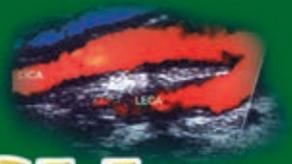




STROKE WATCH



Celebration of World Stroke Day 2012 By Ann Yin, SNSA committee member



This year, our World Stroke Day event was held on 20th October at the Yio Chu Kang Community Club Multi-purpose hall. The theme of this year's celebration of World Stroke Day continued the on-going campaign of the World Stroke Organisation, i.e. "One in Six people worldwide will get a stroke in his / her lifetime. Don't let it be YOU! Here is how you can prevent stroke and stay well even after a stroke".

Organised jointly by National Healthcare Group (NHG) and National Healthcare Polyclinics (NHGP), the other supporting organisations were the Joint Stroke Disease Management Workgroup, Singapore National Stroke Association (SNSA), Ang Mo Kio Thye Hua Kwan Hospital (AMK-THK), Tan Tock Seng Hospital (TTSH) Department of Rehabilitation Medicine, Society of Physically Disabled (SPD) and Yio Chu Kang Community Club and subgroups. The event received about 320 participants.

On the day, before the registration began at 8am, a queue of participants was already waiting to register for the free health screening. To enable participants to have a better picture of their overall health and allow for the early of detection potential health problems, Boehringer-Ingelheim provided the health screening for about 200 participants, which included measurement of blood pressure, body-mass index (BMI), blood glucose and cholesterol tests. Health counselling and advice was subsequently administered by the doctors and nurses. The key message was for participants to take charge of their own health.



Our volunteers at the SNSA booth

WORLD STROKE DAY
OCTOBER 29, 2012

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6
PEOPLE
WORLDWIDE
WILL HAVE A
STROKE
IN THEIR
LIFETIME.

Because I Care

Stop Stroke. Act Now. Join the Campaign!
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EDITORIAL BOARD

Editor

Dr Deidre Anne De Silva

Members

Dr N V Ramani
Mr Wong Sow Wei
Ms Lee Lay Beng

SINGAPORE NATIONAL STROKE ASSOCIATION

26 Dunearn Road, Level 1
Singapore 309423
Tel: 6358 4138
Fax: 6358 4139
Email: sporensa@singnet.com.sg
Website <http://www.snsa.org.sg>

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This issue of Stroke Watch is supported by Boehringer-Ingelheim Singapore Pte Ltd who kindly sponsored the layout and printing costs.



Stroke care over the years

– Perspectives from a very experienced senior nursing officer

By Sister Susan Lim

During the last part of the 20th century, stroke has slowly become more and more common in Singapore and around the world. Compared to the start of my nursing career, the incidence of stroke patients was not as prominent as it is now. Over my career, with the magnitude of research and emphasis on evidence-based practices, we have seen an era of therapeutic revolution for stroke. Many new options have developed and changes taken place in caring of the stroke patients, such as monitoring tools, stroke units and new treatments.

Nurses play a vital role in monitoring stroke patients in order to detect any subtle changes and deterioration which can then be brought to the doctor's immediate attention for appropriate treatment given. The tools to monitor patients have improved over the years. Back in the early 1970s when the Department of Neurosurgery first started in Tan Tock Seng Hospital, Neurology was part of its services. Nurses used what we still know as "Conscious Level Chart" (CLC for short), developed by our pioneer Neurosurgeons to assess the patient's conscious level, the reaction of eyes to light and limb movements. Later we changed to using the Glasgow Coma Scale (GCS), an international tool developed in 1974 by Drs Graham Teasdale and Bryan J. Jennett, professors of Neurosurgery at the University of Glasgow's Institute of Neurological Sciences. The GCS assesses the level of consciousness as well as tests eye, verbal and motor responses and is still in use today. Since 2002, nurses in my unit have been using the modified "National Institutes of Health Stroke Scale" (mNIHSS) to assess and monitor the stroke patients. Our nurses are trained and certified competent before using the mNIHSS to evaluate the patients.

Stroke units have sprung out in hospitals across the world and have proven to improve outcomes for stroke patients in many ways. In 2005, we established a Stroke Holding Area (SHA) within our Neurology ward. All stroke patients admitted to our hospital are sent here where they are assessed and monitored and to receive prompt attention to proper care and treatment. They are subsequently managed in our ward by a team of nurses, allied health professionals and doctors. The Stroke Clinical Care Pathway (CCP), a multidisciplinary management tool, was developed and implemented in our unit in 1997. This pathway enables doctors, nurses, and therapists to work together in promoting more organised and efficient patient care, providing state-of-the-art treatments thus improving patient outcomes. Nurses provide the lead in coordinating the care of the stroke patients. Our nurses conduct screening assessment and refer appropriate patients to physiotherapists, occupational therapists and speech therapists.

Advanced stroke management carried out by our doctors includes treatment with clot busting drugs and interventional procedures to unblock large blood vessel supplying the brain. These can result in faster and better recovery of our stroke patients giving them a new lease of life, and reduce the chance of a recurrent stroke.



Novel transfer device for disabled patients in use in the neurology ward managed by Sister Susan.



Sister Susan (far right) on ward rounds in the neurology ward

Treatment with the clot-busting drug recombinant Tissue Plasminogen Activator (rtPA) has become standard treatment in the management of eligible stroke patients presenting in the first few hours after symptom onset, since it was licensed in Singapore in 2005. This drug is injected into the bloodstream through an intravenous line where it travels in the blood to reach the clot that is blocking the brain blood vessel causing the stroke. Once there it begins to break up the clot with the aim that blood can flow past it toward the affected brain areas to aid recovery. The main complication of this treatment is bleeding both inside and outside the brain. Hence close observation and monitoring by the nurses is essential and vital in the care and recovery of the patient after rtPA.

Previously any serious build-up of plaque in the carotid arteries (the large blood vessels in the neck that supply major parts of the brain) can be unblocked in certain circumstances with surgery (known as Carotid Endarterectomy) and stenting. These procedures in selected patients reduce stroke risk more than medications alone. Doctors and nurses in our unit follow a standard protocol to see the stroke patient through the whole procedure. Nursing assessment and monitoring will be done before the procedure and will continue closely after the procedure. Any deterioration can thus be detected earlier and alerted to the doctors immediately for prompt action and treatment.

With the advent of new drugs and procedures, treatment of stroke has developed in new directions. Nurses have an important part to play in the care of the stroke patients and have to keep pace with the ever-changing trends in treatment. Together with the medical expertise, we will continue to see better outcomes for our stroke patients in future.



Post-stroke Depression: Dealing with difficult emotions

By Alicia Ng Kah Wei, Psychologist, Tan Tock Seng Hospital Rehabilitation Centre

We are living in an ageing population. As our lifespan increases, it is unfortunate that the rates of physical illness take the same direction as well. Stroke has become more common over recent years. Statistics show that in Singapore stroke is the fourth leading cause of death, accounting for 10-12% of all deaths, and is one of the top 10 reasons for hospitalization¹.

While survivors of stroke often receive rehabilitation for their physical impairments, psychological difficulties associated with stroke are often left unaddressed. This is unfortunate considering the high incidence of neuropsychiatric consequences of stroke such as depression and anxiety.

It has been found that 25% to 79% of survivors of stroke go on to develop depression², making it the most common neuropsychiatric consequence. Perhaps the first step to helping individuals at risk of depression is to understand why emotional difficulties are so prevalent among stroke patients.

Stroke often occurs without warning. This means stroke is something most people aren't prepared for, and thus when it strikes it leaves the individual and his/ her family helpless³. I would liken it to going to a beach without expecting or preparing for a tsunami to occur. In a few minutes, it feels like everything is taken away.

Sudden loss of physical independence, mobility and flexibility, together with the possibility of losing one's job and income all contribute to the increased likelihood of developing emotional difficulties. Sometimes it isn't just about the physical and material loss but also the loss of an anticipated future. From being an independent individual in most aspects of life to being someone who is largely dependent on the help of a caregiver in daily tasks such as toileting and showering, is likely to elicit negative thoughts and images about one's self. Often times, individuals do not just feel sad or depressed, such difficult time are often accompanied by questions like "Why me?" and "What did I do to deserve this?"

Typically, individuals develop depression within 6 months to 2 years after sustaining a stroke. What does this tell us? Depression does not develop overnight! It takes time. Thus, family members, carers, friends and healthcare professionals can all play a part in keeping watch on depressive symptoms that a stroke survivor may exhibit, and noting their frequency, intensity and duration.



If you notice that the stroke survivor is feeling sad most of the time, starts losing interest in activities he or she used to enjoy, shows significant changes in sleep or appetite, has difficulty concentrating on simple tasks, verbalizes feelings of worthlessness or guilt, and has thoughts of dying or suicide, it is important to seek professional help.



“Stroke often occurs without warning. This means stroke is something most people aren’t prepared for, and thus when it strikes it leaves the individual and his/ her family helpless”

However, it is important for stroke survivors to know that feelings of sadness are acceptable and normal under such circumstances. Survivors of stroke who have lost almost everything that they had, will grieve. However, when such feelings are prolonged and begin to interfere with day-to-day functions, it is a sign that professional help is needed.

Dealing with the Emotions

As a survivor or stroke, family member, carer or friend of any individual with stroke, what can you do?

- Have realistic expectations of yourself or of your loved ones. Recovery is a process. It doesn’t happen overnight! Give yourself or your loved one time to recover.
- Celebrate each and every achievement made during the rehabilitation process, however small it may be. Use each achievement as a motivation to press on.
- Stay focused on your goal. Are your actions helping you to achieve your goal? If yes, continue doing what you are doing. If not, change your actions.
- Be kind to yourself. Focusing on your deficits- what you cannot do and labelling yourself as “failure”, “useless”, etc will only make you feel demoralized, inadequate, anxious, hopeless and frustrated.
- Know that stroke does not just affect the individual, but it affects the entire family system as well. Therefore, stay strong as a system in a crucial time like this. A burden shared is a burden halved.
- Avoid being isolated! Never be too ashamed to ask for help. Unlike what most people think, asking for help isn’t a sign of weakness but a sign of wisdom. The Bible says “Ask and it will be given to you; seek and you will find; knock and the door will be opened to you.” (Matthew 7:7)

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Stroke in the News

A pick of some stories in 2012 on stroke and its risk factors

Sugary drinks linked to higher stroke risk: Study.

Straits Times, 31st October 2012

A study published in the American Journal of Clinical Nutrition found that intake of sugary soft drinks increased the risk of the stroke. These results are in keeping with other health effects of soda drinking such as heart attacks and diabetes.

Editor's note: High intake of sugar increases the risk of diabetes and obesity which are major risk factors for stroke.



1 million diabetics by 2050 as Singaporeans get older, fatter.

Straits Times, 2nd October 2012

It is projected that Singapore may have 1 million diabetics by 2050, based on data from the National University of Singapore Saw Swee Hock School of Public Health. Currently 11.3% of the adult population suffer from diabetes and this may rise to 15% by 2050, The two main factors for this expected rise in diabetes are the ageing population and increasing obesity.

Editor's note: The risk of stroke is higher in diabetics. A healthy lifestyle reduces the likelihood of developing diabetes. Diabetes does not cause any symptoms so it is important to go for regular health screening to detect the condition so it does not go untreated.



Deejay to champion stroke prevention.

Straits Times, 8th January 2012

Rod Monteiro, a well-known local radio deejay, suffered a stroke at the young age of 44. He shared his experience in the article as well as on his radio shows to help raise awareness of stroke prevention and the importance of presenting early to hospital for treatment.

Editor's note: Stroke does not only affect the elderly. Young people can also suffer from stroke. It is important to be aware of stroke prevention strategies, know how to lower one's stroke risk as well as to recognise stroke symptoms so as to seek medical help as soon as possible. Thanks Rod for being an ambassador for stroke awareness.

Telemedicine for Stroke.

Straits Times, 23rd February 2012

Acute clot busting treatment is proven effective for stroke patients in the first few hours from symptoms onset. Telemedicine helps to address the issue of not all hospitals having a neurologist in house 24 hours a day. These telemedicine services are now available for stroke patients presenting to Changi General Hospital and Khoo Teck Puat Hospital. When a stroke patient presents to these emergencies departments, the emergency doctors call up the neurologist at the National Neuroscience Institute. Via video conferencing links and webcam facilities, the neurologist can assess the condition by observing the emergency doctor examining the patient and view brain scans performed, advising whether the clot-busting treatment is appropriate.

Editor's note: This is an innovative measure to treat eligible patients with clot-busting stroke treatments in a fast and effective manner. Kudos to the teams at the National Neuroscience Institute, Changi General Hospital and Khoo Teck Puah Hospital.



4.5% of population addicted to smoking.

Straits Times, 29th October 2012

A nationwide study in Singapore found that 4.5% of our 5 million population are addicted to smoking and 16% were regular smokers. Among smoking addicts, 80% are men, 35.5% between 18 and 34 years old, 56.4% are married and 34.8% have completed secondary school.

Editor's note: Smoking is a major risk factor for stroke. Cessation of smoking reduces this risk significantly within a short period. There are various smoking cessation programmes available to help smokers quit.



As the theme for this year's celebration was to have a carnival like atmosphere, the various supporting organisations had activities at their booths such as games and quizzes for an interactive and fun experience. At SNSA's booth, we had participants answering questions related to stroke, with tokens given out for correct answers. The AMK-THK Hospital staff had participants using crutches and balancing a ping-pong ball on a spoon held by their mouths. The NHGP programme nurses were creative in using charts and games to explain the different types of stroke. They used plants to illustrate the difference in dead and live brain cells, emphasising the message of recognising the signs of stroke early. Participants also tried playing the the games at the TTSH Rehab Department's booth, to understand the use of technology in helping stroke survivors in their rehabilitation therapy. The SPD's booth introduced the range of appliances to help stroke survivors in speech and activities of daily living.

Lastly, the day's event ended with a Stroke Public Forum in Malay which was attended by about 200 participants. There was a talk on the early detection of stroke risk factors by Dr Yasmin Bte Idu Jion from the National Neuroscience Institute (NNI). Ms Kamilah Bte Shekh Jabin talked on reducing stroke risk and Ms Mona Liza Bte Sabadah shared her experience as a stroke survivor. The World Stroke Day celebrations ended successfully with participants receiving goodie bags filled with bread and milk sponsored by Gardenia and Marigold respectively. Most importantly, they left with a better understanding of the disease and prevention of STROKE.



Health screening stations kindly supported by Boehringer-Ingelheim



Goodie bags emphasising the "1 in 6" message



Participating in games at the AMK-THK Hospital's booth.



Using plants to explain the concepts of stroke at the NHGP programme nurses booth.