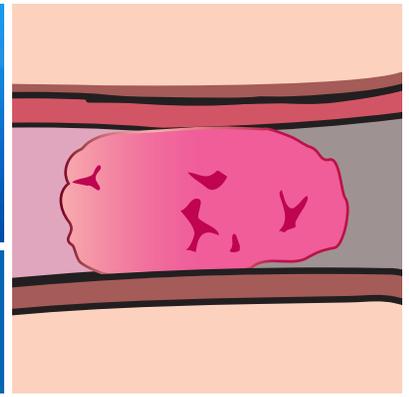


Having a blood clot in the brain

Ischemic stroke



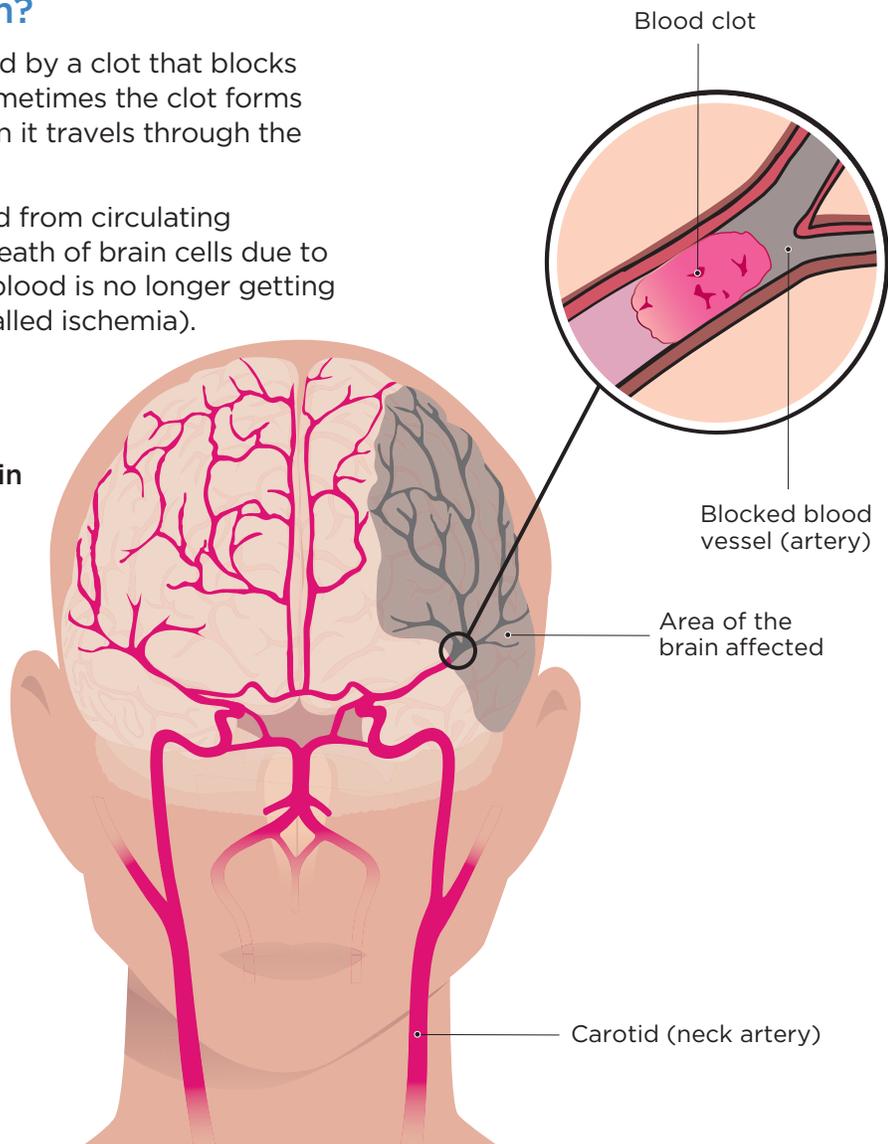
You've just had a stroke. A clot has formed in a blood vessel in your brain. This fact sheet will help you better understand what is happening to you and what you can do about it.

What is this problem?

This type of stroke is caused by a clot that blocks blood flow to the brain. Sometimes the clot forms elsewhere in the body. Then it travels through the bloodstream to the brain.

This clot prevents the blood from circulating normally. This causes the death of brain cells due to a lack of oxygen, because blood is no longer getting to certain regions (this is called ischemia).

Blood clot in the brain



What are the main possible symptoms?

Weakness or paralysis that occurs on only one side of the body: in your face, an arm, or a leg. A stroke can also cause vision loss and difficulty reading, writing, speaking, thinking, and doing calculations.

Learn the signs and symptoms of stroke so that you can react immediately if you have another stroke someday: **FAST**. See a doctor even if the symptoms go away.



FAST

Face (is it drooping?)

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

Speech problems (is your speech slurred?)

Time to call **911** (extreme emergency)

What are the main causes of this problem?

- High blood pressure (hypertension)
- High level of cholesterol (fat)
- Diabetes
- Taking drugs (such as cannabis or cocaine)



What are the possible long-term effects of a stroke?

A stroke can change your life and the lives of your loved ones. You may have difficulty doing simple activities of daily living: eating, dressing, bathing, using the bathroom, making phone calls, doing household chores, getting around, etc.

It could also affect:

- > **Morale:** emotions, mood, behaviours, thinking, organization
- > **Memory**
- > **Physical abilities:** hand, arm and leg mobility, balance, bowel and bladder control, senses and perceptions
- > **Ability to communicate:** understand a message, speak, articulate or produce sounds
- > **Fatigue**

Recovering from a stroke takes a lot of effort. There are ups and downs. Don't be afraid to ask for help and talk about your concerns.

What tests or exams might I have?

When you arrive at the hospital, you may have:

- a complete physical exam
- blood and urine tests
- heart function tests
- imaging exams (scans, MRI, ultrasound, etc.) to look at your brain and how the blood is flowing through it, etc.
- a device (Holter monitor) to be worn for 1 or 2 days to record your heart rhythm



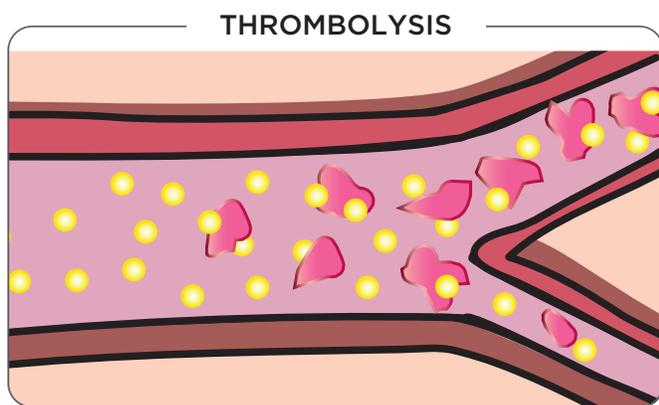
How is this illness treated?

In the first hours after a stroke, the team will try to:

- find out what is happening to you (diagnosis)
- stabilize your condition
- treat you as **FAST** as possible

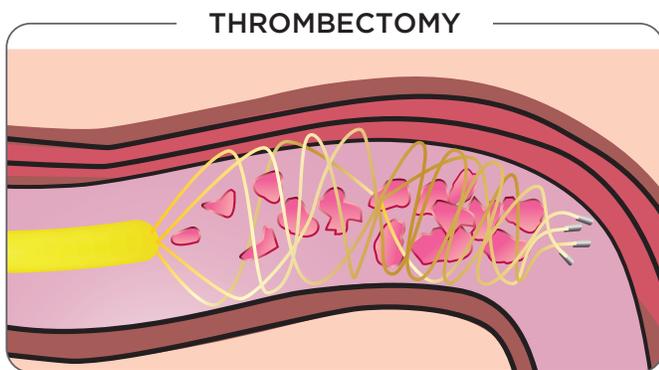
At the hospital, to treat you, they may use a medication (tenecteplase or alteplase) to dissolve the clot. This drug must be taken within 4 and a half hours of the first symptoms of stroke. See the fact sheet [Treating a stroke with a drug - Thrombolysis](#).

However, this drug is not suitable for everyone who has this type of stroke.



Depending on the case, other treatments are possible:

- > Removing the clot, using a small tube (catheter). See the fact sheet [Treating a stroke with an intervention - Endovascular thrombectomy](#).



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

- Change position and get out of bed carefully with the help of a member of the care team.
- Drink and eat as instructed by the care team. They will first need to check whether you have any trouble swallowing. See the fact sheet [Detecting problems with swallowing](#).
- Follow the care team's instructions. They will encourage you to gradually resume your personal hygiene care and activities.

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

Will my medications be adjusted after the stroke?

If you were taking any medications (diabetes, blood pressure, coagulation, etc.), your doses may be changed.

You may also be given new ones to take. If so, the doctor and the nurse will advise you.

Medications can also be used to reduce the risk of another ischemic stroke. They are designed to:

- lower blood pressure (antihypertensive drugs)
- thin the blood and prevent the formation of clots (antiplatelet drugs)

What symptoms should I watch for?

Tell the nurse if you have any new symptoms or if your symptoms get stronger. For example:

- Nervous system symptoms (such as weakness, difficulty speaking, or dizziness)
- Pain
- Headache
- Heartburn (nausea)
- Tingling in the throat
- Difficulty breathing
- Bleeding (such as persistent nose bleeds, blood in the stools)

What can I do to prevent another stroke?

Some factors can't be changed, such as your age and family history.

On the other hand, having a healthy lifestyle can help prevent another stroke. It will also be good for your overall health.

Here are some tips to help you:

- > **Be sure to take your blood pressure and cholesterol medications** as prescribed by your doctor, if applicable.
- > **Control your diabetes** by checking your blood sugar levels regularly, if applicable.
- > **Quit smoking.** It's also important to live in a smoke-free environment.



- > **Eat a balanced diet**, rich in fruits, vegetables, and legumes. Consult a nutritionist as needed.
- > **Exercise.** A minimum of 30 minutes per day of walking (or another sport) is recommended. You should do a total of at least 2 1/2 hours of moderate-intensity activity per week.
- > **Lose weight**, if necessary. Aim for a body mass index (BMI) of 18.5 to 24.9 kg/m² or a waist circumference of less than 88 cm (35 in) for women and less than 102 cm (40 in) for men.



To calculate your body mass index (BMI)

$$\text{BMI} = \frac{\text{weight in kilos}}{\text{height in meters} \times \text{height in meters}}$$

$$\text{Example: } \frac{60 \text{ kg}}{1.70 \text{ m} \times 1.70 \text{ m}} = 20.76 \text{ kg/m}^2$$

- > **Limit your alcohol intake.** See Useful Resources.
- > **Try to reduce sources of stress** in your day-to-day life.
- > **Treat your sleep apnea**, if applicable.

Who can I contact for help or to ask questions?

At the hospital

Your care team can answer your questions.

After your return home

As a CHUM patient, you can call a CHUM nurse:

- > **514 890-8086**
- > **This service is available 24 hours/day, 7 days/week**

You can also contact a nurse in the Neurosciences Outpatient Centre, Monday to Friday, from 8:00 a.m. to 4:00 p.m.:

- > **514 890-8123**



USEFUL RESOURCES

Heart & Stroke Foundation of Canada:
> **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/fiches-sante

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
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