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Every minute counts

Medical providers team up to offer swift stroke care

One minute I'm walking into the Caldwell YMCA with my friend for our morning workout. The next, I'm slumped in a chair, unable to speak or move the right side of my body, which is tingling from numbness.

Fortunately, this scene was just an act, a way to teach people about the symptoms of a stroke. But for about 795,000 Americans each year, this isn't a rehearsal.

A paramedic knelt down eye level with me, my right arm drooping helplessly toward the ground. I was completely normal all morning until now, my friend told him.



LEFT, "Can you smile for me?" says paramedic Casey Cardwell as he and EMT Sheena Markwell assess a simulated stroke patient on Thursday inside the back of an ambulance parked outside the Caldwell YMCA

He looked in my eyes and asked how I was feeling. Like many stroke patients, I could see and understand him but couldn't form any words in response. "Squeeze my hand as hard as you can," he said, placing his fingers in my left hand.

I squeezed tightly. "Now with your right," he said. I couldn't.

A second paramedic brought a stretcher close to where I sat in the YMCA's entry way. A small girl clutched her mom's hand as they walked by.

"What's wrong with her mommy?" She looked like she might start crying. I wanted to assure her everything was OK, (which the paramedics did), but I stayed in character.

In the ambulance, an oxygen tube was placed in my nostrils. The paramedics took my blood pressure and pretended to put an IV in my arm.

The man asked about my age and medical history. My friend filled him in where she could because all I could do to communicate was make gestures with my left hand. I was frustrated that I couldn't blurt out how I was feeling.

Even though I couldn't speak, the paramedics never treated me like I wasn't there. They spoke directly to me.

"You're showing signs of a stroke. We're going to get you to some very kind doctors and nurses who can help you. Just do the best you can, no one expects more of you."

In the hospital room at West Valley Medical Center, about four nurses and a doctor surrounded me, explaining what was going on, doing more “squeeze” tests, asking how I was feeling. One nurse pretended to draw blood. They put wires on my chest and stomach to monitor my heart rate and rhythm.

A nurse wheeled my bed down to the CT scan room, where doctors would be able to see if I had brain hemorrhage. From there, they would decide how to treat it.

Obviously, I can’t grasp what a real stroke patient would feel — the confusion, fear, frustration. But riding in the ambulance, surrounded by tubes, needles and fluids, my vital signs monitored on a screen behind me, I caught a glimpse of autumn leaves outside the back windows. I couldn’t help but wonder what a

true stroke patient would feel like looking out at those leaves, unable to say anything in the scariest moments of their lives.

Symptoms

Think “FAST”:

■ **Face** feels droopy and heavy. Might be hard to smile or puff out cheeks.

■ **Arms** and limbs feel weak, numb and heavy.

■ **Speech** is garbled or impaired.

■ **Time** is critical because brain cells begin to die immediately when brain issue isn’t getting oxygen through blood flow. Plus, the medicine to potentially treat an ischemic stroke works best if it’s given within three hours after the stroke begins.

Other symptoms include headache, dizziness and impaired or double vision. Symptoms become noticeable as soon as the stroke starts, Saint Alphonsus Stroke Program Director Nichole Whitener said.

To quickly respond to stroke sufferers, West Valley Medical Center and Canyon County Emergency Medical Services have teamed up with Saint Alphonsus Regional Medical Center, Idaho’s only certified stroke center.

“Stroke can happen to anyone, anywhere in the valley, and we want to make sure that people are going to be well cared for regardless of where they experience their stroke,” Whitener said.

Prevention

The number one risk factor for stroke is high blood pressure. Manage it by exercising, eating healthy foods, limiting alcohol intake, managing stress, avoiding tobacco and maintaining a healthy body weight. If you have a family history of stroke, diabetes or a heart disease, your risk for stroke increases. Learn more at the American Stroke Association website.

— Information from American Stroke Association.

What is a stroke?

Stroke is the third leading cause of death in America and the leading cause of long-term disability.

About 83 percent of stroke sufferers survive.

There are three types of stroke:

1. Ischemic (clotting): Occurs when something blocks the flow of blood to the brain. Most strokes (87 percent) are ischemic. Can be treated through medication.

2. Hemorrhagic (bleeding): Occurs when a weakened blood vessel ruptures, either bleeding in the brain or on the surface. An aneurysm means a weak part of a vessel balloons, which could rupture if left untreated. Can be treated through surgery.

3. TIA (Transient Ischemic Attack): Referred to as a “mini stroke,” caused by a temporary clot that may resolve itself. However, TIAs should still be taken seriously because they increase chances of a more potentially harmful stroke.

I’m not going to wait until the real thing, I thought, to put my health first.



Scan for a video of a simulated stroke response
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