Therapy After A Stroke (Adult)

Your brain cells need a non-stop supply of blood and oxygen to work normally. Stroke comes from a sudden end of blood flow to the brain. Your brain cells may start to die within minutes after this. The loss of brain function can cause problems with speech, vision, memory, and/or movement. How bad this is depends on which part of your brain is affected and how big an area is harmed. Stroke is also known as brain attack, It is a medical emergency.

There are 2 main types of stroke:

- Ischemic stroke, which is caused by block in arteries (blood vessels carrying oxygen rich blood) supplying the brain. This is the most common kind of stroke.
- The second type is known as hemorrhagic stroke. This is caused when a blood vessel in your brain bursts and causes bleeding into your brain.

Stroke can cause many types of problems. The treatment of stroke involves 3 stages. They are prevention, treatment immediately following a stroke, and rehabilitation after a stroke.

BEFORE THERAPY BEGINS

A detailed exam by your caregiver helps outline what problems were caused by the stroke. Your caregiver may ask specialists about this. The specialists may include doctors, occupational therapists, physical therapists, speech therapists, and others. It is then possible to make a plan that best fits your needs.
Your evaluation might include the following:

- Your ability to do everyday activities that require using muscles, coordination, vision, reasoning, memory, and problem solving. Interviews with you and your caregiver to understand what you could do and could not do before the stroke. Your ability to do personal self-care tasks, such as dressing, grooming, and eating.
- Tests may be done to see if there are sensory and motor changes due to the stroke, especially in the hands and legs.

LET YOUR CAREGIVER KNOW ABOUT:

- Allergies.
- Medications taken including herbs, eye drops, prescription medications, over the counter medications, and creams.
- Use of steroids (by mouth or creams).
- Use of aspirin or blood-thinning medicines
- History of bleeding or blood problems.
- Previous problems with anesthetics or Novocaine.
- Possibility of pregnancy, if this applies.
- History of blood clots (*thrombophlebitis*).
- Previous surgery.
- Other health problems.

TREATMENTS/PROCEDURES

- Your caregiver may start therapy right away depending on the type and severity of your stroke.
- Medicines.
- If a blood clot caused the stroke, you may be started on medicines which can help to dissolve the clot and stop new clots from forming.
- If bleeding caused the stroke, medicines might be used to (1) lower blood pressure, and (2) reverse the effects of any “blood thinners” used at the time of the stroke.
- Therapy after stroke is focused on getting function back and preventing another stroke. Therapy might include:
  - Physical therapy: This can include help with walking, sitting, lying down, and balance. It may also be designed to help prevent shortening of the muscles (*contractures*) and swelling (*edema*).
  - Occupational therapy: This therapy helps you to relearn skills needed for leading a normal life. These

could include eating, using the restroom, dressing, and taking care of yourself. It helps to make you more independent.
  - Vision therapy: This can help you to retrain, strengthen, and improve your vision following a stroke.
  - Speech therapy: This can help to improve your speech and communication skills. It also teaches both you and your family members to cope with problems of being unable to communicate.
  - Cognitive therapy: This therapy can help with problems caused by lack of memory, attention, or concentration.
  - Psychological/psychiatric therapy: This can help you cope with problems of frustration and emotional problems that may develop after a stroke.
- Blood pressure control and smoking. If you smoke, it is important to get help to stop smoking. If your blood pressure is high, it is important to help make it lower. These problems both play a big part in getting better and preventing another stroke (see HOME CARE INSTRUCTIONS below).
- Cholesterol-lowering drugs are sometimes prescribed to reduce the amount of fat (*plaque*) in the blood. The reduction of plaque on artery walls can decrease the risk of a future stroke.

HOME CARE INSTRUCTIONS

- Follow a healthy diet as advised by your caregiver.
- Monitor and control your blood sugar levels, if you are a diabetic.
- Reduce the amount of sodium and fat in your diet.
- Quit smoking.
- Exercise regularly, in moderation.
- Take the necessary prescribed medicines as advised by your caregiver.
- Continue your rehabilitation program as advised by your caregiver.
- Get your blood pressure and cholesterol levels checked regularly.

SEEK MEDICAL CARE IF:

- You feel you are having problems with medicines prescribed.
- You are not improving as expected.

SEEK IMMEDIATE MEDICAL CARE IF:

- You develop new weakness of an arm, leg, or one side of your face.
- You feel suddenly confused.
- You develop sudden change in your vision.
- You develop severe headache for no specific reason.
- You suddenly feel dizzy or loss of balance.
- You develop any new weakness on the normal side of your body.
- You have a fainting episode.
- You develop chest pains or trouble breathing.

ANY OF THESE SYMPTOMS MAY REPRESENT A SERIOUS PROBLEM THAT IS AN EMERGENCY. Do not wait to see if the symptoms will go away. Get medical help at once. Call your local emergency services (911 in the U.S.). DO NOT drive yourself to the hospital.

Document Released: 01/06/2009 Document Re-Released: 10/15/2010
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