

TerranearPMC Safety Share

Week of May 22, 2017 – BE FAST for Strokes

In the latter part of the nineteenth century, Benjamin Disraeli, held the post of England's Prime Minister for two separate terms. He is credited with the popular saying, "There are three kinds of lies: lies, damned lies, and statistics." Lots of people have quoted Disraeli since. And while lies may be undeniable falsehoods, statistics can tell quite a different tale. For instance, there is the statistic that tells of the number of Americans that will suffer a stroke this year. That number is 800,000 and equals the population of many cities in the United States! Another way to look at this statistic - for all you sports fans - is that this number represents the amount of people that can fill ten modern-day sports stadiums. Imagine all those people getting a stroke!

Here's another statistic: Stroke is the leading cause of disability in America and the fifth-leading cause of death. Fortunately, with today's medical technology and improved awareness, the death rate from stroke has declined. However, we still face the major hurdle when it comes to people recognizing symptoms and understanding that strokes are medical emergencies. Recently, I attended a first aid/CPR class (as this training is mandatory to work as an S&H professional for field assignments) where the acronym, FAST was presented as the method to recognize and respond when witnessing a stroke victim. However, as I thought this would be a great topic to write about, in my research, I found that this acronym has been replaced by another! One that includes methods to identify additional stroke symptoms and how to respond in a prompt manner so the effects of a stroke are minimized and may even allow a stroke victim - in many instances - to have full recovery.

The acronym is "**BE FAST**" and is a handy technique to help anyone quickly recognize common signs of a stroke. It prompts us to ask specific questions as they relate to the telltale signs a person - such as your friend or loved one - may have while experiencing a stroke, and to take proper action. Below is the acronym broken down with an explanation for each letter.

Balance - Is there a sudden loss of balance or coordination?

Eyes - Is there sudden blurred or double vision or sudden, persistent vision trouble?

Face - Ask the person to smile. Is one or both sides of the face drooping?

Arms - Ask the person to raise both arms. Does one side drift downward? Is there weakness or numbness on one side?

Speech - Does the person have slurred or garbled speech? Can he/she repeat simple phrases?

Time - Call 911 for immediate medical attention if you notice one or more of these signs. Also, take note of when symptoms began.

By practicing these steps, all of us can be in an advantageous position for a rapid response. And the faster a person who has suffered a stroke gets medical attention, the greater the chance there is that a person's life can be saved and even reverse the long-term effects of stroke.

Most of us do not realize that not all strokes are the same. The fact is, there are two types of stroke, and in both cases, time is vital to allow for successful treatment.



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The first type is *ischemic stroke*. This occurs when a blood clot blocks a blood vessel in the brain. About 85 percent of all strokes in the United States are ischemic. A transient ischemic attack (TIA) happens when blood flow to part of the brain is blocked or reduced.

Treatment for ischemic strokes require a clot-busting drug called tissue plasminogen activator or tPA. This drug dissolves the clot, thereby improving blood flow to the affected part of the brain. If tPA is given within three hours of an ischemic stroke, the patient has a much better chance of a full recovery. Unfortunately, too many stroke victims don't make it to the hospital in time for tPA treatment.

In some cases, surgery to extract clots is also an option. It is possible for medical professionals to perform an endovascular (blood vessel) procedure up to eight hours after stroke symptoms first appear.

The other type of stroke – *hemorrhagic stroke* – represents the other 15 percent of all stroke cases and yet is responsible for about 40 percent of all stroke deaths. During a hemorrhagic stroke, blood spills into or around the brain, creates swelling and pressure, and damages brain cells and tissue.

For hemorrhagic strokes, certain drugs are applied to reduce blood pressure or slow down the bleeding. Similar to administering tPA, this procedure is an emergency treatment, so response time is a major factor. Afterward, it may be necessary to perform surgery to repair the ruptured blood vessel. In less severe cases, bed rest might be enough to allow the rupture to heal on its own.

It is obvious that with even modern medical treatment, getting a person that has just suffered a stroke to a hospital as quickly as possible is important; the faster treatment is provided, the better chances for recovery. This is why implementing BEFAST can be so critical. Anyone can use these steps and therefore, contribute greatly to help another person who is suffering a stroke.

Of course, prevention is always the best method for a healthy life, and fortunately many strokes can be prevented. Stroke prevention starts with a proper diet, plenty of exercise, and a healthy lifestyle. In some cases, medication may be an option to reduce stroke risk factors. Healthcare experts always emphasize, even if a person is at risk for stroke, it's not too late to make lifestyle changes. And the best time to start is NOW.

Other risk factors you should work with your doctor to control include:

- Diabetes
- High cholesterol
- Heart disease
- Abnormal heart rhythm (atrial fibrillation, or AFib)

High blood pressure is the single greatest risk factor for which many people can control. For persons who are at high-risk, blood pressure should be checked regularly.

The greatest good you can do for another is not just to share your riches but to reveal to him his own - Benjamin Disraeli

