

Bleeding in the brain

Hemorrhagic stroke

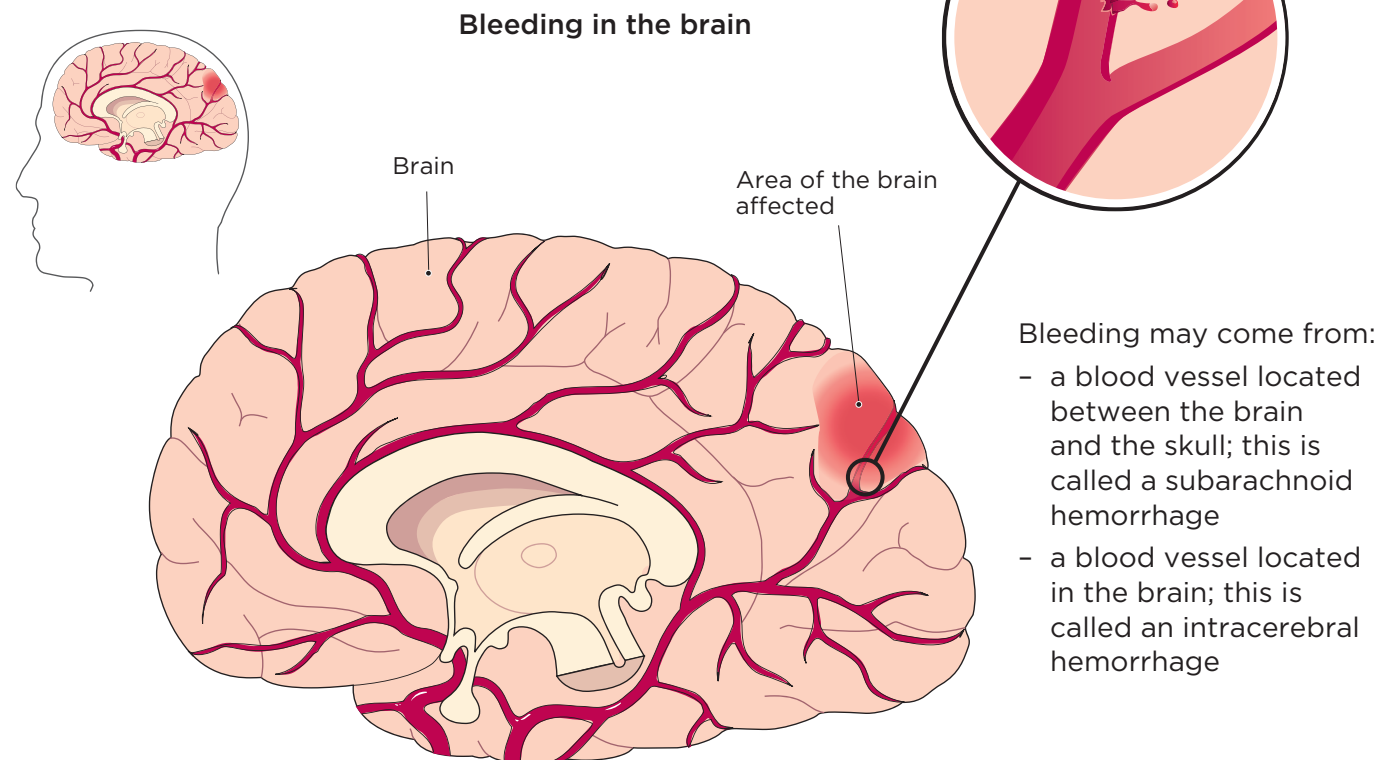


You have just had a stroke, also called a cerebrovascular accident (CVA). A blood vessel in your brain has burst, causing bleeding. This fact sheet will help you better understand what is happening to you and what you can do.

What is this problem?

This type of stroke is caused by bleeding (hemorrhage) in the brain. It causes brain cells to die because of:

- lack of oxygen (blood no longer reaches certain areas)
- blood building up at the bleeding site and crushing the brain



What are the main causes of this problem?

- high blood pressure (hypertension)
- taking certain medications (such as blood thinners) or drugs
- blood vessels can have an abnormal shape (malformations or aneurysms). This makes them weaker and sometimes they can burst

Certain factors increase the risk of stroke: having a family history of stroke and being elderly.

What are the main symptoms?

You might have some of the following symptoms:

- a sudden, strong headache
- loss of consciousness (passing out)
- agitation or sudden change in behaviour
- vomiting
- feeling that you might vomit (nausea)
- dizziness
- problems swallowing or chewing
- weakness or paralysis of the right or left side (face, arm or leg, for example)
- difficulty reading, writing, speaking, thinking, learning new things, and calculating
- needing instructions for simple tasks (such as washing your hands)
- if the bleeding is on the right side of the brain, you might have vision and memory problems: you forget about objects, people, and even parts of your body on your left-hand side (a phenomenon known as “neglect”)
- you may not realize you have this problem, and you get upset because you can’t do something (such as opening a door)



Learn the signs and symptoms of stroke so that you can react immediately if you ever have another stroke: **FAST**

FAST

Face: is it drooping?

Arm weakness (are you unable to lift both arms to the same height?)

Speech difficulty (are you having trouble talking?)

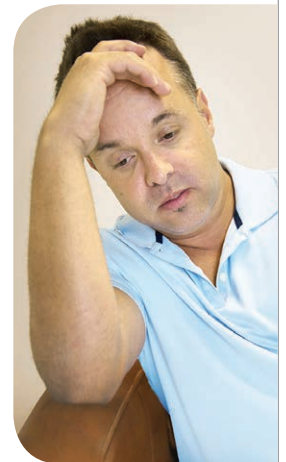
Time: it’s an emergency -- call **911!**

What can be the consequences of a stroke?

A stroke can change your life and the lives of your loved ones. After a stroke, you may have difficulty doing activities of daily living: eating, dressing, washing, going to the toilet, making a phone call, doing household chores, moving around, etc.

Other areas of your life could also be affected:

- > **Morale and mental health:** emotions, mood, behaviours, memory, thinking, organization.
- > **Physical abilities:** mobility of your hands, arms, and legs; your balance; control of urination and bowel movements; sensations and perceptions.
- > **Communication abilities:** understanding a message; speaking, articulating, or producing sounds.



It takes a lot of effort to recover from a stroke. There are ups and downs. Don’t hesitate to ask for help and to talk about your concerns.

What tests or exams might be done?

Some procedures that might be done when you arrive at the hospital include:

- a complete physical examination
- blood and urine tests
- heart function tests (electrocardiogram and echocardiogram)
- imaging tests (scans, MRI, ultrasound, etc.) to look at your brain and see how the blood is circulating, to examine your heart and lungs, etc.

How is this illness treated?

In the first few hours after a stroke, the care team will focus on:

- finding out what is happening to you (diagnosis)
- stabilizing your condition
- treating you as quickly as possible

Sometimes this type of stroke can be treated with different operations:

- Removing the blood build-up in your head. This is done under general anesthesia (you are put to sleep) and they will need to open your skull.
- Repairing abnormal blood vessels. This is also done under general anesthesia. It is not always necessary to open the skull.
- Putting small metal springs or small particles into the abnormal vessels (endovascular embolization). This is done to close the vessels, or to make them stronger. The skull doesn't need to be opened. The doctor passes a small flexible tube (catheter) from the fold of the groin up to the vessels that need to be repaired.
- Repairing the abnormal vessels with a strong dose of high-energy x-rays (radiosurgery).



How do I take care of myself in the first few days after the stroke?

- Stay in bed.
- Wear compression stockings, if prescribed by the doctor.
- Ask for help from a member of the care team to change position and to get out of bed carefully.
- Drink and eat as directed by the health care team. First, they will check to see if you have difficulty swallowing. See the fact sheet [*Detecting difficulties with swallowing.*](#)
- Follow the care team's instructions. They will encourage you to gradually resume your personal hygiene care and your activities.



The team will plan your follow-up care (rehabilitation, discharge from hospital, return home, etc.) with you and your loved ones.

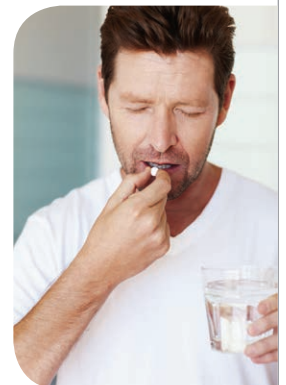
Will my medications be adjusted after the stroke?

If you were taking medication before (for diabetes, blood pressure, clotting, etc.), your doses may be changed.

You may also have to take some new ones. The doctor and nurse will tell you.

Medications can reduce the risk of having another hemorrhagic stroke. Their purpose is to:

- lower your blood pressure (antihypertensive drugs)
- control your head and neck pain (analgesics)
- reduce stress and agitation that can cause your blood pressure to rise (sedatives)



What symptoms should I be watching out for?

Tell the nurse if you have new symptoms or if your symptoms become worse. These can include:

- pain
- headache
- heartburn (nausea)
- tingling in the throat
- trouble breathing
- worsening of symptoms you already have



Can I help prevent another stroke?

Yes, there are steps you can take to reduce your risk:

- Stop smoking, if you haven't already done so.
- Eat a balanced diet low in fat and salt. Consult a nutritionist if necessary.
- Exercise for at least 20 minutes, 5 times a week.
- Take your medicine to lower blood pressure and cholesterol (fat) levels as prescribed by your doctor, if applicable.
- Monitor your diabetes by checking your blood sugar regularly, if necessary.
- Lose weight, if necessary.
- Reduce stress.



Who should I contact for help or to ask questions?

In the hospital:

Members of your care team can answer your questions.

When you are at home:

You can call your doctor or any member of the care team following you.

Tel.:



USEFUL RESOURCES

Heart and Stroke Foundation:
> **1 800-567-8563 (in Québec)**
> **heartandstroke.ca**

Other health sheets published by the CHUM are available. Ask for those that might fit your situation.



You can also find them on our web site chumontreal.qc.ca/votresante



Questions

The content of this document in no way replaces the recommendations and diagnoses made, or the treatment suggested by your health professional.

To find out more about the Centre hospitalier de l'Université de Montréal chumontreal.qc.ca

