

HEART DISEASE AND STROKE

(Facts Everyone Needs to Know)

RISK FACTORS FOR HEART ATTACK AND STROKE:

NON- MODIFIABLE RISK FACTORS (things you cannot change)

- **AGE:** The incidence of stroke doubles every decade after the age of 55.
- **HEREDITY**
- **GENDER:** Risk increases in women after menopause and they have a more difficult clinical course than men. Risk of stroke is greater in men than in women.
- **RACE:** Risk of disability and death from stroke in African Americans is more than twice that of Caucasians.

MODIFIABLE RISK FACTORS (things you can and must change or control)

- **CIGARTETTE SMOKING**
- **HIGH BLOOD PRESSURE**
- **HIGH CHOLESTEROL**
- **PHYSICAL INACTIVITY**
- **DIABETES**
- **OBESITY**
- **EXCESSIVE STRESS**

WARNING SIGNS OF A HEART ATTACK:

- Chest discomfort, similar to previous “heart pain” in patients who have had a previous heart attack.
- The pain is usually described as pressure or heaviness. It may be in the center or left side of the chest, the neck, the jaw, between the shoulder blades or down the left arm. It is occasionally described as severe but not usually.
- It often occurs with activity and may be relieved by rest. It may be completely or partially relieved with the patient’s nitroglycerin pills.
- Denial is a common symptom of heart attack. The person will try to convince you that this cannot possibly be a heart problem.
- There may be sweating, nausea, vomiting, “indigestion”, and shortness of breath, cool and clammy skin. Be alert to the fact that the discomfort may not be severe and the patient may complain only of these related symptoms. Women, elderly people and diabetics are more likely to have only these “related symptoms” and often do not experience chest pain even when they are having a heart attack.

If you think that someone may be having a heart attack, Call 911!

While waiting for the paramedics have them lie down with their head slightly elevated.

The patient should not be driven to the Emergency Department. Early detection and lifesaving intervention can be initiated by paramedics.

RISK FACTORS SPECIFIC TO STROKE:

- TIA (transient ischemic attack is a brief, reversible episode of focal neurological dysfunction.)
- HEART DISEASE
- HIGH RED BLOOD CELL COUNT

WARNING SIGNS OF STROKE:

- Mild facial paralysis or difficulty speaking that may go unnoticed or denied.
- Alteration in responsiveness (confusion, stupor or coma)
- Sudden weakness or numbness of the face, arm or leg on one side of the body
- Slurred or incoherent speech
- Unexplained dizziness
- Unsteadiness, sudden falls
- Dimness or loss of vision, particularly in one eye

TO IDENTIFY PROBABLE STROKE, ASK THE INDIVIDUAL TO DO THE FOLLOWING:

S *Ask the individual to SMILE.

T *Ask the person to TALK, to SPEAK A SIMPLE SENTENCE

(Coherently: It is sunny out today.)

R *Ask him or her to RAISE BOTH ARMS.

If you believe someone may be having a stroke call 911. Paramedics can transport the patient to a STROKE CENTER where immediate CT SCAN of the brain and trained personnel are available to provide intervention for ischemic stroke. There is a 4 hour window of opportunity between the onset of symptoms and administration of a clot busting medication that can prevent permanent disability.