

stroke

Sometimes referred to as a “brain attack,” a stroke is a sudden interruption of blood flow to an area of the brain. This interruption causes brain cells to die and results in brain damage.

Did you know that 80% of strokes are preventable?

To lower your risk for a first stroke, follow these guidelines from the National Stroke Association:

- Know your blood pressure and work with your doctor to prevent or reduce high blood pressure.
- Find out if you have atrial fibrillation.
- If you smoke, take steps to quit.
- If you drink alcohol, do so in moderation.
- If you have diabetes, work with your doctor to find the right medication, and make lifestyle changes.
- Include exercise in the activities you enjoy in your daily routine.
- Find out if you have high cholesterol.
- Enjoy a lower sodium (salt), lower fat diet.
- Ask your doctor if you have circulation problems.

Complete the Stroke Risk Quiz
on the back of this flier to learn
your risk for stroke. →

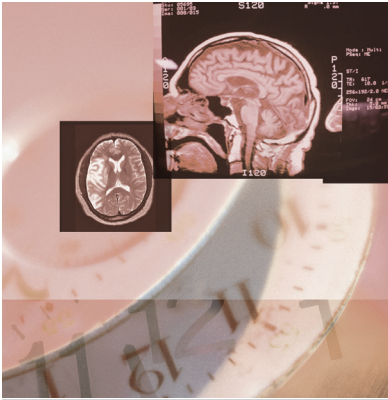
BE FAST to recognize the symptoms of stroke.

Symptoms of stroke:

- Sudden numbness or weakness of face, arm or leg, especially on one side of the body
- Sudden confusion, trouble speaking or understanding
- Sudden difficulty seeing in one or both eyes
- Sudden trouble walking, dizziness, loss of balance or coordination
- Sudden severe headache with no known cause

Use the acronym BE FAST to remember:

- B** – BALANCE – Is the person off balance when walking?
- E** – EYES – Is the person having trouble seeing?
- F** – FACE – Ask the person to smile. Does their face droop down on one side or look uneven?
- A** – ARM – Ask the person to raise both arms. Does one arm drift downward?
- S** – SPEECH – Ask the person to repeat a simple phrase such as “the sky is blue.” Do the words sound strange or slurred?
- T** – TIME – Time is critical. If you notice any of the symptoms of stroke, call 911 immediately.



Learn Your Risk

Knowledge is power. The more you know about your health, the better equipped you are to lower your risk of stroke.

Stroke Risk Quiz



Together to End Stroke™

Directions:

1. For each risk factor, select the box (higher risk or lower risk) that applies to you. Select only one box per risk factor.
2. Enter a 1 on the blank line next to each checked box.
3. Add up your total for each vertical column.

Risk Factors*	Higher Risk	Lower Risk
Is your blood pressure greater than 120/80 mm/Hg?	<input type="checkbox"/> Yes or Unknown _____	<input type="checkbox"/> No _____
Have you been diagnosed with atrial fibrillation?	<input type="checkbox"/> Yes or Unknown _____	<input type="checkbox"/> No _____
Is your fasting blood sugar greater than 100 mg/dL?	<input type="checkbox"/> Yes or Unknown _____	<input type="checkbox"/> No _____
Is your body mass index greater than 25kg/m ² ?	<input type="checkbox"/> Yes or Unknown _____	<input type="checkbox"/> No _____
Is your diet high in saturated fat, trans fat, sweetened beverages, salt, excess calories?	<input type="checkbox"/> Yes or Unknown _____	<input type="checkbox"/> No _____
Is your total blood cholesterol greater than 180 mg/dL?	<input type="checkbox"/> Yes or Unknown _____	<input type="checkbox"/> No _____
Have you been diagnosed with diabetes mellitus?	<input type="checkbox"/> Yes or Unknown _____	<input type="checkbox"/> No _____
Do you participate in 40 minutes of moderate to vigorous physical activity 3-4 days a week?	<input type="checkbox"/> No or Unknown _____	<input type="checkbox"/> Yes _____
Do you have a family history of stroke?	<input type="checkbox"/> Yes or Unknown _____	<input type="checkbox"/> No _____
Do you smoke?	<input type="checkbox"/> Yes or Unknown _____	<input type="checkbox"/> No _____
TOTAL SCORE (add your points for each column)	_____	_____

* Some stroke risk factors cannot be changed, such as age, family history, race, gender and prior stroke.

Stroke Risk Results

Did you score higher in the **Higher Risk** column, or are you unsure of your risk? Talk to your health care provider about how you can reduce your risk.