Post Stroke Care Education

By: SLRI nurses
Mission

• The St. Luke's team believes in providing services through a patient centered model of care, which respects the needs, wants and desires of the patient and recognizes the patient's diversity and unique, individual characteristics.

• The interdisciplinary team at St. Luke’s, works closely with patients and their family to set goals to help the recovery process.
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Nutrition

• Healthy eating is good for you. It will help you manage your weight and blood pressure. Ask your doctor to arrange a visit with the dietitian as they will be able to help you how to plan meals and snacks
• Plan a variety of foods each day and plan ahead
• Eat at least five servings of fruits and vegetables per day
• Whole grain foods, low fat meat and poultry
• Choose foods low in saturated and trans fats

St. Luke’s Rehabilitation Institute
INLAND NORTHWEST HEALTH SERVICES
Nutrition

- Low fat dairy
- Low sodium
- Reduce sugar intake in drinks and foods
- Pick items from your diet, favorite recipes and adapt them to healthier ingredients
- Nutrition problems- paralysis on the left or right side and Swallowing problems
• Your doctor may suggest a special diet to help you lose weight and adapt to swallowing abilities.
• Previous health problems can impair or increase the difficulty of changing diet needs.
• Diabetes, Elevated Blood Pressure and Heart Disease.
• Managing your diabetes is a positive step toward preventing a stroke.
• A diabetic diet is vital to implement.
• Call 1-800- 342-2383 American Diabetes Association
Proper nutrition is an important part of stroke recovery and prevention. You or your loved one should have the willingness and the necessary tools to maintain a healthy diet. Some people have little appetite, ill-fitting dentures or a reduced sense of taste or smell. Some who live alone might even skip meals because of the effort of buying groceries and preparing food.
Nutrition

• Creating a plan and a list for foods
• Nutrition programs like Meals on Wheels, Church based or hot lunches offered through community centers have been established to serve the elderly and chronically ill.
• If you’re worried about eating habits of a stroke survivor who will live apart from you, seek help from these resources or from a dietitian or nutritionist.
Hydration
Hydration

• Water is a part of 55% of an elderly person body in order to function properly
• It is important to proper kidney function
• Thirst is a sign that a person is close to being dehydrated
• Hydration is important to regulate temperature
• Depending on your size and activity level, hydration needs increase.
Hydration

• Drink water and fluids
• If you have a hard time swallowing plain water or fluids, they may have to be thickened so you can swallow without having to cough thus preventing pneumonia
• Drinking fluids prevent you from having your skin get too dry as well as help with the overall health of your body
Skin Care

• It is important to prevent skin breakdown especially on your bony prominences
• Inspect your skin and keep yourself dry
• Apply lotion to your skin
• Learn some simple methods of reducing friction and shearing
• Relieve pressure by turning at least every two hours, may use some cushions, heel and elbow protectors or just elevating or floating the limb
Skin care

- Eat protein to improve the elasticity of the skin
- Hydration is important for the function and skin and body temperature
- Diabetics need to always wear shoes and check their feet daily.
- Consult your doctor with any skin breakdown
Skin Care

- Bony Prominences

- head
- shoulder
- sacrum
- buttock
- heel
Bladder Management
Bladder Management / Daytime Basics

• There will be times when you are not able to control your bladder because of injury to the brain and nerve pathways after the stroke.
• As you become more active, your bladder control may improve.
• Develop a plan to go to the bathroom regularly, at least every two hours. At a minimum you should go to the bathroom after you get up in the morning, after each meal and before you go back to bed at night.
Night time Basics

• Some stroke survivors have found that a timer or a bell helps as a reminder
• Limiting the amount of fluids after 8 p.m. will reduce the chance of late night accidents
• Still you may need to go to the bathroom at night, so keep the urinal or bedside commode at night
• If you need help to use the toilet ring a bell or use another means of awakening a family member
Urinary complications

• Contact your doctor if you notice any signs of urinary tract infection
  – Fever and a general feeling of illness and fatigue
  – Burning feeling when urinating
  – Need to urinate often
  – Cloudy, bad smelling urine

Avoid skin breakdown-
  Clean genital area and area between your buttocks each time you have trouble controlling your urine or stool
Bowel Management
Bowel Management

- Constipation - the most common bowel problem among stroke survivors, sometimes due to pain medications and lack of activity or exercise, drinking too little water.

  Set regular times for bowel movements such as right after breakfast
  - Stick to a schedule like the one you had before the stroke
  - Eat foods like cereals, vegetables and fruits that are high in roughage and fiber
  - Fiber requirements: men - 38 grams and women 25 grams
- Drink 2 to 3 quarts of liquid a day (unless your doctor restricts fluids). Water and fruit juices are best. Tea, Coffee and sodas will add to the problem as they cause the body to lose water.
- Drink hot water, prune juice or hot coffee during breakfast.
- Exercise to promote bowel elimination.
- Modify your clothing for easier management.
Bowel Complications

• Occasionally, when feces become dry and hard and remain in the bowels for a long time, liquid feces may seep out and cause diarrhea-like problem. Seek medical help if the bowels are impacted. If you have a regular problem with constipation your doctor may prescribe stool softeners, mild laxatives or suppositories.

• Over here we start giving you these after 3 days of no bowel movement.
Preventing Another Stroke

Percentage of Recurrence After First Stroke

Within 30 Days  3 to 10 %

Within a year    15 to 14%

Within 5 years   25 to 40 %
Stroke prevention facts

Key points to reduce risk factors

Stop smoking
Manage high blood pressure
Manage high cholesterol
Keep diabetes under control
Manage atrial fibrillation
Eat healthy
Increase activity level
Limit alcohol intake
Heart Disease
Many forms of heart disease can increase stroke risk.

Atrial fibrillation or AF – this is an irregular heartbeat that causes blood to form clots that can travel to the brain and cause stroke.

Anticoagulants (Like warfarin or coumadin) and antiplatelets (like Plavix) are often prescribed to treat AF.

It is important that people prescribed an anticoagulant and are monitored by a doctor.
There are two major sources of fats in the blood:

1. Cholesterol – which builds strong cells
2. Triglycerides – which provide energy

Know your goal:

- **LDL** – bad cholesterol - less than 100 mg/dl
- **HDL** – good cholesterol - Men 40 mg/dl, Women 50 mg/dl
- **Triglycerides** – (blood fats) - less than 150 mg/dl
Hypertension
Hypertension or Elevated blood Pressure

- HTN – is the major stroke risk factor and leading cause of death when left untreated
- Often asymptomatic or no symptoms
- Associated with thickening and loss of elasticity in the arterial walls, this can be a result of elevated cholesterol levels
- Family history, obesity, smoking, alcohol and diabetes all increase your risk factor
• Blood pressure is given in two numbers, for example 120/80.
• 120 or the first number is the systolic - the measurement of the force your blood exerts on the blood vessel walls as your heart pumps.
• 80 – is the lower number – the measurement of the force of your blood exerts on the blood vessel walls when your heart is at rest.
• For adults, normal blood pressure is below 120/80, and 140/90 or higher is hypertension.
How to decrease Blood Pressure

• It is important to take your blood pressure medication as directed by your physician
• Know what your BP runs, notify your MD if it goes up
• Eat a balanced diet with fruits and vegetables and low in fat
• Low to moderate exercise
• Don’t smoke and avoid other people smoke- it damages your arteries and builds up plaque
Hypertension

• Limit alcohol intake
• Cut back on sugar in foods and beverages, it raises triglycerides and lowers the good cholesterol
• Take cholesterol lowering drugs as ordered and cholesterol lab tests as directed
Transient ischemic attack
TIA or Trans ischemic Attacks

- These are mini-attacks or brief episodes of stroke-like symptoms that last from a few minutes to 24 hours
- A TIA is caused by a clot and is a temporary blockage
- They do not cause permanent disability
- They can be a serious warning signs of an impending stroke
- They can be prevented through lifestyle changes, surgery, medicines or mix of all three
Smoking Cessation

8 Reasons To Quit Smoking

- Live Longer
- Save Money
- Feel Fresh
- Look Better
- Smell Better
- Feel Better
- Improve Sex Life
- Improve Endurance
Smoking

- The nicotine in cigarettes and the lack of oxygen to the body's tissues causes blood vessels to thin and leads to strokes. Smoking makes the body unable to circulate blood properly, which in turn causes high blood pressure. The carbon monoxide from smoking cigarettes causes cholesterol deposits to form on the arterial walls. The combination of high blood pressure and high cholesterol can cause a stroke. Blood clots become more likely because of the nicotine.
Smoking Cessation

- Smoking doubles the risk of Stroke. It damages the vessel walls, speeds up artery clogging, raises blood pressure and makes the heart work harder.
- Stopping smoking today will immediately begin to decrease risk.
- There are free services nationally or locally that may be able to help you quit smoking.
- Quitline.com or 1-800- QUIT-NOW
Deep Vein Thrombosis
Deep Vein Thrombosis (DVT)

- DVT is a blood clot in a deep vein, predominantly occurs in the legs. This occurs due to three factors:
  - 1. A damaged flow rate of blood (venous stasis)
  - 2. Damage or activation of blood vessel wall
  - 3. An increased tendency for the blood to clot
Signs and symptoms

• Some patients will have no symptoms
• Unilateral (or arm) pain and tenderness (calf, groin, upper or lower arm) depending on the location of thrombosis
• Unilateral swelling of leg or arm due to occlusion of the vessel
• Positive Homans sign (pain on dorsiflexion of foot) seen in minority of patients
• Warmth over the site
Treatment

- Most patients undergo medical management and rest.
- Bed rest with elevation of extremity
- Warm, moist soaks of the area
- Anticoagulant like heparin or coumadin
- Thrombolytic therapy (TPA)
- Umbrella filter is inserted with recurrent DVT
- Thrombectomy—surgical removal of clot
Interventions/ What to do

- Watch for changes, and skin changes
- Watch for signs of shortness of breath, (as the clot may have traveled), chest pain, rapid heart rate, rapid respirations and sweating
- Avoid massaging the area
- Watch for signs of bleeding and bruising
- Avoid injury
- Use of electric razor, and soft toothbrush
Prevent a Fall
Preventing Falls At home

• Make your home safer
• Get your vision checked if needed
• Review your medications with your pharmacist
• If you’re a caregiver, stand by the weaker or paralyzed side of the family member when you have to be present in the bathroom with them
• Keep a clear path, so you have easy access to family member if falling
Post Discharge Phone Calls

• There will be different agencies who will call you asking you of how your stay was here at SLRI.

• Nurses will also call you about 1 to 2 months from the time of discharge and ask you about falls, with or without injuries, problem swallowing, readmissions to the hospital or unplanned visits to your doctor.
Resources

- http://www.strokeassociation.org/STROKEORG/LifeAfterStroke/HealthyLivingAfterStroke/Nutrition/Nutrition-Tips-for-Stroke-Survivors_UCM_308569_SubHomePage.jsp
- http://www.heart.org/HEARTORG/GettingHealthy/NutritionCenter/Recipes/Recipes_UCM_001184_SubHomePage.jsp
- http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2908954/
- http://waterintakecalculator.com/Index.html
  - http://www.stroke.org/site/PageServer?pagename=rsp
- http://www.bloodpressureuk.org/BloodPressureandyou/Thebasics/Bloodpressurechart
- http://www.strokeassociation.org/STROKEORG/AboutStroke/TypesofStroke/TIA/TIA-Transient-Ischemic-Attack_UCM_310942_Article.jsp
- http://www.amedisys.com/Amedisys/media/images/blog/Falls_Prevention_Infographic.jpg
- http://www.stockfreeimages.com/?qclid=CjwKEAjwk_OhBRD06abu3gSoxIwSJACt7sZ7caY-UK-y4ahC14hXby9Zb99CGLhdMIKWPtCAqEdhoC5Rnw_wCB