

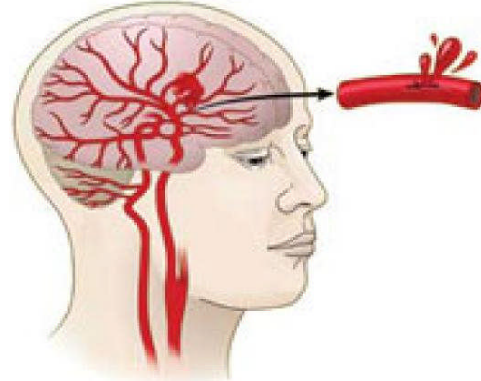
Hemorrhagic Stroke

What You Need to Know

UNM HOSPITAL STROKE CENTER

New Mexico's Only Dedicated Stroke Team

There are two kinds of stroke: Hemorrhagic and Ischemic. This booklet is about Hemorrhagic stroke.



Hemorrhagic stroke happens when a blood vessel to the brain bursts. Blood from this vessel can leak into the brain and cause damage. There are two types of hemorrhagic strokes:

Intracerebral hemorrhage (ICH) means that the bleeding is directly into the brain.

Subarachnoid hemorrhage (SAH) means that the bleeding is in between the brain and the skull.

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Stroke Program Coordinator
(505) 272-6105

Stroke Clinic
(505) 272-3160

Warning Signs of Stroke

Signs of a Stroke:

- Numbness or weakness (on one side of the body)
- Confusion
- Trouble talking or understanding speech
- Dizziness, loss of balance
- Trouble walking
- Bad headache
- Trouble seeing in one or both eyes
- Nausea or vomiting that comes on very fast
- Feeling tired, in combination with other symptoms on this list

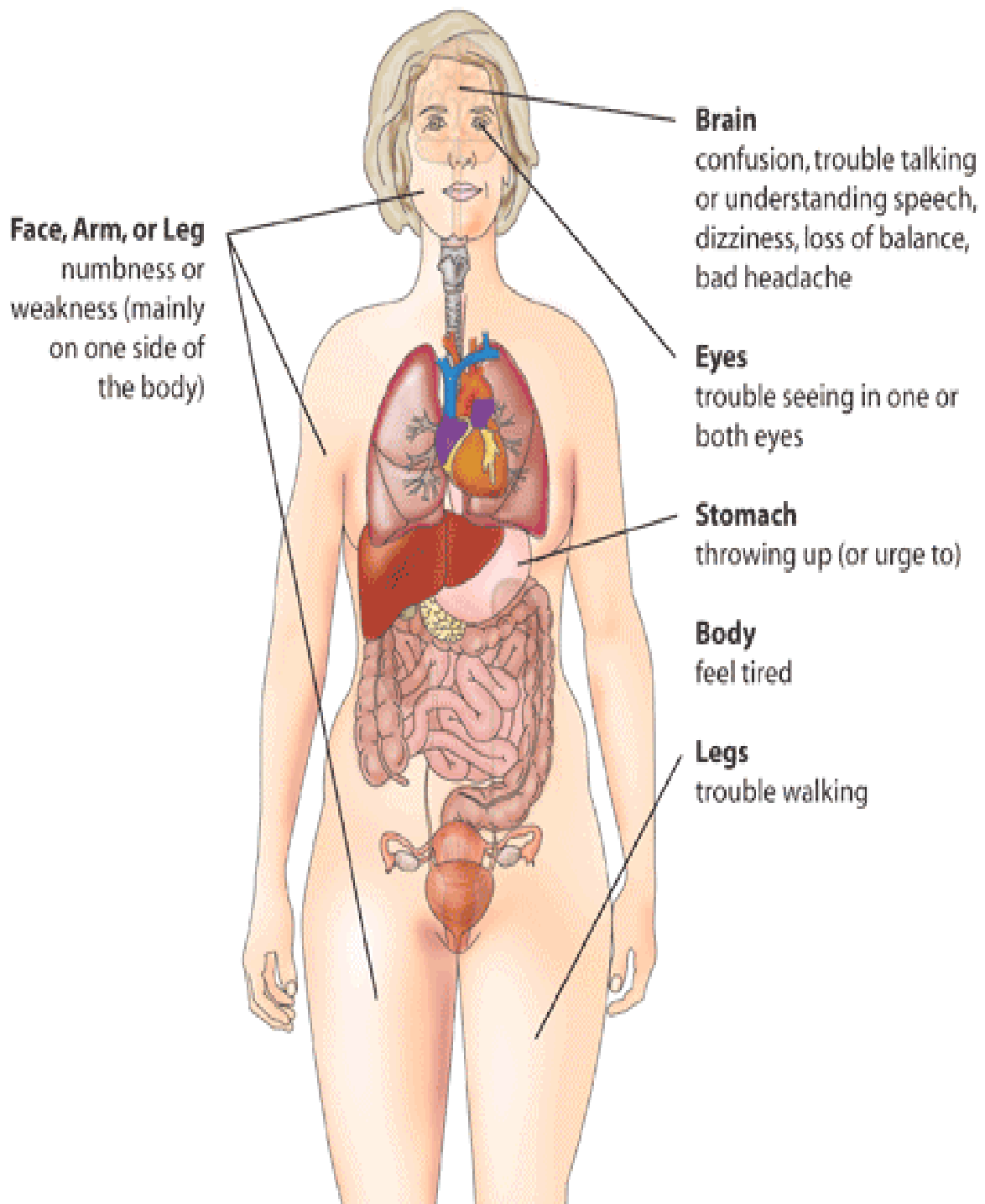
Every second counts in the treatment of a stroke. The faster that a person gets help, the better their chances for recovery.

ACT FAST!

If you have any of these signs or if you see them in someone else, call 9-1-1 or get to the ER right away!



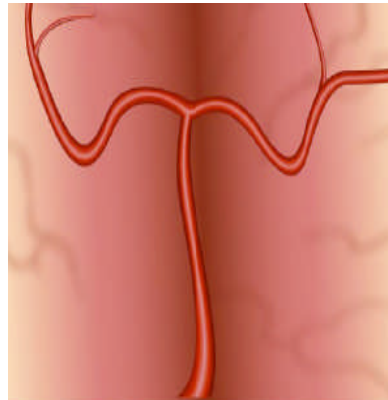
Signs of a Stroke



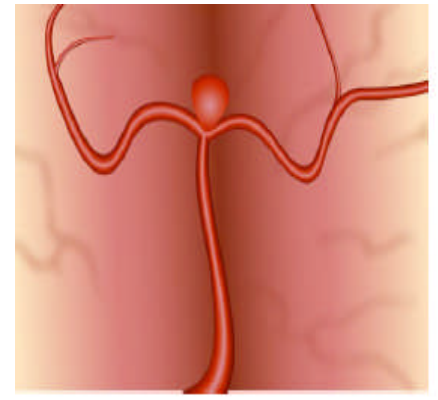
Causes of Hemorrhagic Stroke

Aneurysm

This is an area where the wall of the artery is weak. The artery gets larger or balloons out to form an aneurysm.



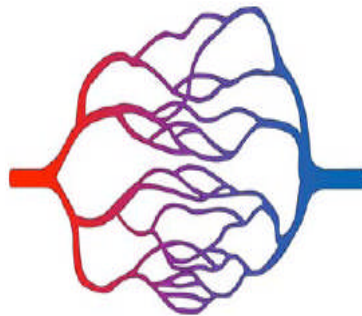
Normal vessels



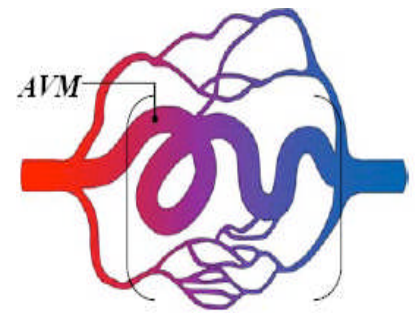
Cerebral aneurysm

Arteriovenous Malformation (AVM)

These blood vessels do not grow normally from birth.



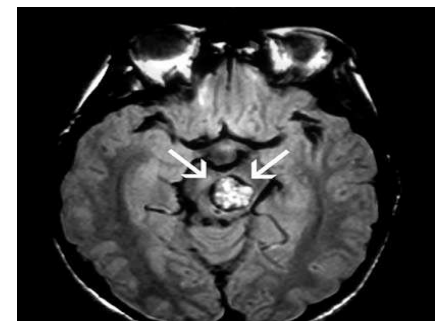
Normal Blood Vessels



Abnormal Connection of Blood Vessels

Cavernomas

This is a cluster of blood vessels within the brain.



Cavernomas look like raspberries

Cerebral amyloid angiopathy

This is where proteins build up on the arteries in the brain. This weakens the arteries and can lead to bleeding in the brain.

Tests and Treatment After a Stroke

Your doctor may order one or more of these tests to find out more about your stroke and how to give you the best treatment:

Echocardiography

This is a type of ultrasound that can show the long-term effects of high blood pressure inside the heart.

CT scan

This test takes X-rays from different points around your head.

CT angiography

This test uses a dye to show the areas of a stroke.



MRI

This test uses a powerful magnet to take pictures of the brain and its blood vessels.

Cerebral angiography: A long tiny tube called a catheter is inserted into a blood vessel at the inside top of the leg and guided up to arteries in the brain. A dye is injected to show the flow of blood through the arteries.

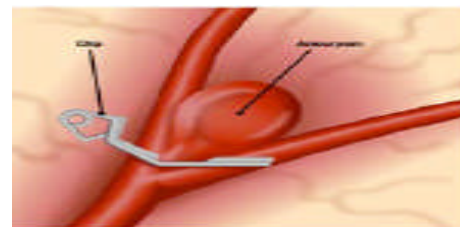
In some cases, a surgical procedure can help to avoid another hemorrhage by preventing an aneurysm from rupturing:



Ruptured aneurysm



Endovascular coiling of a cerebral aneurysm



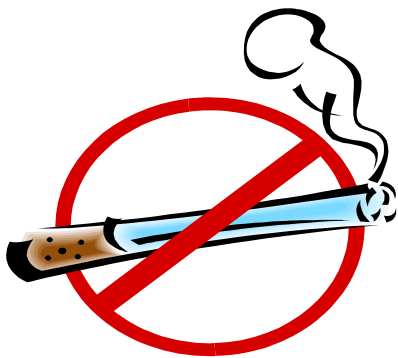
Surgical clipping of an aneurysm

How to Lower Your Risk of Stroke



Lower your blood pressure

High blood pressure is the most common cause of a stroke. It damages the heart, brain and other organs. Normal blood pressure is about 120/ 80. If you have high blood pressure, your doctor may ask you to make changes in your diet and to exercise more. You may also need to take medications to lower your blood pressure.



Do not smoke!

Smoking doubles the risk for stroke. Call the QUIT line at 1-800-QUIT-NOW to receive free coaching, as well as nicotine patches, gum or lozenges.



Limit alcohol

Limit alcohol to 2 drinks per day for men and 1 drink per day for women.



Watch your weight

Being overweight puts stress on the body. Make healthy food choices and get regular physical activity. Ask your doctor or nurse about what your weight should be and about a proper diet.

How to Lower Your Risk of Stroke



Control your diabetes

High blood sugars cause damage to the blood vessels that can lead to blood clots. Take medication for diabetes and follow a healthy eating plan.



Do not use street drugs

Taking drugs such as cocaine and methamphetamine increases the risk of stroke. These drugs increase your heart rate and blood pressure, causing damage to the arteries in the brain. If you use drugs, get help to quit. Call UNM Hospitals Addictions and Substance Abuse Program (ASAP) at (505) 925-2400.



Manage your cholesterol

Cholesterol can clog arteries. LDL and HDL are the two types of cholesterol. Your LDL should be lower than 100. Your doctor may prescribe medication to help lower your cholesterol.



Get physical exercise

Get about 30 minutes of moderate exercise — such as walking — at least 3 times per week. Ask your nurse or doctor about other exercise that would be helpful to you.

Where You Can Find Help



Stroke Coordinator

Stroke Physician

Physical or Occupational
Therapist

Nurse

Stroke Survivor

Stroke Support Meetings at UNMH

are held twice every month. Patients, families and caregivers are welcome. Ask your nurse or call the stroke program coordinator for more information (505-272-6105)

- Albuquerque Stroke Club: (505) 268-5685
- American Stroke Association: 1-888-4-STROKE; www.stroke.org
- National Stroke Association: 1-800-STROKES ; www.strokeassociation.org
- New Mexico Agency on Aging: 1-800-432-2080; www.nmaging.state.nm.us

In addition to the Stroke Support Meetings described above, University Hospital has a **Diabetes Education Program** that can help you manage your diabetes and reduce your risk of stroke. Ask your doctor or nurse practitioner for a referral or call 505-272-2340 for more information.

Medications After a Stroke

How to take your medications:

- Call your health care provider if you have side effects
- Call for medication refills 2 weeks before you run out
- Keep taking your medications even after you feel better
- Tell health care provider if you use over-the-counter medications
- Use a pillbox to organize your medications.
- Tell health care provider if you use herbs

Medications to lower blood pressure

Type of Medicine	Name of Medicine	How it Helps	Possible Side Effects
Calcium Channel Blockers	<ul style="list-style-type: none"> • Amlodipine (Norvasc) • Diltiazem (Cardizem, Tiazac) • Felodipine (Plendil) • Nimodipine 	Helps the heart work better. Can help lower blood pressure and pulse. Nimodipine prevents your blood vessels from closing.	Headache Flushing of face Dizziness Ankle swelling If taking nimodipine, it is important not to skip a dose.
ACE Inhibitors	<ul style="list-style-type: none"> • Lisinopril (Prinivil, Zestril) • Benazepril (Lotensin) • Capotril (Capoten) • Enalapril (Vasotec) • Fosinopril (Monopril) • Quinapril (Accupril) 	Widens the blood vessels to decrease blood pressure.	Dizziness Weakness Dry cough Decreased taste Metallic taste
ARB (Angiotensin Receptor Blocker)	<ul style="list-style-type: none"> • Candesartan (Atacand) • Irbesartan (Avapro) • Losartan (Cazaar) • Olmesartan (Benicar) • Telmisartan (Micardis) • Valsartan (Diovan) 	Widens the blood vessels to decrease blood pressure.	Dizziness Weakness Diarrhea
Beta Blockers	<ul style="list-style-type: none"> • Carvedilol (Coreg) • Metoprolol (Toprol XL) 	Helps the heart to relax and decrease blood pressure and heart rate.	Dizziness Slow heart rate Low blood pressure Feeling tired
Diuretics	<ul style="list-style-type: none"> • Furosemide (Lasix) *Take Lasix in morning 30 min. before you eat. • Hydrochlorothiazide (HCTZ) • Bumetanide (Bumex) • Metolazone (Mykrox, Zaroxolyn) • Spironolactone (Aldactone) 	Helps get rid of extra fluid in your lungs, legs and feet. May also lower blood pressure.	Dizziness Weakness Muscle cramps Urinate often
Anticonvulsant	<ul style="list-style-type: none"> • Levetiracetam (Keppra) 	Helps keep the brain calm and prevent seizures.	Mood changes Dizziness Weakness Unsteady walking

Recovery After a Stroke

Physical Therapy (PT)

Physical therapy helps with walking, getting in and out of bed, and balance. The therapist will help decide if you will need a walker or wheelchair to move around.



Occupational Therapy (OT)

Occupational therapy helps with activities such as dressing, bathing and eating. OT will help you to be as independent as possible.



Speech Therapy

Speech therapy helps with making and understanding words and with swallowing. Speech therapy will also help with memory and thought processes.

Recovery After a Stroke

Most people need follow up care called rehabilitation (rehab) after a stroke. Rehabilitation helps to build strength, work on balance, improve speech, and meet other goals. Your doctor will work with rehab therapists to decide the type of follow up care that is best for you. A hospital social worker will help with your placement to a rehab facility.

Rehabilitation Hospital

This is a hospital for short-term rehab. Usually people get therapy for 3 to 5 hours per day. There are many types of therapy and rehab staff available.

Skilled Nursing Facility

These are nursing homes with rehab services. They offer short or long-term care. Usually people have about an hour and a half of therapy per day. This is a good choice for people who may not be strong enough for longer therapy.

Outpatient Rehabilitation

These are places to come during the day for therapy. A person must be able to live at home and travel to the facility. Usually people come several times a week for long therapy sessions.

Rehabilitation at home

Home health services can provide therapy for short-term care. This is good for people who need only one type of therapy and are not able to travel for outpatient rehab.

Healthy Lifestyle Choices

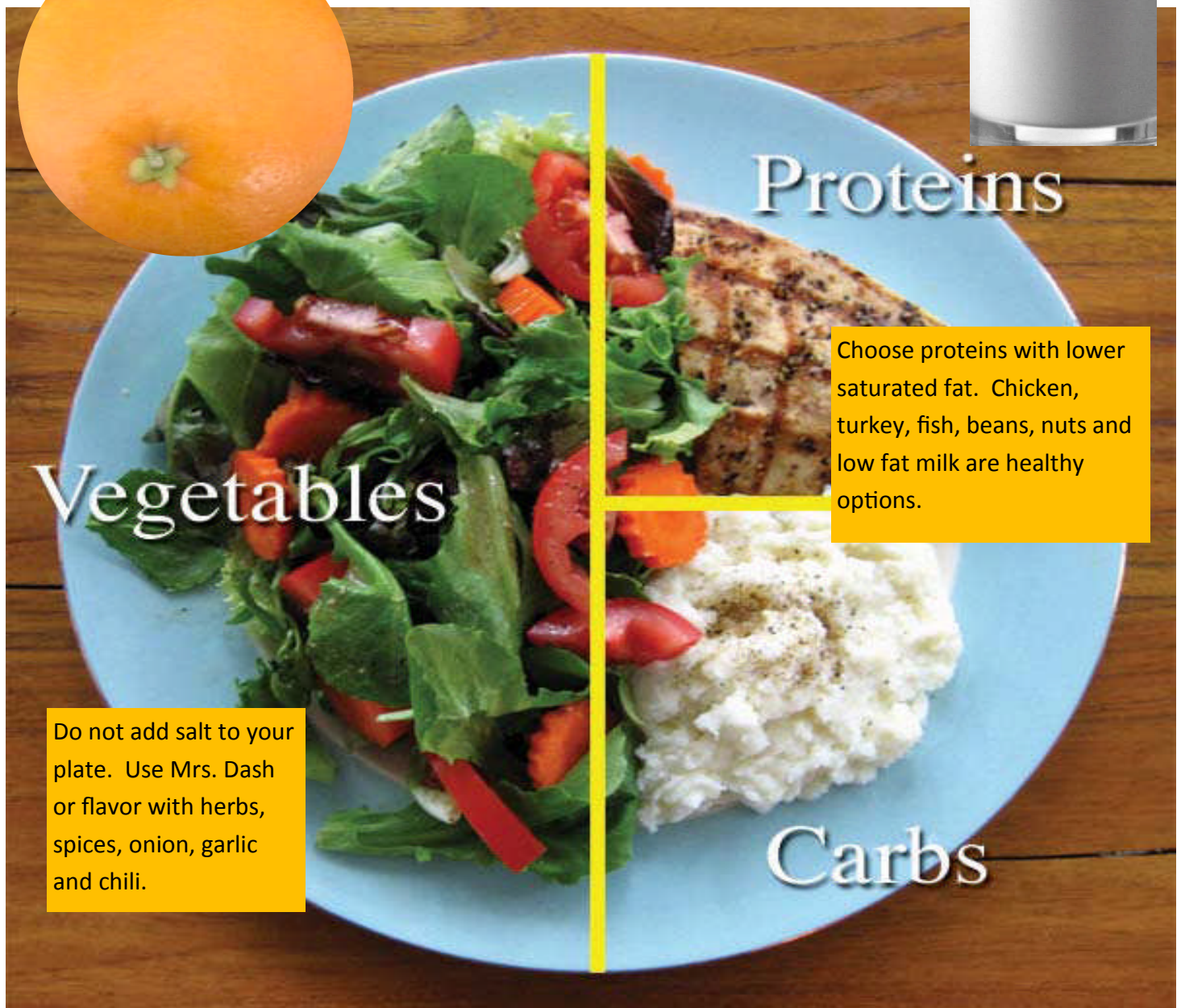
The Healthy Plate

Think of your plate as having 3 different sections:

One section for vegetables

One section for proteins

One section for carbohydrates (carbs)



Proteins

Choose proteins with lower saturated fat. Chicken, turkey, fish, beans, nuts and low fat milk are healthy options.

Vegetables

Do not add salt to your plate. Use Mrs. Dash or flavor with herbs, spices, onion, garlic and chili.

Carbs

Healthy Lifestyle Choices

You can reduce your risk of another stroke by making healthy lifestyle choices such as:

- Getting at least 30 minutes of physical exercise 3 times per week.
- Not smoking; not abusing drugs; limiting alcohol.
- Controlling your diabetes.
- Lowering your blood pressure; managing your cholesterol.
- Watching your weight and eating a healthy diet.

Limit fat, salt and sugar

Avoid foods with trans fat, and limit saturated fat in your diet.

Saturated fat comes from animal products. Eat less red meat, processed meats, ice cream and cheese. Choose foods with lower sodium to help lower your blood pressure. To limit sugar, avoid soft drinks. Look for products that are high in fiber (more than 3 grams of fiber per serving).

Nutrition Facts	
Serving Size 1 cup (228g)	
Serving Per Container 2	
Amount Per Serving	
Calories 250	Calories from Fat 110
% Daily Value*	
Total Fat 12g	18%
Saturated Fat 3g	15%
Trans Fat 1.5g	
Cholesterol 30mg	10%
Sodium 450mg	20%
Total Carbohydrate 31g	10%
Dietary Fiber 3g	0%
Sugars 5g	
Protein 5g	
Vitamin A	4%
Vitamin C	2%
Calcium	20%
Iron	4%

* Percent Daily Values are based on a 2,000 calorie diet. Your Daily Values may be higher or lower depending on your calorie needs.

Use the 10% rule:

Look for products where each of these numbers is less than 10%.

UNM HOSPITAL SERVICES

Listed below are some hospital services you can call to find information, help and support.

The Stroke Program Coordinator

505-272-6105

The Stroke Program Coordinator is here to provide information and to help you find hospital services that can help you.

OTHER HOSPITAL SERVICES

Financial Services

(505) 272-2521

Neurology Unit (5 South)

(505) 272-9086

Neuroscience ICU

(505) 272-2715

Pharmacy

(505) 272-2308

(505) 272-2309

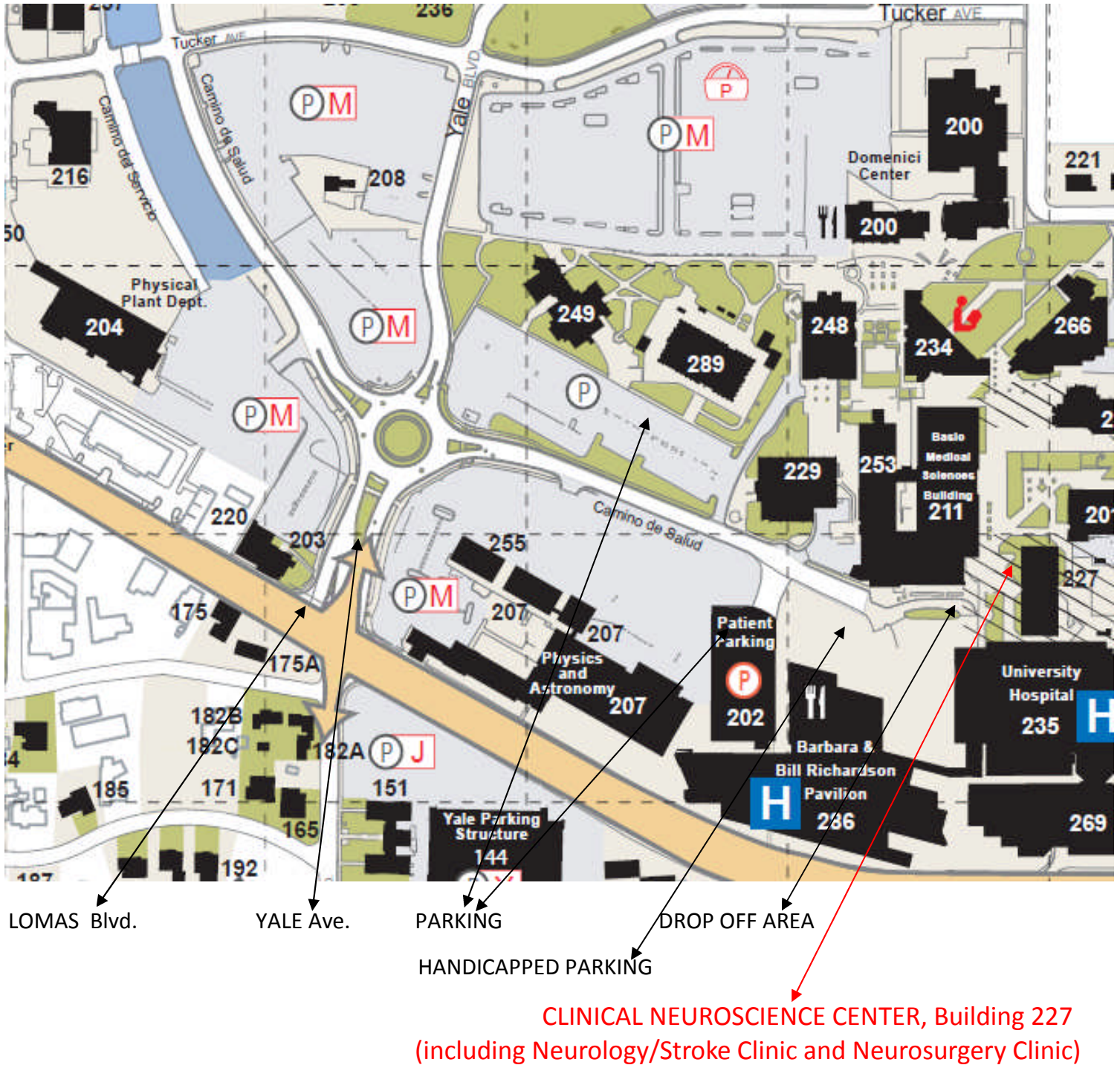
Care Management Services

(505) 272-2328

Centralized Scheduling

(505) 272-1623

MAP TO THE NEUROLOGY/STROKE CLINIC



DIRECTIONS TO YOUR FOLLOW-UP APPOINTMENT AT THE HOSPITAL:

Go to the intersection of LOMAS and YALE. Go north on Yale to the roundabout. Take the first right off of the roundabout. Park in the public parking lot on your left or the parking structure on your right (see map above).
NOTE: There is a drop-off area in front of the **NEUROLOGY/STROKE CLINIC** if you want to drop off a patient before parking your car. No parking is allowed in the drop-off area.

PARKING: Parking is available in the parking structure (Bldg. 202) or in the lot marked by the arrow on the map above. There is a shuttle service that will provide rides to patients and visitors from the parking lot or the parking structure to the door of the clinic. There are a few handicapped parking spaces available as marked above.

Follow Up Care is a MUST

Things to know about your follow up appointment(s):

- When you call for a follow up visit, tell the clinic that you were just discharged from the hospital.
- Bring all your medication bottles with you.
- If you are unsure of what your co-pay is, call financial assistance at (505) 272-2521.

Please keep your appointment(s). If you need to reschedule, call at least 24 hours before your scheduled appointment.

UNM HOSPITAL STROKE CENTER

272-6105

hospitals.unm.edu

Your follow up appointment is with:

Neurology Clinic on (date) _____
at (time) _____ (505) 272-3160

Stroke Clinic on (date) _____
at (time) _____ (505) 272-3160

Neurosurgery Clinic on (date) _____
at (time) _____ (505) 272-9494

Your primary care provider
on (date) _____ at (time) _____

Your primary care provider is:

The phone number is _____