

# WORLD STROKE DAY- 2014

## Theme: “I am Woman”

### Press report

World Stroke Day is being celebrated every year on 29<sup>th</sup> October to help spread public awareness of the world's high stroke risk and stroke prevalence. It is an initiative of World Stroke Organization and supported by the American Heart Association and American Stroke Association. Every year it is celebrated on a theme. This year the theme is “*I am Woman*”.

Stroke is a global health problem. It is the commonest cause of death and fourth leading cause of disability worldwide. Globally 15 million people have a stroke each year. Among the 15 million strokes nearly six million lives are lost each year to stroke and a further five million are left permanently disabled. A new person suffers a stroke every six seconds. Stroke is responsible for more deaths annually than those attributed to AIDS, tuberculosis and malaria combined.

In India annually 15, 00,000 stroke cases occur. Stroke contributed 41% of deaths. The prevalence rate for stroke in India is 334 – 424 / 100,000 in urban areas. The annual incidence of stroke in urban area is 145 / 100,000. Nearly 12% of all strokes occur in those less than 40 years.

The theme for this year stroke day celebration is “I am Woman”

### Why Women and Stroke?

- 1. Women have a higher stroke mortality rate than men.** Six in ten strokes deaths occur in women.
- 2. Many of the major stroke risk factors occur more frequently in women are sex-specific to women.** As a result, one in five women is at risk for stroke, as opposed to one in six men.
- 3. Women have high stroke risk factors.** Some stroke risk factors such as diabetes, atrial fibrillation, depression, and hypertension occur more frequently in women, and many more stroke risk factors are sex-specific to women, such as pregnancy, preeclampsia, use

of birth control pills (especially in the case of women with high blood pressure), hormone replacement after menopause, hormone changes, and gestational diabetes. As a result, one in five women is at risk for stroke, as opposed to one in six men.

**4. Women tend to have worse stroke outcomes than men.** They experience a more severe decline in cognitive function, and a higher risk of post-stroke depression.

**5. Women and stroke subtypes.** Some stroke subtypes, such as cerebral vein thrombosis and subarachnoid hemorrhage, are much more common in women.

**6. Women and depression.** Women tend to have a higher risk of post-stroke depression.

**7. Women as caregivers.** The burden of care giving falls predominantly on women when a family person is affected by stroke. Women caregivers of spouses have a decrease in mental health after becoming caregivers.

**8. Isolation and loneliness.** Women are more likely to be living alone and widowed before stroke; they are more often institutionalized after stroke and have poorer recovery from stroke than men.

**9. Women with stroke do not receive comparable care to men with stroke.** Women tend to be treated less than men, despite responding equally well to treatments.

**10. There is a gender gap in stroke education.** Despite the fact that women tend to be more aware of the stroke signs and treatments than men, women delay going to the hospital after stroke onset and are less likely to be aware of the 4.5 hour window for stroke treatment.

Stroke is an emergency. We want to inform the public about the early symptoms of stroke and how to identify the stroke.

**STROKE is an Emergency.**  
**Every minute counts.**  
**ACT F.A.S.T!**

	<b>F</b> ACE	Does one side of the face droop? Ask the person to smile.
	<b>A</b> RMS	Is one arm weak or numb? Ask the person to raise both arms. Does one arm drift downward?
	<b>S</b> PEECH	Is speech slurred? Ask the person to repeat a simple sentence. Is the sentence repeated correctly?
	<b>T</b> IME	If the person shows any of these symptoms, <b>Call 911</b> or get to the hospital immediately.

**Have the ambulance go to the nearest certified stroke center.**

Once these symptoms are identified, the affected person must be brought to the hospital within 3 hours (Golden period) to minimize the brain damage.

At PSG IMS&R hospitals the department of Physical Medicine and rehabilitation has started a Stroke Rehabilitation Centre, a centre of excellence. It has many sophisticated, state of the art equipments for the stroke patients. The Centre is equipped with the following equipments:

1. **Robotic Hand Therapy** for improving the hand functions.
2. **Functional Electrical Stimulation** for producing functional movements by sequential muscle contraction.
3. **Body Weight Supported Treadmill Training** for improving walking ability.
4. **Balance System SD** for improving your postural stability and reduce fall risk.
5. **Motomed – Movement Therapy** for exercising both upper and lower limbs.
6. **EMG Bio – Feedback** for retraining the brain to regain voluntary movements.

**PSG IMS&R Hospitals is the first and only hospital in Tamilnadu to have this Robotic Hand Therapy unit. It is also the second hospital in south India to have this equipment.**

