face droop or is it numb? Ask the person to smile. Is the person's smile uneven?

**Letter A \*Arm Weakness** – Is one arm weak or numb? Ask the person to raise both arms. Does one arm drift downward?

**Letter S \*Speech Difficulty** – Is speech slurred? Is the person unable to speak or hard to understand? Ask the person to repeat a simple sentence, like "The sky is blue." Is the sentence repeated correctly?

**Letter T \*Time to call 9-1-1** – If someone shows any of these symptoms, even if the symptoms go away, call 9-1-1 and get the person to the hospital immediately. Check the time so you'll know when the first symptoms appeared.

## Risk Factors for Stroke

High blood pressure, high LDL cholesterol, and smoking are key risk factors for stroke. About **half of Americans** (49%) have at least one of these three risk factors.

Several other medical conditions and lifestyle choices can also put people at a higher risk for stroke, including:

- Diabetes
- Overweight and obesity
- Poor diet
- Physical inactivity
- Excessive alcohol use
- You can't control some stroke risk factors, like heredity, age, gender, and ethnicity. Some medical conditions—including high blood pressure, high cholesterol, heart disease, diabetes, overweight or obesity, and previous stroke or transient ischemic attack (TIA)—can also raise your stroke risk. Avoiding smoking and drinking too much alcohol, eating a balanced diet, and getting exercise are all choices you can make to reduce your risk.

- **Cerebrovascular Accident (CVA)** – a stroke occurs when the blood supply to part of the brain is stopped due to a blocked blood vessel. The result of a CVA depends on which blood vessels are blocked and which brain center is destroyed. The results of CVA may be paralysis or loss of speech or vision because nerve impulses do not reach the brain due to damaged brain tissue. Collateral circulation sometimes will take over the circulation for the damaged blood vessel and supply blood to the injured brain tissue.
- **Causes:**
  - Embolus – a blood clot which forms in the body, travels to the brain and lodges in a small vessel
  - Thrombus – a blood clot forms in the brain and blocks the blood vessel
  - Plaque – accumulates in the blood vessel and eventually closes it
  - Hemorrhage (aneurysm) – a blood vessel bursts, most common in people with high blood pressure

### The Aide's Role:

- Follow the Care Plan
- **Assist to Prevent Falls**
- Assist with mobility
- Assist in preventing pressure sores
- Provide support and encouragement
- Assist with ADLs- bathing, dressing, grooming, toileting, others
- Encourage independence
- Perform or assist with exercises
- If the client is having difficulty with communication, ask questions that can be answered with a “yes” or “no”, you can also use nonverbal communication such as gestures, pictures, flash cards and other communication helpers
- Use assistive devices ( special toothbrushes, combs, soap on a rope, raised toilet seat, bedside commode) and others as directed
- Promote client mobility through range of motion exercises and ambulation ( if possible)
- Follow safety guidelines
- Change the patient's position every 2 hours and check skin for injury; the client should not lie on affected side any longer than 1 hour
- Do not pull on or use the affected limb when lifting or moving the client
- Watch for swelling, discoloration, and pain in the affected limb
- Schedule rest periods between activities due to the client tiring easily
- Remind the client to follow instructions about proper swallowing techniques

Remember- Rehabilitation after a stroke (physical therapy, speech therapy, occupational therapy) is long and hard work for the client. Be patient with your client!

### *Home Care Aide Week-November 9-15, 2014*

***Caring in Action-***During November the home care and hospice community honor the millions of nurses, **home care aides**, therapists, and social workers who make a remarkable difference for the patients and families they serve. These heroic caregivers play a central role in our health care system and in homes across the nation. To recognize their efforts, we call upon all Americans to commemorate the power of caring, both at the home and in their local communities and join with the National Association for Home Care & Hospice (NAHC) by celebrating November as Home Care and Hospice Month.

Resources- CDC- Stroke; American Stroke Association; Mosby's Textbook for the Home Care Aide- third edition. NC PHCAST Direct Care Basics handout 11.4f; NC PHCAST phase IV module 15 (The Home Care Aide's role in providing care for the most common diseases seen in Home Care). Additional attachments from the American Heart and the American Stroke Associations.

## Stroke Symptoms

Symptoms depend on the extent of the brain injury and the area involved and may include problems with the following:

- Communication- Due to difficulty receiving, understanding, and expressing speech and language. Clients may have slurred speech and problems finding the “right” word they want to say.
- Due to poor balance, the client is at great risk of falls
- Due to limited mobility, weakness and perception problems, there may be severe problems with performing Activities of Daily Living (ADL's) and clients usually require a great deal of assistance with grooming and hygiene
- Safety due to poor balance and possible paralysis of a part of the body and possible defective vision
- Pain in affected shoulder or arm due to the weight of the paralyzed arm pulling on joints
- Nutrition due to difficulty in swallowing, self-feeding and awareness
- Depression due to effects of serious illness, problems with mobility (getting around), and long recovery times. Clients may have low self-esteem because of the many losses they have experienced and the need to depend on others for so much care.
- Emotions change so quickly that the client and family may not understand what is happening. These rapid mood swings are a result of damage to the brain tissue and are not an indication of true feelings.

**Observe, Record and Report: Someone who has had a stroke may not be able to tell you how they are feeling. So watch carefully and report these changes.**

- **Coughing, and choking when eating and swallowing**
- **Incontinence ( can't control urine and/ or bowels)**
- **Constipation**
- **Skin changes**
- **Complaints of pain**
- **Depression**
- **Signs of Infection**
- **Other observations as assigned on the Plan of Care**