

forward

Reducing risks – improving outcomes

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STROKE
FOUNDATION

OF NEW ZEALAND INC



Regular exercise plays an important role in stroke risk reduction

Photo: Grant Bayley www.gbdesignz.co.nz

Save a life: recognise a Stroke

If you have a stroke, the very least you would be hoping for would be quick recognition of your symptoms by someone nearby. Delayed recognition is delayed medical response. Delayed response can have tragic consequences.

It is an established medical fact that clear recognition of Stroke symptoms enables early intervention to save lives and improve outcomes. Yet, according to the latest Stroke Foundation/Colmar Brunton research¹, stroke victims only have a 50/50 chance of having their stroke recognised because most New Zealanders are unable to clearly recognise a stroke. People 30 or under were even less likely to diagnose correctly.

The research asked people how they would recognise a stroke, and what they would do in response. Less than half of the respondents clearly identified a major symptom, while four of every five people interviewed did realise stroke is a medical emergency.

According to Stroke NZ CEO, Mark Vivian, the findings were both heartening and challenging: "It's wonderful that many New Zealanders recognise stroke is a medical emergency. That is very good indeed. But the problem comes in recognising the stroke in the first place!"

Stroke is a major public health issue. Despite being New Zealand's second single biggest killer and the leading cause of adult disability, stroke is still not well understood in the community. "It's important everyone understands stroke and can recognise stroke symptoms," Mr Vivian said. "Medical research is unanimous that a delay in diagnosis and treatment can hugely impact on future prospects for the stroke patient."

Medical intervention within three hours can significantly improve stroke outcomes – reducing risk of death and improving levels of rehabilitation. "People need to get the stroke patient to the hospital as quickly as possible. Any delay can significantly increase the possibility of death and major disability," said Mr Vivian.

Mr Vivian believes a nationwide multimedia campaign about stroke is long overdue. Canadian ongoing research has clearly shown that improvements in recognition of stroke symptoms usually lead to earlier presentation for stroke treatment. This results in significantly improved outcomes for stroke patients, which in turn saves lives as well as reducing ongoing costs to taxpayer and caregivers.

A person may well be having a stroke if they display:

- Facial weakness (eg lop-sided smile?)
- Arm or leg weakness on one side of body
- Sudden onset of speech problems (eg slurred or unable to speak)
- Loss of half of visual field.

Anyone, anywhere

Stroke is supposed to be an affliction of the elderly, but they can happen to anyone, anywhere. Currently, so many of the national helpline calls seem to be on behalf of stroke survivors under 50. A very large percentage of these relate to those under 40.

According to Julie Cuttance, Stroke Foundation's National Office Manager: "barely a day goes by without a call from young stroke survivors or their caregivers."

Today I heard of a 35 year old man being released from Middlemore hospital following a stroke. Last week I had a call from a 22 year old who suffered a stroke following a half marathon. A day later, I heard of the funeral of a 29 year old mother who died from a stroke. I regularly get calls for help or information from or about people in their 40s."

To recognise symptoms of Stroke and risk factors, check the Stroke Foundation website www.stroke.org.nz or contact any of the Stroke regional offices listed in this newsletter.

Is it a Stroke? Act FAST. Call 111.



Face - SMILE
(is one side droopy?)

Arms - RAISE BOTH ARMS
(is one side weak?)

Speech - SPEAK A SIMPLE SENTENCE
(slurred? unable to?)

Time - Lost time could be lost brain, get to hospital FAST

¹ 1,000 telephone interviews with a random sample of New Zealanders aged 15+. The margin of error is 3.1%.

Stroke Foundation Contact Details

If you have any questions about stroke or the Stroke Foundation please contact the National Office or your Regional Office.

Freephone Information service

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www.stroke.org.nz

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Brain gym on the building site

By Rose Stanton

Brain Gym involves a series of simple movements used to enhance brain function and make better use of the whole brain and has enormously helped my husband Mike. In 2003, a stroke and subsequent craniotomy left Mike (now 50) with limited sensation on his left side, neurogenic fatigue and reduced brain function due to scarring and epilepsy medication. Understandably, he was very depressed.

About nine months after the stroke he had gradually worked up to two full days back at work and had been released from the support of his wonderful occupational therapist at Dunedin Hospital. We were then still learning to cope with our vastly changed lives and approached the local Stroke Foundation Field Officer who lent us some interesting self-help material including the Brain Gym Teacher's Edition.

The book appeared daunting at first, especially since Mike was suffering from lack of concentration and poor decision-making as a result of the stroke. However, he managed to start with the section on how to understand and read things better. He noticed an immediate benefit and started practising Brain Gym at home daily. It helped him climb out of a debilitating depression. He was then able to focus on becoming more functional at work and at home.

Noticing when he needs to refocus has been important for Mike: "If I can sneak away and do a bit of Brain Gym when I find myself getting a bit lost or overwhelmed, it helps get me back in the zone again."

But doing Brain Gym at work initially proved hazardous. The first time he tried was at morning tea on the sixth floor of an office building redevelopment. He had already been sternly reprimanded by a serious young foreman for not wearing his steel-capped shoes – Mike's feet were quite sore from diminished limb control. While everybody else was sitting on their tool-boxes, he sneaked into a vacant room and, carefully watching the door, unfurled one ear at a time slowly from top to bottom, not daring to do both at the same time.

Brain Gym 101 is a 24-hour course introducing basic movements and clear steps for setting up the process with family and friends. You can also have private sessions with a licensed Brain Gym practitioner. To find out more about Brain Gym, including how to become a licensed professional, visit www.braingym.org



YourFastShop online fundraiser

Stroke Foundation of NZ is a beneficiary on YourFastShop, an online shopping site. The idea is you can shop from the comfort of your own home or office (or anywhere for that matter) and take advantage of internet specials from leading retailers, some with free delivery. At the same time, you can choose Stroke as the designated charity to benefit from your online purchases.

How it works

Go to www.yourfastshop.co.nz. Browse through the range of products, services and latest deals from the retailers. When you make a purchase, you choose Stroke Foundation as the beneficiary. Funds are paid to Stroke Foundation for every purchase you make through YourFastShop at the specified amounts in the A-Z retailers section.

Purchases are dealt with directly by your chosen retailer. You never pay more than the price on the retailers' websites. Retailers pass commissions onto YourFastShop from their advertising budget. This is based on the number of visits to their site and sales made. YourFastShop then pays funds to Stroke Foundation according to amounts listed in the *retailer A-Z section*.

World Watch

Australia: Smart on salt but slow to act

Australians know the danger of too much salt, but are not doing much about it, according to recent national research. To correct this, the George Institute has launched a five-year 'Drop the Salt' campaign – Australia's first cohesive national salt reduction campaign – to reduce salt intake and lower the likelihood of stroke and heart disease nationally.

According to Dr Bruce Neal, Chair of the Australian Division of the World Action on Salt and Health (AWASH): "It is not well understood that almost everyone's health is being adversely affected by the salt they eat." Dr Neal believes the campaign might prevent up to one fifth of all strokes in Australia. The salt reduction campaign is set to unite health professionals, industry, government and scientists. *George Institute, June 2007*

USA: STOP Stroke Act passes US House of Representatives

The Stroke Treatments and Ongoing Prevention Act (STOP Stroke HP 477) took a major step toward becoming law when it passed by the full House of Representatives by voice vote in March 2007. The Act would help ensure that stroke is more widely recognised by the public and treated more effectively by healthcare providers. It will provide states with the resources to create stroke systems of care. It also authorises a national public awareness campaign, a grant programme to train medical professionals in newly developed tools and therapies, and a national clearinghouse to collect stroke data and share best practices. Stroke afflicts 700,000 Americans each year. *Stroke Connection Magazine, May/June 2007*

Asia-Pacific: High blood pressure the culprit

Hypertension – or high blood pressure – is one of the top three leading modifiable risk factors of disease globally, along with tobacco and alcohol. New research has now shown that high blood pressure causes up to two of every three cardiovascular diseases in the Asia-Pacific region. According to the Asia Pacific Cohort Studies Collaboration (APCC), hypertension accounts for: over 60% of stroke deaths in Indonesia and Mongolia; one in every two stroke deaths in Malaysia, China, Philippines, Hong Kong, and; one in every three in Australia and New Zealand. *The George Institute, June 2007*

The UK: National Stroke Strategy takes shape

The Department of Health in the UK is underway with a National Stroke Strategy. The UK Stroke Association reports that there now seems to be greater awareness of stroke at all levels of government. For instance, Tony Blair said, speaking at a NHS Conference while still Prime Minister: "if you have a stroke at 2am, you want to get to a centre with 24 hour a day access to a CT scanner. The right care of stroke is to have a CT brain scan within three hours." Tony Blair's father had a stroke when Tony was a child. *Stroke News, Spring 2007*

Japan: Tremendous stroke decrease

The incidence of stroke in Japan has hugely decreased since 1970. From 1955-80, stroke was the number one cause of death. From 1970 to 1990 there was a steep decline. The decrease is attributed to antihypertensive therapy and the availability of universal health insurance.

Budget removes donations cap

New Zealand has a proud history of philanthropic endeavour. The recent budget announcement of removal of rebate maximum levels for individuals and companies from the 2008/9 year should further contribute to a culture of giving.

According to Stroke NZ CEO, Mark Vivian, this announcement is timely recognition that so many important services in the community are provided by local initiative, rather than government agencies. Stroke NZ is very aware that it was formed and continues in response to stroke needs in the local community.

Japan's aging population is expected to create a slight increase in stroke in the next 20 years, but the new Japan Stroke Society-approved specialist system is expected to minimise the impact of this.

International Journal of Stroke, May 2007

USA: Cost of stroke may reach \$2.2 trillion by 2050

The cost of stroke in the USA may reach more than \$2 trillion in the next few decades unless Americans do more to lower their risks and improve stroke care. A University of Michigan study predicts that half of this mammoth financial total will be borne by people under age 65, which includes lost wages (earnings of those over 65 weren't included). The authors of the study believe the estimated figure is conservative because it is based on current rates of conditions that increase stroke risk, such as diabetes, cardiovascular disease and obesity.

Stroke Connection Magazine, Jan/Feb 2007

Future Shock

Health indicators show younger generations to be at higher future risk of stroke than their parents – unless eating and exercise habits change for the better. Schools in New Zealand are being told to take leadership in tackling this growing issue amongst school children by limiting the sale of unhealthy food. While the National Party laments a bureaucratic response to obesity, no political party disagrees that growing obesity is a nationwide issue that needs to be effectively dealt with for many reasons.

Health statistics show one in three adults are overweight and one in five obese. Amongst other negatives, obesity carries increased risk factors for many chronic

diseases: some 70 percent of deaths from stroke and heart attack are caused by poor nutrition and 80 percent of diabetes is due to being overweight or obese.

While schools might help with the issue, it is clear parents and caregivers are effectively the gatekeepers and opinion formers for children's eating behaviours. Ministry of Health research shows families spend significantly more on sweets, chocolate, fizzy drinks, fast-foods and eating out than on fruit and vegetables. Price is a significant factor: some opinion formers argue there is little financial incentive for families to buy fresh fruit and vegetables when processed food is cheaper and faster.

Lack of exercise adds to gloomy predictions. It is well known that long hours watching television or playing video games is linked to obesity and diabetes. Also, TV exposes children to unhealthy dietary choices and people tend to snack more while watching. However, restricting television or video game time does not guarantee an increase in exercise: there needs to be encouragement, role-modelling and opportunity. Certainly, the Stroke Foundation advocates a healthy diet and regular exercise as part of its risk reduction message and as well as a way to get the most out of life.

'Forgotten people' getting quality rehabilitation

New Zealand's latest long-term rehabilitation programme for stroke survivors is already coming up with the goods, according to Rex Paddy, Executive Director of Stroke's Northern Region.

Launched in April, the Laura Ferguson Trust (LFT) designed and delivered program is already showing significant improvements for stroke survivors. According to Mr Paddy: "The pilot group of 20 have just been assessed and they have made significant improvements with their balance, walking stamina and social integration. Clients are loving it, and everyone involved is extremely satisfied with the gains so far."

New Zealand has a hugely under-resourced rehabilitation market. Stroke families and survivors find the sudden cessation of rehabilitation very distressing saying it makes them feel abandoned and forgotten, so the Stroke Foundation is constantly seeking opportunities for people who have had a stroke to receive ongoing physical and social rehab. In this country, once a stroke patient has been discharged from hospital and short-term community care, there is little or no support through ongoing rehabilitation, ACC or private health insurance. This is in stark contrast to international research that clearly shows targeted longer term rehabilitation, following release from hospital, usually has a huge positive impact on a stroke survivor's potential recovery.

According to James Murphy, CEO Laura Fergusson Trust: "there is undeniable evidence showing stroke patients who do not strive to recover as much as possible of their ability to be active, and participate in normal daily living at home and in their community, will experience declining physical capacity. This is not because of their stroke, but through inactivity."

The LFT programmes will be effective in improving long-term recovery. The current programme began April 1 with a pilot involving the first 20 of 60 patients to enable and motivate stroke survivors to increase their rehabilitation at no financial burden to them. Part of the secret to the success of this new programme so far is that participants are doing things they haven't done before and seem to be more physically active than before. And while it is early days regarding in-depth research, there are already obvious immediate benefits.

The programme received \$600,000 funding, half of which was donated by a private Auckland benefactor.



Stroke clients in action with trainer, Claudia Gallur

L-R: Rosie Parr, James Murphy (CEO LFT), Janette Peebles, Rex Paddy (Ex. Dir. Stroke Northern Region) and Sandie Alexander.

'Attitude' is everything

In August 2003, Donna Isaacs had a stroke caused by a tiny blood clot, which resulted in partial paralysis of the left side of her body. For days she could not understand nor accept what had happened. Since then, Donna has resolved to make every day count more fully than ever before. In fact, she bought a two-year calendar and filled up every day.

To help guide her rehabilitation, Donna created eight rules. While she confesses to having days when the whole world seems to crash around her, most days she follows her rules and they give her what she needs.

Donna's 8 rules:

- Be positive
- Don't complain
- Anticipate ignorance
- Be tolerant and polite when people are being ignorant
- Ask for help when necessary
- Keep a sense of humour and find or make the fun
- Be grateful and give back
- Never let the stroke define you.

1 Stroke Connection Magazine, May/June 2005

Link between Diabetes and Stroke

Diabetes is receiving better profile and understanding in New Zealand, but not many realise its clear connection with stroke. Diabetes is strongly linked with an increased risk of stroke: research shows someone with diabetes is potentially three times more likely to have a stroke.

In particular, people with diabetes have an increased risk of ischaemic stroke. This is caused by a blood clot in an artery which blocks blood supply to the brain. Diabetes causes serious damage to small and large blood vessels, especially if left untreated or uncontrolled, causing blood vessel walls to become stiff (atherosclerosis), narrow and furred.

Stroke Foundation of New Zealand Inc is grateful for the support of the following organisations:

