



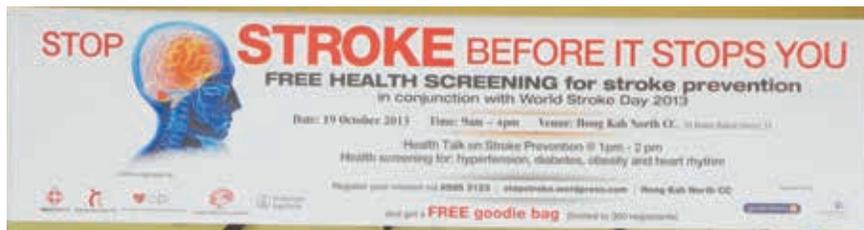
STROKE WATCH



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World Stroke Day 2013 – Singapore

By Ms Ann Yin, SNSA committee member



The Singapore National Stroke Association celebrated World Stroke Day with an event in the community entitled “Stop Stroke Before It Stops You” to raise awareness of stroke and offer free screening for stroke risk factors. This was held on 19 October at the Hong Kah Community Club in the western part of Singapore. The Singapore National Stroke Association partnered with healthcare institutions National Healthcare Group Polyclinics and Singapore General Hospital who sent volunteers to help with the health screening, as well as industry partners, EPI Mobile Health Solutions Pte Ltd, Boehringer Ingelheim and Guardian Pharmacy.

The main activity of the event was a health screening that had 262 participants. Screening included measurement of abdominal circumference as a measure of central obesity, blood pressure for hypertension and blood glucose for diabetes. Uniquely, we also performed ECG recording using a novel mobile device. Participants underwent counselling for stroke risk factors and recognition of stroke symptoms using the FAST message. Those who had abnormalities detected were referred for medical attention. Of note, 3 individuals were newly diagnosed with a form of irregular heart beat called atrial fibrillation who were asymptomatic and were referred for appropriate management including stroke prevention.

There was a booth manned by SNSA members who answered queries from members of the public and gave away stroke education material. In addition, there was a talk on ‘Understanding Stroke’ by a medical doctor, and a stroke survivor also shared his experience in a presentation entitled ‘My Stroke Story’.



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Publicity for the event appeared in the newspapers in three languages (English, Mandarin and Malay). In addition, a radio interview in Mandarin was conducted with a neurologist discussing stroke prevention in atrial fibrillation.

The SNSA is proud to have had a successful World Stroke Day event that had good participation from the public, achieved its aims of raising awareness of stroke and its prevention, in collaboration with local health care institutions as well as industry partners.



LET US SALUTE THE CAREGIVERS!

By Mr Cheong CH, Befriender with AMK Team

Why do we say this? It is because in most cases, behind every successfully rehabilitated stroke survivor is a dedicated and devoted caregiver. Here are some traits which caregivers can aim towards developing to not only equip them in leading their loved ones along the road to recovery, but also to make that passage a more fulfilling one:

Patience: Remember that a task which might seem effortless on your part might seem almost impossible for a stroke patient. Recovery seldom happens overnight, and in some cases, happens only after several months. Some patients find difficulty moving their limbs or doing things on their own because they give up too easily without making strenuous efforts. Rather than becoming overly ambitious and expecting them to do more than menial tasks, be realistic and consider letting them attempt smaller, simpler steps first. This will certainly take more time, but keep showering them with words of encouragement during the process and tell them how proud you are of their little accomplishments. You can help them regain their self-esteem and confidence this way.

Adaptability: Be it a re-configuration of the home or as one caregiver puts it, “making personal sacrifices,” having a stroke patient at home will require certain adjustments to be made. Some patients require almost round-the-clock attention. In such cases, their caregivers often have to make extensive changes to their regular schedules. Adopting a flexible attitude and exploring creative alternatives to do things are key to minimizing disruptions. Re-arranging timetables, re-managing activities and re-looking at present arrangements will help ensure that the welfare of both the patient and the caregiver are not compromised.

Perseverance: Patients who find difficulty in the co-ordination of their hands may spill their food and drinks and mess up the table. They might dirty themselves, and you have to do the cleaning up. Others are grouchy and unreasonable because they are frustrated. Fuses get shorter – and so do tempers – on the part of both the patient and caregiver. Such a scenario calls for a need of a spirit of perseverance. It means possessing a strong desire to want to overcome these odds and a hope that there is light at the end of the tunnel. Our experience is that caregivers who have demonstrated these traits often found themselves re-energised and better prepared to face the uncertainties ahead.

Determination: Many patients turn to their caregivers as their pillars of strength – and it goes beyond just the physical. As a caregiver, you will need to be strong both emotionally and spiritually when the patient cannot be. Because of slow or no recovery, some patients may just give up trying, thus sinking into bouts of depression. Caregivers therefore play the crucial role as morale boosters. Let the patient know that you understand how he feels and acknowledge that while things are not rosy, life must go on – and it might just get better!

Cheerfulness: A cheerful smile can do wonders in brightening up a patient’s day. Making a conscious effort to adopt a positive and optimistic outlook will keep your spirits up and help make the process of going through the caregiving tasks a more pleasant one. You will be amazed how you can alter a patient’s mood (and overall well-being) as you try to create the happiest recovery environment possible. After all, isn’t laughter the best medicine?

It is never easy taking on a new role as a responsible caregiver, especially when one is still coming to terms with a loved one’s condition and learning to accept that things may never be the same as they used to. The good news is that you need not have to go through this new phase of your life alone. We at the SNSA are a ready source of social support made up of former stroke patients and caregivers. Because of our past experience in dealing with the real issues faced by stroke survivors and their families, we will be able to share with you practical caregiving tips and help you cope better with the challenges you face. Call us today, and let us add a little hope and cheer as you journey along as a dedicated caregiver.



SNSA salutes caregivers

SNSA Volunteer Appreciation Event

By Ms Hafizah Amin, SNSA committee member



“Oh boy, what a noisy crowd!” I thought, when looking at the diverse group of people who gathered on that Saturday afternoon, 23rd November 2013 at the SNSA multipurpose hall. They were made up of 40 SNSA volunteers, including stroke survivors, caregivers, healthcare professionals & their families, ranging from those in their 60's to the youngest at 7 years old. Most who attended were long-serving members; others were recently inducted new volunteers. The mixed group didn't hinder them from mingling around easily. Soon, chatter filled the air, even before the event started.

That day marked the very first SNSA Volunteer Appreciation Event to express our gratitude to our volunteer heroes for their contribution to the organization. The celebration was supported by a grant from the Start Now Pte. Ltd., which headed the campaign for International Volunteer Day (IVD) 2013.

Upon arrival, volunteers were given name tags & specially-made favor bags made up of goodies & messages from the World Stroke Organisation. The event kick-started with a 'Getting to Know You session' to familiarize everyone to one another, including individual introduction, playing People BINGO! and having participants juggle many balls of newspaper, at a quick speed while they hurriedly remembered the names of their fellow group

members. The highly energetic group was then treated to a sumptuous buffet lunch during the rest break.

It was not long after that the energy surged up again, as the participants engaged themselves in the 'Sneak a Peek' game, a team-building game where members had to put their heads together and replicate a model, with only one team member taking a look at the template at any one time. The game got the crowd into a frenzy, with waves of laughter filling the air, with their humorous antics.

Soon after, the group settled down into the 'Group Sharing' session, which consisted of feedback from the volunteers for their dreams for SNSA, including activities that they would like to see organized for stroke survivors in the future. The groups shared their experiences, aspirations & ideas freely.

As the event came close to the end, it was time to bid farewell to not only one another, but also past members who have served SNSA graciously. This included an in-memoriam service, led by Eugene Escanan, SNSA Vice-President, who gave a passionate speech of their contributions. Mdm Lillian Ho, Mr Robert Tan and Mr Alfred Lee were honoured in the service.



The participants also received a certificate for their contributions and an 'SNSA Volunteer' badge from SNSA President, Dr. Deidre De Silva. Lastly, the participants gathered together to take a final group photo at the SNSA premises.

It was incredibly heartening to see such an enthusiastic community of volunteers together. Once again, for all the time, energy & heart put into volunteering, we thank you, fellow SNSA volunteers for your contributions. We look forward to seeing you again in future activities.



Nutritional Needs for Stroke Patients - Eating Good & Eating Right (Part 2)

By Ms Chan Tin Ki Vicky, Dietitian

This is a continuation of the article in the last issue of *Strokewatch* dated Sep-Dec 2013

Increase daily fibre intake

Dietary fibre is the indigestible portion in plant food. There are two types of fibre, soluble and insoluble.

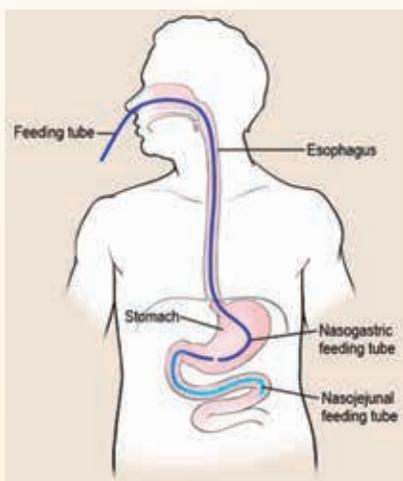
Soluble fibre helps to lower cholesterol level, prevents rapid rise of blood sugar level and prevents constipation. It comes from barley, oats, beans, legumes, vegetables and fruits. Insoluble fibre can prevent constipation, increase satiety and hence is a good weight management tool. It comes from wholegrain breads and cereals, wheat bran, vegetables and fruits. We can increase fibre intake by consuming 2 serves of vegetables (1 serve of vegetable = 100g of cooked vegetables or raw leafy vegetables) and 2 serves of fruits a day (1 serve of fruit = 1 medium apple, orange, pear, banana or mango, 1 wedge papaya, pineapple or watermelon or 10 grapes), including oats and beans as part of your daily diet, switching to wholegrain or wholemeal bread, brown rice or porridge and using wholegrain or wholemeal flour when making naan, idly, thosai and chapatti.



Management for post stroke complications

Stroke may affect a person's swallowing ability. Dietary management for stroke survivors with swallowing impairment includes enteral nutrition (tube feeding), transitional feeding (weaning off tube feeding and aiming towards oral feeding with a modified consistency diet) or solely modified consistency diet. A speech therapist will assess the person's swallowing ability and determine which mode of feeding is most suitable and safest for the stroke survivor.

Enteral nutrition refers to the delivery of a nutritionally complete feeds which provides complete macro and micronutrients directly into the stomach and intestines. The most common form of enteral nutrition is nasogastric tube feeding in which the tube is inserted from the nose to stomach. A dietitian should be consulted on the appropriate amount and choice of feeds for enteral nutrition.



Modified diet/fluid consistencies are foods or liquids that are physically altered in texture, size and consistency. Modified diet consistencies ranges from regular diet texture to being minced or blended. A Speech Therapist is skilled to ascertain the appropriate type of diet and fluid consistency for stroke survivors. People on modified diet consistency should also have a balanced diet to meet their nutrient requirements and a dietitian should be consulted for the appropriate amount of modified diet and fluid consistency.

It is important to note that some individuals with swallowing impairment may experience a loss of appetite and this may lead to malnutrition. Nutritional supplements can be used to complement poor oral intake. Food fortification is another way to help increase nutrient intake. A Dietitian can assist in meal planning and incorporate nutritional supplements or food fortification to meet a person's nutritional requirements.

Some examples of food fortification include:

- ✓ Fortify milk to 'double strength milk' by adding extra milk powder into a glass of fresh milk
- ✓ Add grated cheese, milk, yogurt, eggs or tofu to soups, sauces and gravies
- ✓ Substitute plain drinks with soybean, milk, milkshakes, smoothies or cereal beverages
- ✓ Fortifying porridge with healthy cooking oils (eg. 100% pure sesame oil), adding eggs, meat, fish, tofu, sweet potatoes/yams into porridge
- ✓ Adding yoghurt, cheeses such as cream cheese, cottage cheese, custards into fruits
- ✓ Use cheese, honey, jams, peanut butter, tuna as sandwich or cracker spreads

To conclude, the risk of stroke and heart disease can be reduced by following a healthy lifestyle which includes having a well-balanced diet that is low in fat, cholesterol and salt, and high in fibre. The use of modified consistency diet or fluids, nutritional supplements and food fortification techniques can help to manage post stroke nutrition-related complications. Do consult your Doctor or Dietitian if you have any nutrition related issues.

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World Stroke Organisation / Bill of Rights Working Group Meeting

By Mr Anthony Quek,
SNSA committee member

I, a stroke survivor & my wife Maria Wee, a care giver were honoured to represent SNSA and Singapore at the World Stroke Organisation / Bill of Rights (WSO/BOR) working group in Vienna, Austria from 19-23 September 2013.

The WSO's aim was to develop a stroke survivor/carer Bill of Rights. The working group comprised of 7 representatives from around the world and a larger reference group. The BOR considered survivors' rights with the continuum call for prevention, to acute care, rehabilitation & long term support.

In developing the BOR, members shared their experience as stroke survivors and their journey, with similar stories from the carers who without fail have shown love and caring to their loved one.

All aspects of specialized care, treatment & recovery were considered: finance, healthcare and social support systems. The continuum covered included stroke prevention, and life after stroke which included support to return to work.

Important aspects of care & recovery included psychological support, rehabilitation information, support from Non-Government Organization (NGO), understanding stroke awareness & misdiagnosis, community's communication / education.

Information and knowledge of possible future stroke attack among stroke survivors included risk factors.

Psychological and emotional support is needed during and after stroke attack. Hospital counselling should be given to stroke survivors after discharge from the hospital, and to their family and their care givers as well.

The WSO/BOL will be a global document, translated into other languages and will allow interaction with other organizations. It hopes to influence but may not be able to obligate governments.

The Group will finalize questions and draft a questionnaire for a survey. The survey will be distributed through the working group members, reference group members and WSO Board. They will continue promoting the survey until Feb 2014. Findings of the survey will be reviewed and a draft Bill of Rights prepared by April 2014. The draft will be distributed, with all comments in by June 2014. The finalized BOR will be published by Aug 2014.



My Stroke Experience at 29

By Mr Mak Kwok Fai

In 2008, at a young age of 29, my life turned upside down when I suffered a massive stroke and stayed in a hospital for about 3 months. My thinking changed after this incident.

My university professor came to visit me then; I was in a wheelchair at that time. I had tried sitting in a wheelchair, then using a walking stick. Now I can walk without any support.

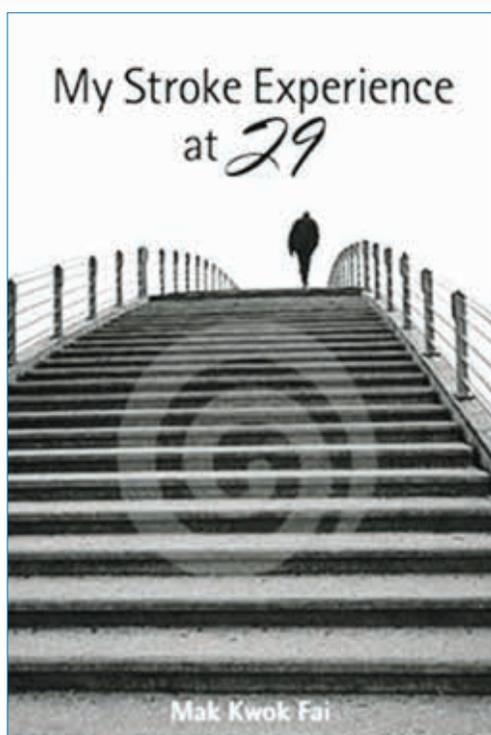
Three years later in 2011, I was about 95 percent healed. Most of my body functions were restored. I could cycle, despite a few falls due to poor balance – but I didn't really mind. I could also cook, do housework and travel on my own (within Singapore). I was doing all these chores like before I had a stroke, but at a slower pace.

I am much better now, even as I am still recovering. I have also returned to work, and am able to type with both hands. I no longer need a maid to help me. Working on my own forms an important part of my therapy for further recovery. However, I am thinner now, I moved from a hefty 70 kg to 56 kg. I have regained most of my faculties, although I walk and speak more slowly.

The road to recovery taught me many life lessons. After experiencing sitting on wheelchair, I had a better understanding of the difficulties other people with disabilities face. I realised that many things in life cannot be enjoyed without good health, and learned to appreciate my friends, family and life more.

I have documented my "Stroke Journey" in a book I wrote. It includes various stages I went through: "I Feel Giddy": My Stroke and Stay in Hospital", "Seeing a Chinese Physician", "Recovery", "Back to Work", "Doing Voluntary Work", etc. The title of the book is "My Stroke Experience at 29". This book is my honest and heartfelt, gently humorous account of my therapy return to society and working life. I published the book so that you have a better understanding of the path I went through.

The book sells at S\$10 each. Part of the proceeds from the sale of my book will go to the Singapore National Stroke Association (SNSA). My email is makkwokfai@gmail.com. You may ask me questions related to the book later.



I told my Mom that I had 'died' once; I have a new perspective to life and death now. I finally realise that '生老病死' ('being born, getting old, falling sick and dying') are unavoidable things we need to go through. It is said that the Emperor Qin Shihuang (秦始皇, the first emperor of the Qin dynasty in China) wanted to create a longevity drug (长生不老药). Many of us would like to have such a drug if it existed! But we all only live once, and we all must learn to treasure life while it lasts.

- My Stroke Experience at 29

The President, Executive Committee members and Stroke watch Editorial Board wish all members and readers a Very Happy New Year.