Clot blocking bloodflow to the brain

Leader's Guide

Promote Healthier and Safer Lives

Stroke is a Brain Attack

Before the Lesson

- Review the Leader's Guide.
- Bring pencils and enough copies of MF-2456 fact sheet for each participant.
- Bring two or three large pieces of paper, such as newsprint, and markers.
- Obtain the video, "Stroke is a Brain Attack," from extension distribution, or arrange to borrow, "Stroke: What Every Person Needs to Know," from the American Heart Association by calling: (785)272-7056.
- If you choose to use the available videos, obtain a TV/VCR for your meeting room.
- If you choose to use blood pressure and pulse evaluation as part of the lesson, make arrangements with a healthcare provider to offer this service and set-up the meeting room accordingly.

Introduction

Publication number MF-2456, "Stroke is a Brain Attack", has information about signs and symptoms of stroke and tells how people can reduce their own risk for stroke. The focus of this lesson is to raise awareness among at-risk people that stroke signs require emergency response. This is a two-pronged approach: (1) risk factors should be identified and addressed, and (2) people who exhibit increased risk for stroke should be educated about the warning signs and encouraged to take the proper emergency procedures. Objectives of this lesson are to:

- Increase participants' awareness of their own individual risk for stroke.
- Help them to identify situations in which intervention by their physician is
- List and explain warning signs of stroke that necessitate a 911 emergency call.

One in four Kansas families is affected by stroke. It is the third leading cause of death and the leading cause of adult disability. The effects depend on the part of the brain injured and can range from complete loss of independence, with paralysis (even lack of awareness of one side of the body), to vision, language and emotional effects. Stroke is largely preventable if risk factors are addressed early – and treatable if victims respond immediately by calling 911.

A Possible Time Schedule

5 minutes: Warm Up Activity – this could be an icebreaker such as an intro-

ducing game. For example, participants could name one thing that

they do to improve their health.

10 minutes: Distribute the fact sheet and instruct participants to complete the

quiz, "What do you know about stroke?" and answer to their best

knowledge.

Additional time will be needed if you have enlisted a healthcare

provider to take blood pressures.

15 minutes: Presentation of "Key Concepts" or showing of video, "Stroke:

What Every Person Needs to Know..."

20 minutes: Ask the participants to take the quiz again to see if the presenta-

tion made any difference (record those changes in the feed-back you send to K-State). Encourage or conduct group discussion, listing of risk factors and lifestyle changes (see discussion questions). Ask participants if they would make changes to their intention to change items on question 6. Record these changes in

the data box.

5 minutes: Ask each person to share one idea they have learned or reviewed.

If the group is large, divide into small groups to share, then ask for reporting by a participant from each group and to the group at

large.

5 minutes: Complete the program summary, including the intention to change

items at the end of the lesson.

Additional time will be needed if you are going to discuss a

community service activity.

Clot blocking bloodflow to the brain

Leader's Guide

Promote Healthier and Safer Lives

Stroke is a Brain Attack

Before the Lesson

- Review the Leader's Guide.
- Bring pencils and enough copies of MF-2456 fact sheet for each participant.
- Bring two or three large pieces of paper, such as newsprint, and markers.
- Obtain the video, "Stroke is a Brain Attack," from extension distribution, or arrange to borrow, "Stroke: What Every Person Needs to Know," from the American Heart Association by calling: (785)272-7056.
- If you choose to use the available videos, obtain a TV/VCR for your meeting room.
- If you choose to use blood pressure and pulse evaluation as part of the lesson, make arrangements with a healthcare provider to offer this service and set-up the meeting room accordingly.

Introduction

Publication number MF-2456, "Stroke is a Brain Attack", has information about signs and symptoms of stroke and tells how people can reduce their own risk for stroke. The focus of this lesson is to raise awareness among at-risk people that stroke signs require emergency response. This is a two-pronged approach: (1) risk factors should be identified and addressed, and (2) people who exhibit increased risk for stroke should be educated about the warning signs and encouraged to take the proper emergency procedures. Objectives of this lesson are to:

- Increase participants' awareness of their own individual risk for stroke.
- Help them to identify situations in which intervention by their physician is
- List and explain warning signs of stroke that necessitate a 911 emergency call.

One in four Kansas families is affected by stroke. It is the third leading cause of death and the leading cause of adult disability. The effects depend on the part of the brain injured and can range from complete loss of independence, with paralysis (even lack of awareness of one side of the body), to vision, language and emotional effects. Stroke is largely preventable if risk factors are addressed early – and treatable if victims respond immediately by calling 911.

A Possible Time Schedule

5 minutes: Warm Up Activity – this could be an icebreaker such as an intro-

ducing game. For example, participants could name one thing that

they do to improve their health.

10 minutes: Distribute the fact sheet and instruct participants to complete the

quiz, "What do you know about stroke?" and answer to their best

knowledge.

Additional time will be needed if you have enlisted a healthcare

provider to take blood pressures.

15 minutes: Presentation of "Key Concepts" or showing of video, "Stroke:

What Every Person Needs to Know..."

20 minutes: Ask the participants to take the quiz again to see if the presenta-

tion made any difference (record those changes in the feed-back you send to K-State). Encourage or conduct group discussion, listing of risk factors and lifestyle changes (see discussion questions). Ask participants if they would make changes to their intention to change items on question 6. Record these changes in

the data box.

5 minutes: Ask each person to share one idea they have learned or reviewed.

If the group is large, divide into small groups to share, then ask for reporting by a participant from each group and to the group at

large.

5 minutes: Complete the program summary, including the intention to change

items at the end of the lesson.

Additional time will be needed if you are going to discuss a

community service activity.

Key Concepts

- The more risk factors a person has, the greater the risk for stroke.
- Some risk factors are modifiable; others are amenable to medical treatment.
- People at high risk for stroke (and their families) should familiarize themselves with stroke signs and symptoms and be aware of the need to call 911 at the first warning signs of stroke.

Call attention to the portion of the fact sheet entitled, "Risk Factors," and discuss. You may be able to direct participants to the K-State Research and Extension fact sheets on blood pressure, physical activity, smoking cessation, and low fat foods.

Follow your healthcare provider consultant's lead on referrals to the family physician for blood pressures over 160 systolic and/or 90 diastolic, if a retest after 15 minutes continues to show elevations.

Stroke is a Brain Attack

Presenting the Lesson

Give a general overview after reviewing the fact sheet, "Stroke is a Brain Attack." Call attention to the **Quiz** and the **Assess your Stroke Risk** portions of the fact sheet and instruct participants to answer with their best knowledge. You may choose to have them answer only the quiz, and save the risk rating for later in the discussion.

If you choose to use either video, show it as a general overview. If your audience contains senior citizens and/or their families, stress the fact that age is a very important risk factor, but even at an advanced age, changes can be made to reduce stroke risk. If your audience contains stroke survivors, gently state that those who have had a stroke are at an increased risk for subsequent strokes, and that prevention efforts and rehabilitation endeavors can improve their health.

If you or a group member feel comfortable taking and recording blood pressures and assessing pulse rhythms, conduct that activity before the "Assess your Stroke Risk" part of the questionnaire. Make a list of risk factors on the newsprint; leave room so that you can list lifestyle interventions and note where medical intervention is necessary. You will also want to list signs and symptoms of stroke, and stress that regardless of severity, a 911 call is merited. You could ask the following questions and discuss:

- 1. Why would people think that a stroke occurs in an organ other than the brain?
- 2. What causes a stroke?
- 3. Differentiate risk factors that can be controlled from those that cannot.
- 4. Emphasize the fact that small changes in physical activity, dietary modifications, and health check-ups can make significant improvements in risk (see "Here's how much these risk factors increase your livelihood of stroke" on the fact sheet.)
- 5. Are symptoms of stroke different individual to individual?
- 6. What should people do when a stroke occurs?
- 7. How can citizens insure that appropriate treatment for acute stroke is available in their community?

Discussion Points: Discussion of **Question 1** is crucial to the concept of stroke is a brain attack. A stroke occurs when the blood supply is cut-off to a part of the brain and brain cells become deprived of oxygen and nutrients, and stops functioning. Symptoms of stroke are symptoms of a deficit, and functions may cease or become impaired. Many people think that a stroke happens in the heart or in an arm, leg, or eye if those body parts are not working. It is important to stress that brain attacks are as much of an emergency as heart attacks (where there is intense pain and the heartbeat stops). Question 2 can be discussed in terms of the structure of the blood vessels in the brain and brain function. Question 3 and 4 explain how health factors such as high blood pressure and heart problems affect the circulation of the brain. Questions 5 calls for stressing the suddenness of stroke symptoms and that they are often one-sided. People should not wait for symptoms to get better, but call 911 immediately. Question 6 and 7 leads to discussion about securing education for hospital health care workers and for emergency medical systems. Ask participants if they would like to have risk factor evaluations and quizzes to take home to family members who they may feel are at risk. Ask if there are other groups that are interested in this lesson, and if so refer them to the Stroke Prevention Project.

Stroke is a Brain Attack

Community Activities

- Present the information in this lesson to other groups and/or organizations.
- Participants at a group lesson could decide to staff a display on stroke risk signs and symptoms at one of the events listed below.
- The guiz and risk factor evaluation can be used in conjunction with a community health professional's more in-depth assessment of stroke risk.
- The basic lesson can be used at health fairs, school open houses, PTA meetings, regularly scheduled family and community education groups, and other places where adults who care about their health gather for information.
- Prepare a series of newspaper articles or radio spots to share information about the appropriate response to stroke: this could include resources that are available for stroke treatment such as EMS response, rehabilitation, etc.

At the end of the lesson

Ask participants to raise their hands if they would answer "yes" to any of the following questions. Record the number of "yes" answers: • Do you recognize two or more risk factors for stroke that require medical attention? • If you or a family member exhibits stroke risks, do you plan to take action? _____ • What actions do you plan to take? Ask those who raise their hands what they plan to do and record their comments. Summary One in four Kansas families is affected by stroke. It is the third leading cause of death and the leading cause of adult disability. It is largely preventable if risk factors are addressed early – and largely treatable if victims respond immediately by calling 911. Community action to get the word out about stroke is vital. Lesson Leader: Share this data with K-State Research and Extension Office of Community Health. The number of people who assessed their risk for stroke_____ The number of people who may be at increased risk of stroke_____ Number planning changes in exercise______, diet ______, and blood pressure monitoring recorded in group discussion Other actions taken or planned by the group: Requests for information / education for hospital or EMS (list): There were ______ people present at the meeting on Stroke Risk. Number of participants in each age group: 18-55______ 55-65_____ 65+_____ Type of meeting_____ Lesson leader's name_____

____County___

Outdated Publication, for historical use. CAUTION: Recommendations in this publication may be obsolete.

Promote Healthier and Safer Lives

Stroke is a Brain Attack

People at high risk for stroke – and their close relatives and friends – must learn to recognize the signs and symptoms of stroke.

- Sudden numbness or weakness of face, arm, or leg, especially on one side of the body
- Sudden confusion, trouble speaking or understanding
- Sudden trouble seeing in one or both eyes
- Sudden trouble walking, dizziness, loss of balance or coordination
- Sudden severe headache with no known cause

Brain attack is an emergency - Call 911

American Stroke Association, a division of AHA, 1999

Acknowledgment: Thanks to Diane Pfannenstiel, A.R.N.P., Mike Bradshaw and Dr. Paul Estabrooks for suggestions and review

Brand names appearing in this publication are for product identification purposes only. No endorsement is intended, nor is criticism implied of similar products not mentioned.

Publications from Kansas State University are available on the World Wide Web at: http://www.oznet.ksu.edu. Contents of this publication may be freely reproduced for educational purposes. All other rights reserved. In each case, credit Susan George, ARNP, Stroke is a Brain Attack, Kansas State University, April, 2000.

Kansas State University Agricultural Experiment Station and Cooperative Extension Service

MF-2455 April 2000

It is the policy of Kansas State University Agricultural Experiment Station and Cooperative Extension Service that all persons shall have equal opportunity and access to its educational programs, services, activities, and materials without regard to race, color, religion, national origin, sex, age or disability. Kansas State University is an equal opportunity organization. Issued in furtherance of Cooperative Extension Work, Acts of May 8 and June 30, 1914, as amended. Kansas State University, County Extension Councils, Extension Districts, and United States Department of Agriculture Cooperating, Marc A. Johnson, Director.

Key Concepts

- The more risk factors a person has, the greater the risk for stroke.
- Some risk factors are modifiable; others are amenable to medical treatment.
- People at high risk for stroke (and their families) should familiarize themselves with stroke signs and symptoms and be aware of the need to call 911 at the first warning signs of stroke.

Call attention to the portion of the fact sheet entitled, "Risk Factors," and discuss. You may be able to direct participants to the K-State Research and Extension fact sheets on blood pressure, physical activity, smoking cessation, and low fat foods.

Follow your healthcare provider consultant's lead on referrals to the family physician for blood pressures over 160 systolic and/or 90 diastolic, if a retest after 15 minutes continues to show elevations.

Stroke is a Brain Attack

Presenting the Lesson

Give a general overview after reviewing the fact sheet, "Stroke is a Brain Attack." Call attention to the **Quiz** and the **Assess your Stroke Risk** portions of the fact sheet and instruct participants to answer with their best knowledge. You may choose to have them answer only the quiz, and save the risk rating for later in the discussion.

If you choose to use either video, show it as a general overview. If your audience contains senior citizens and/or their families, stress the fact that age is a very important risk factor, but even at an advanced age, changes can be made to reduce stroke risk. If your audience contains stroke survivors, gently state that those who have had a stroke are at an increased risk for subsequent strokes, and that prevention efforts and rehabilitation endeavors can improve their health.

If you or a group member feel comfortable taking and recording blood pressures and assessing pulse rhythms, conduct that activity before the "Assess your Stroke Risk" part of the questionnaire. Make a list of risk factors on the newsprint; leave room so that you can list lifestyle interventions and note where medical intervention is necessary. You will also want to list signs and symptoms of stroke, and stress that regardless of severity, a 911 call is merited. You could ask the following questions and discuss:

- 1. Why would people think that a stroke occurs in an organ other than the brain?
- 2. What causes a stroke?
- 3. Differentiate risk factors that can be controlled from those that cannot.
- 4. Emphasize the fact that small changes in physical activity, dietary modifications, and health check-ups can make significant improvements in risk (see "Here's how much these risk factors increase your livelihood of stroke" on the fact sheet.)
- 5. Are symptoms of stroke different individual to individual?
- 6. What should people do when a stroke occurs?
- 7. How can citizens insure that appropriate treatment for acute stroke is available in their community?

Discussion Points: Discussion of **Question 1** is crucial to the concept of stroke is a brain attack. A stroke occurs when the blood supply is cut-off to a part of the brain and brain cells become deprived of oxygen and nutrients, and stops functioning. Symptoms of stroke are symptoms of a deficit, and functions may cease or become impaired. Many people think that a stroke happens in the heart or in an arm, leg, or eye if those body parts are not working. It is important to stress that brain attacks are as much of an emergency as heart attacks (where there is intense pain and the heartbeat stops). Question 2 can be discussed in terms of the structure of the blood vessels in the brain and brain function. Question 3 and 4 explain how health factors such as high blood pressure and heart problems affect the circulation of the brain. Questions 5 calls for stressing the suddenness of stroke symptoms and that they are often one-sided. People should not wait for symptoms to get better, but call 911 immediately. Question 6 and 7 leads to discussion about securing education for hospital health care workers and for emergency medical systems. Ask participants if they would like to have risk factor evaluations and quizzes to take home to family members who they may feel are at risk. Ask if there are other groups that are interested in this lesson, and if so refer them to the Stroke Prevention Project.

Stroke is a Brain Attack

Community Activities

- Present the information in this lesson to other groups and/or organizations.
- Participants at a group lesson could decide to staff a display on stroke risk signs and symptoms at one of the events listed below.
- The guiz and risk factor evaluation can be used in conjunction with a community health professional's more in-depth assessment of stroke risk.
- The basic lesson can be used at health fairs, school open houses, PTA meetings, regularly scheduled family and community education groups, and other places where adults who care about their health gather for information.
- Prepare a series of newspaper articles or radio spots to share information about the appropriate response to stroke: this could include resources that are available for stroke treatment such as EMS response, rehabilitation, etc.

At the end of the lesson

Ask participants to raise their hands if they would answer "yes" to any of the following questions. Record the number of "yes" answers: • Do you recognize two or more risk factors for stroke that require medical attention? • If you or a family member exhibits stroke risks, do you plan to take action? _____ • What actions do you plan to take? Ask those who raise their hands what they plan to do and record their comments. Summary One in four Kansas families is affected by stroke. It is the third leading cause of death and the leading cause of adult disability. It is largely preventable if risk factors are addressed early – and largely treatable if victims respond immediately by calling 911. Community action to get the word out about stroke is vital. Lesson Leader: Share this data with K-State Research and Extension Office of Community Health. The number of people who assessed their risk for stroke_____ The number of people who may be at increased risk of stroke_____ Number planning changes in exercise______, diet ______, and blood pressure monitoring recorded in group discussion Other actions taken or planned by the group: Requests for information / education for hospital or EMS (list): There were ______ people present at the meeting on Stroke Risk. Number of participants in each age group: 18-55______ 55-65_____ 65+_____ Type of meeting_____ Lesson leader's name_____

____County___

Outdated Publication, for historical use. CAUTION: Recommendations in this publication may be obsolete.

Promote Healthier and Safer Lives

Stroke is a Brain Attack

People at high risk for stroke – and their close relatives and friends – must learn to recognize the signs and symptoms of stroke.

- Sudden numbness or weakness of face, arm, or leg, especially on one side of the body
- Sudden confusion, trouble speaking or understanding
- Sudden trouble seeing in one or both eyes
- Sudden trouble walking, dizziness, loss of balance or coordination
- Sudden severe headache with no known cause

Brain attack is an emergency - Call 911

American Stroke Association, a division of AHA, 1999

Acknowledgment: Thanks to Diane Pfannenstiel, A.R.N.P., Mike Bradshaw and Dr. Paul Estabrooks for suggestions and review

Brand names appearing in this publication are for product identification purposes only. No endorsement is intended, nor is criticism implied of similar products not mentioned.

Publications from Kansas State University are available on the World Wide Web at: http://www.oznet.ksu.edu. Contents of this publication may be freely reproduced for educational purposes. All other rights reserved. In each case, credit Susan George, ARNP, Stroke is a Brain Attack, Kansas State University, April, 2000.

Kansas State University Agricultural Experiment Station and Cooperative Extension Service

MF-2455 April 2000

It is the policy of Kansas State University Agricultural Experiment Station and Cooperative Extension Service that all persons shall have equal opportunity and access to its educational programs, services, activities, and materials without regard to race, color, religion, national origin, sex, age or disability. Kansas State University is an equal opportunity organization. Issued in furtherance of Cooperative Extension Work, Acts of May 8 and June 30, 1914, as amended. Kansas State University, County Extension Councils, Extension Districts, and United States Department of Agriculture Cooperating, Marc A. Johnson, Director.