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## Strokes: Primary Prevention and the Nurse

In this short Editorial I want to remind readers about a common medical condition that is largely preventable: strokes. Most of you will have nursed someone after a stroke or have known families who are caring for a loved one after a stroke. There is a heavy toll to pay after a having a stroke. Often a person is left with prolonged and on their physical, mental, social, spiritual, and economic dimensions of health, as well as debilitating effects on family carers who may have to look after a loved survivor of strokes for many years. Too often carers as well as survivors of strokes become depressed. As nurses most of you know only too well the hard work it takes to care for a stroke victim in your care. In my nursing experiences, I have witnessed many nurses who felt burnt out or disheartened trying to care for stroke victims. It is sometimes a long, hard process to see real progress in improvement for someone who has received brain damage due to a stroke.

Too often we forget that strokes are largely preventable and so I believe it pays to be reminded that as nurses we have a primary health care responsibility to not only educate and assess people who may be at risk of a stroke, but to incorporate our knowledge and skills in all settings to prevent them. After all, strokes can sometimes affect little children and healthy adults, not just aging populations.

Stroke is the common name for cardio-vascular accident (CVA), a form of cardio-vascular disease. Around the world, there are an estimated 15 million strokes a year and of these, a third of people will die and another third will be permanently disabled<sup>1</sup>. In Canada for example, it is estimated that every seven minutes a person dies from a heart attack or stroke, and in 2008, 20% of such deaths were due to stroke<sup>2</sup>. Most strokes (around 80%) are caused by an interruption of blood flow to the brain due to a blood clot. The remaining 20% are usually caused by uncontrolled bleeding in the brain. Unfortunately many people are left permanently disabled because they do not have access to the health care that they need for extended periods to aid recovery, even in countries with a good economy. About 315,000 Canadians are living with the effects of stroke<sup>3</sup>.

As a Thai nurse, do you know how many people have strokes annually in Thailand? How many die from strokes? And how many are left permanently disabled from these? Look up the statistics ... I am sure you will be surprised and the answers will reinforce how important it is that you put on emphasis on stroke prevention in your professional work, whether this is in a hospital or clinic, or in the community somewhere.

We all need reminding that most strokes, like cardiac disease, are largely preventable. These days, the rate of deaths from strokes is decreasing largely due to education and health promotion efforts to help people with lifestyle changes, new surgical procedures, and drug therapies. However the rate of strokes is still unacceptable. Nurses have a major role to play in education, research and caring for people with cardio-vascular problems, but also in helping others to understand the risk factors for strokes. This is the first step in prevention. These risk factors include high blood pressure, being male, diabetes, physical inactivity, obesity, high cholesterol, smoking, being older than 55 years, family history, cardio-vascular disease, sleep apnoea, and alcohol and drug abuse.<sup>4</sup> I know that a lot of nurses are involved in primary health care research for these risk factors in Thailand, as evidenced by many of the articles published in this and other journals. But what can you do in a practical sense in every day work?

Encouraging all of your clients to get their blood pressure checked once or twice a year is a simple but effective factor in preventing strokes. The Mayo Clinic in America claims that the risk of stroke begins to increase at blood pressures higher than 120/90<sup>4</sup>. There are also many primary care activities that nurses can get involved in to help reduce the incidence of strokes in clients as well as themselves: increasing exercise, eating a healthy diet, controlling diabetes, quitting smoking, reducing stress, maintaining healthy weight, reducing alcohol and any illicit drugs, treating sleep apnoea, and encouraging people to take their prescribed medications, especially those for cardio-vascular disorders.

These days we know that if a person suffering from the early effects of a stroke can receive appropriate medical care quickly, then this can greatly lessen the severity of a stroke. Every minute is precious since the pressure in the brain from bleeding or the interruption of blood flow will cause more brain cells to die. Therefore, while it is important to teach people how to prevent strokes, it is also valuable to teach them how to recognise a stroke's onset in themselves or others. Think of this as teaching first aid to others to prevent brain damage. The 10 possible symptoms of a stroke are: loss of balance, sudden muscle weakness, facial paralysis, difficult speech, impaired vision, lack of understanding, headache, loss of sensations such as smell and hearing, dizziness, and lack of reflexes like swallowing.<sup>5</sup>

So you have read the above? Some of you might say: "But I know all that!". However, it pays to be reminded. Importantly it pays to prevent strokes rather than nurse people who have suffered from them! Prevention is better than cure.

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## **References**

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