HKSH Neurology Centre

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Consultation by Appointment

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What is Stroke?



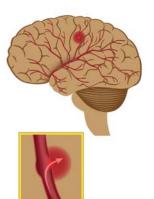
Stroke is due to Cerebrovascular Disease. It is caused by "blockage" or "rupture" of brain blood vessels, leading to insufficient oxygen supply to the brain and hence damage to the brain cells. Body functions would therefore be affected.

One in six people worldwide will suffer a stroke in their lifetime. Stroke claims an average of more than three thousand lives every year. It is the number four killer in Hong Kong and is the second leading cause of death in the Mainland.

Types of Stroke

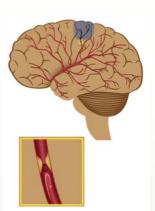
1. Haemorrhagic Stroke

It results from a weakened vessel that ruptures and bleeds into the surrounding brain areas. The blood accumulates and compresses the surrounding brain tissues.



2. Ischaemic Stroke

i. Cerebral Infarction
Ischaemic stroke
occurs as a result of
an obstruction within a
blood vessel supplying
blood to the brain,
resulting in permanent
damage of brain
tissues.



ii. Transient Ischaemic Attack (TIA)

Commonly known as "mini stroke", TIA is caused by a temporary blockage of a brain vessel. Symptoms may resolve without treatment within 24 hours. Unlike a stroke, TIA usually causes no permanent injury to the brain.

Risk Factors

- Increasing age
- Hypertension
- Diabetes
- High cholesterol level
- Heart Diseases: Atrial Fibrillation, Rheumatic Heart Disease, Coronary Heart Disease, etc.
- · History of transient minor stroke or stroke
- Obesity
- Lack of exercise
- Smoking
- Alcoholism
- · Family history of stroke

Symptoms

- Sudden onset of numbness or weakness on one side of the body
- Difficulty in speech or in understanding conversation
- Problems with swallowing or facial asymmetry
- · Sudden impaired vision or visual field defect
- Sudden dizziness, vertigo or loss of balance
- Sudden severe headache

Complications

- Pneumonia
- Swallowing impairment
- Pressure ulcer
- Frozen shoulder
- Retention of urine
- Constipation
- Gastrointestinal bleeding
- Brain swelling
- Epilepsy

Recurrence Risk

- According to research, 10% of stroke patients would have recurrent stroke or transient minor stroke within one year without appropriate treatment.
- Recurrent stroke occurs in 40% of patients within five years

Prevention

- Know about and control risk factors for stroke
- · Control blood pressure and blood sugar
- Avoid salty and fatty food
- Stop smoking
- · Avoid excessive alcohol
- Regular exercise
- Drug compliance
- Female smokers or hypertensive women should not use contraceptive pills

Treatment of Stroke

Doctors of the Neurology Centre will conduct timely and comprehensive evaluations for stroke patients to delineate the exact type and severity of stroke. Treatment plan is then formulated based on one's condition to achieve the best possible clinical outcomes.

Multidisciplinary Care

Stabilisation and prevention of complications

Ischaemic Stroke

1. Thrombolytic

Must be administered to patients within 3 hours (may be up to 4.5 hours in some patients)

2. Anti-platelets

e.g.

- Aspirin
- Clopidogrel

3. Anti-coagulants

- Heparin
- Warfarin
- New oral anticoagulants

Haemorrhagic Stroke

1. Conservative treatment

Surgical intervention not beneficial to most patients

Based on the cause of haemorrhage, specific treatment may be needed to reduce further bleeding

2. Surgical Intervention

May be life-saving in special conditions

Rehabilitation



Comprehensive Rehabilitation Treatment By Multidisciplinary Care Team

Physiotherapist, Occupational Therapist, Speech Therapist, Clinical Psychologist



Restoration of Neurological Functions

Beat Stroke, Act FAST

FAST

Seek immediate medical attention at a hospital when you are aware of any stroke symptoms!



Asymmetrical facial expressions



Weakness in the arms



Difficulties in communication



Call for emergency

Source: Hong Kong Stroke Society